Exhibit 6

DPH contract amendment renewing MASH's certification contract through fiscal 2023, with MASH's scope of services

Source

DPH public records production, request BSAS-2025-35, first production, pages 33 to 41.

Redactions

Redactions made by the producing agency are preserved as produced. In addition to those, the Vanderburgh Foundation has redacted email addresses and telephone numbers. Our redactions are solid black boxes. Nothing else has been altered; pages appear in their original order.

COMMONWEALTH OF MASSACHUSETTS ~ STANDARD CONTRACT FORM

This form is jointly issued and published by the Executive Office for Administration and Finance (ANF), the Office of the Comptroller (CTR) and the Operational Services Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. Any changes to the official printed language of this form shall be void. Additional non-conflicting terms may be added by Attachment. Contractors may not require any additional agreements, engagement letters, contract forms or other additional terms as part of this Contract without prior Department approval. Click on hyperlinks for definitions, instructions and legal requirements that are incorporated by reference into this Contract. An electronic copy of this form is available at www[redacted] For Vendors - [redacted] Forms.

CONTRACTOR LEGAL NAME: MASSACHUSETTS ALLIANCE FOR SOBER HOUSIN	**COMMONWEALTH DEPARTMENT NAME:** Department of Public Health **MMARS Department Code:** DPH
Legal Address: (W-9, W-4,T&C): 102 CLEMATIS AVE WALTHAM, MA 02453-7018	**Business Mailing Address:** 250 Washington Street, Boston, MA 02108
Contract Manager: Jeff Gershman	**Billing Address** (if different):
E-Mail: [redacted]	**Contract Manager:** Consolo, Carolyn
Phone: [redacted] **Fax:**	**E-Mail:** [redacted]
Contractor Vendor Code: VC0000869556	**Phone:** [redacted] **Fax:**
Vendor Code Address ID (e.g. "AD001"): AD 001 (Note: The Address Id Must be set up for EFT payments.)	**MMARS Doc ID(s):** INTF2400JJ2506123347 **RFR/Procurement or Other ID Number:** 506123

☐ **NEW CONTRACT**

PROCUREMENT OR EXCEPTION TYPE: (Check one option only)

- ☐ Statewide Contract (OSD or an OSD-designated Department)
- ☐ Collective Purchase (Attach OSD approval, scope, budget)
- ☐ Department Procurement (includes State or Federal grants 815 CMR 2.00) (Attach RFR and Response or other procurement supporting documentation)
- ☐ Emergency Contract (Attach justification for emergency, scope, budget)
- ☐ Contract Employee (Attach Employment Status Form, scope, budget)
- ☐ Legislative/Legal or Other: (Attach authorizing language/justification, scope and budget)

☑ **CONTRACT AMENDMENT**

Enter Current Contract End Date *Prior* to Amendment: 06/30, 20 18,
Enter Amendment Amount: $ 1,050,000.00. (or "no change")

AMENDMENT TYPE: (Check one option only. Attach details of Amendment changes.)

- ☒ Amendment to Scope or Budget (Attach updated scope and budget)
- ☐ Interim Contract (Attach justification for Interim Contract and updated scope/budget)
- ☐ Contract Employee (Attach any updates to scope or budget)
- ☐ Legislative/Legal or Other: (Attach authorizing language/justification and updated scope and budget)

The following COMMONWEALTH TERMS AND CONDITIONS (T&C) has been executed, filed with CTR and is incorporated by reference into this Contract.

☑ Commonwealth Terms and Conditions ☐ Commonwealth Terms and Conditions For Human and Social Services

COMPENSATION: (Check ONE option): The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be supported in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under 815 CMR 9.00.

☐ Rate Contract (No Maximum Obligation. Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.)

☑ Maximum Obligation Contract Enter Total Maximum Obligation for total duration of this Contract (or *new* Total if Contract is being amended). $ 1,260,000.00.

PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must ide[redacted]PPD as follows: Payment issued within 10 days 4 % PPD; Payment issued within 15 days 0 % PPD; Payment issued within 20 days 0 % PPD; Payment issued within 30[redacted]% PPD. If PPD percentages are left blank, identify reason: ☐ agree to standard 45 day cycle ☐ statutory/legal or Ready Payments (G.L. c. 29, § 23A); ☐ only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)

BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: (Enter the Contract title, purpose, fiscal year(s) and a detailed description of the scope of performance or what is being amended for a Contract Amendment. Attach all supporting documentation and justifications.)

