

DEPARTMENT FOR CHILDREN AND FAMILIES (DCF)

AND

DEPARTMENT OF VERMONT HEALTH ACCESS (DVHA)

This Memorandum of Understanding is hereby entered into by the State of Vermont, Department for Children and Families (DCF), and State of Vermont, Department of Vermont Health Access (DVHA).

I. Term of agreement: July 1, 2012 through June 30, 2013

II. Specifications of Work to be Performed:

The Vermont Department of Health Access agrees to provide the following:

General Fund contribution of \$2,688.11 towards the staffing needed to provide technical assistance, training, ongoing support and evaluation of the 2005 Part B Interagency Agreement between the Agency of Human Services and the Department of Education including the implementation of Integrated Family Services.

The Department for Children and Families agrees to provide the following:

Maintenance and support of the IV-E training contract with the University of Vermont to allow for part-time staffing support around the activities necessary to support the Interagency Agreement including but not limited to technical assistance, training, and evaluation of the Interagency Agreement including the implementation of Integrated Family Services.

III. Performance Reporting to be submitted as follows:

Governing criteria for performance, monitoring, and reporting under this Memorandum of Understanding (MOU) shall be the following:

- a. **Departmental Commissioners will receive annual updates from the Interagency Agreement Implementation Committee on the status of the agreement and the training, support and evaluation activities.**

IV. Maximum Amount:

- DCF agrees to submit one invoice to DVHA as relating to this MOU which will be submitted no later than June 15, 2012 for payment. The invoice should be sent to Kate Jones, DVHA Business Office, 312 Hurricane Lane Williston, VT 05495 or kate.jones@state.vt.us.

- Based on the approved invoice, DVHA will initiate an interdepartmental transfer to reimburse DCF by the 7th day after receipt of invoice. Notification of the transfer will be sent via email to Doreen Marquis @ doreen.marquis@state.vt.us.

The maximum amount payable shall not exceed: \$2,688.11

V. Source of Funds:

a. Source of Funds:

Federal: \$ General Funds: \$2,688.11 Special Funds: \$

b. CFDA Title:

c. CFDA #:

d. Award Name:

e. Award Number:

f. Federal Granting Agency:

VI. Contact Persons for this agreement:

Department for Children and Families
Agreement manager: Doreen Marquis
Telephone #: 802-871-3397
E-mail Address:
Doreen.marquis@state.vt.us

Agency of Human Services
contact person: Melissa Bailey
Telephone #: 802-871-3259
E-mail Address:
Melissa.bailey@state.vt.us

Department of Vermont Health Access
Agreement manager: Kate Jones
Telephone#: 802-879-8256,
E-mail Address:
Kate.jones@state.vt.us

We the undersigned agree to the provisions of this agreement:

By:

Dave Yacovone
Dave Yacovone, Commissioner

Date: 6/11/12

Department for Children and Families

By:

Mark Larson
Mark Larson, Commissioner

Date: 6/8/12

Department of Vermont Health Access

APPROVED AS TO FORM:

Attorney General: _____

Date: _____