Renewal Only

ANTICIPATED START DATE: (Complete ONE option only) The Department and Contractor certify for this Contract, or Contract Amendment, that Contract obligations:

- ☐ 1. may be incurred as of the Effective Date (latest signature date below) and no obligations have been incurred prior to the Effective Date.
- ☑ 2. may be incured as of 07/01, 20 18, a date LATER than the Effective Date below and no obligations have been incurred prior to the Effective Date.
- ☐ 3. were incurred as of _____, 20___, a date PRIOR to the Effective Date below, and the parties agree that payments for any obligations incurred prior to the Effective Date are authorized to be made either as settlement payments or as authorized reimbursement payments, and that the details and circumstances of all obligations under this Contract are

CONTRACT END DATE: Contract performance shall terminate as of 06/30, 20 23, with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments.

CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor makes all certifications required under the attached Contractor Certifications (incorporated by reference if not attached hereto) under the pains and penalties of perjury, agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form including the Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.

AUTHORIZING SIGNATURE FOR THE CONTRACTOR:

X: _____, Date: 05/24/2018
(Signature and Date Must Be Handwritten At Time of Signature)
Print Name: Jeff Gershman
Print Title: President & Board of Directors

AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:

X: _____, Date: 5/29/2018
(Signature and Date Must Be Handwritten At Time of Signature)
Print Name: Sharon Dyer
Print Title: Director, Purchase of Service Office

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Massachusetts Alliance for Sober Housing

Fiscal Year 2018-2023

07-01-17 through 06-30-23

AMENDMENT FOR: FY19-23

Contract ID # INTF2400JJ2506123347

The scope of services for the Sober Home Certification vendor:

Certify Sober Homes Using National Standards:

Maintain affiliate status with the National Alliance of Recovery Residences (NARR).

Conduct outreach to sober homes interested in or seeking certification using Massachusetts standards. Provide information and technical assistance regarding the certification process to sober homes seeking certification.

Receive applications for sober home certification and review applications for compliance with the Massachusetts standards. Using the MASH management system, communicate with inspection vendor about houses ready for inspection at least weekly. Receive and keep records of information from inspection vendor about sober homes' inspection status.

Arrange with the Sober Homes Inspection vendor to inspect and certify sober homes that have affiliation with the vendor organization.

Issue certification for sober homes determined to be in compliance with standards. Annually re-certify sober homes.

Serve as the primary unit of accountability for the system of certified sober homes in the Commonwealth of Massachusetts:

Communicate concerns regarding certified sober homes that may require a grievance investigation to the Sober Home Inspection vendor as needed. Track and record all grievances/complaints submitted via telephone or website, record resolution and/or disposition for certified sober homes. De-certify sober homes that are determined to no longer be in compliance. Notify BSAS of decision to de-certify a sober home and provide information regarding decision to de-certify.

Propose annual revisions to the certification standards for BSAS's review and approval. Develop protocol for notifying MASH and RHC staff and certified homes of changes to standards.

Develop and foster a statewide representation and coalition:

Participate in programs and information sharing opportunities at state and national level. Provide technical assistance and information to municipalities and local government bodies about sober housing

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certification, as requested. Remain informed of current research and best practices regarding sober housing at both the state and the national level.

Organize, publicize and host quarterly information-sharing opportunities for certified sober home owner/operators in Massachusetts via telephone or webinar.

Respond to external requests for information about sober homes and sober housing certification.

Supervision and training:

Provide training and support for certified sober homes and sober homes seeking certification on best practices and standards. This includes at least three annual sessions of the two-day "Sober Housing 101" training required for certification. The Sober Housing 101 training shall take place in multiple different regions of the state.

Manage fiscal and administrative operations of certification process:

Submit monthly invoices to BSAS.

Maintain a website that provides information on all certified sober houses in the Commonwealth:

Work with the Massachusetts Substance Abuse Helpline to maintain up-to-date list of certified sober homes.

Maintain website that is accessible to the general public and contains at least an application form with instructions, certification standards, a grievance form and instructions, the Massachusetts sober home law, and an updated list of certified sober homes. The certified sober home list will be searchable by location and contain full contact information for each sober home, including address, phone number, manager or operator name, and website.

Reporting:

Generate a weekly report to include at least the number of certified homes, the number of certified homes by region, the number of beds in those homes, the number of pending homes, the number of de-certified homes, and the number of inspections scheduled and completed. Send report to BSAS weekly.

Meet regularly, at least monthly, with BSAS to provide updates on the progress and challenges of sober housing certification.

Maintain records and report to BSAS on a quarterly basis on contract activities, including trainings, certifications, technical assistance, grievances, and outreach.

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Budget

Fiscal Year 2018: $210,000

AMENDMENT

Fiscal Year 2019: $210,000

Fiscal Year 2020: $210,000

Fiscal Year 2021: $210,000

Fiscal Year 2022: $210,000

Fiscal Year 2023: $210,000

TOTAL FY18-23: $1,260,000

See attached for detailed budget.