

MEMORANDUM OF AGREEMENT

DATE: June 19, 2006
TO: Pat Crocker, Executive Director, Vermont Public Transportation Association (VPTA)
FROM: Joshua Slensky, Director
RE: SFY 07 VPTA Transportation Provider Agreement

Per the attached Transportation Provider Agreement between the Office of Vermont Health Access (OVHA) and enrolled transportation providers, OVHA shall pay applicable fees for each allowable ride provided to Medicaid/Reach up beneficiaries from July 1, 2006 through June 30, 2007. For SFY07, the State shall reimburse VPTA, Provider # 1001689, for program oversight in six (6) bi-monthly payments beginning on or about the first Friday in July 2006 (Attachment B Payment Schedule). Bi-Monthly payments shall amount to \$325,224.17 per payment totaling \$1,951,345.00. In turn, VPTA shall disperse monthly payments to each broker per administrative budgets to be submitted to this office by VPTA on or before July 31, 2006. These budgets are subject to State OVHA approval.

Due to volatility of fuel costs, the rates set for van services will be reviewed quarterly and may be adjusted using an agreed upon index.

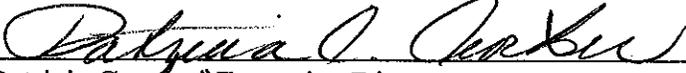
VPTA agrees to comply with "Customary State Contract Provisions" attached to this letter, and to submit to OVHA, a quarterly accounting of actual rides provided under this Agreement during each month of SFY07. During the autumn of 2006, at the State's discretion and if opted for, at a specific date to be agreed upon, VPTA agrees to coordinate and host a Transportation Broker Meeting to be attended by one or more State representatives. The purpose of this meeting, if held, shall be to clarify policies and procedures, and to resolve issues of common concern.

Attachments

- A - Medicaid/Reach up Transportation Provider Agreement
- B - Payment Schedule for SFY 07
- C - Customary State Contract Provisions
- D - Business Associate Agreement
- E - Agency of Human Services Rule #96-23
- F - Certificate of Insurance
- G - Statewide Medicaid & Reachup Transportation SFY 2007 Proposal Rev. 6/17/06 (43 pages)

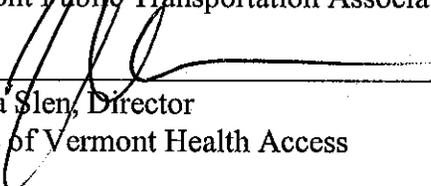


APPROVED AND AGREED UPON BY:



Patricia Crocker, Executive Director
Vermont Public Transportation Association

6/21/2006
Date



Joshua Slen, Director
Office of Vermont Health Access

6-27-2006
Date

Attachment A

MEDICAID/REACHUP TRANSPORTATION PROVIDER AGREEMENT

This Provider Agreement is entered into by and between the Office of Vermont Health Access and the Vermont Public Transportation Association (VPTA) of White River Junction, Vermont.

1. Purpose:

The purpose of this Agreement is to provide for the arrangement of and reimbursement of medically necessary transportation for Vermont Medicaid eligible persons and necessary training/employment-related transportation Vermont Reach-up participants. VPTA will maintain a statewide system which will facilitate access to transportation services through subcontracting with local area transportation companies (brokers) or its own effect, and establish new brokerage operations in regions that are transitioning service to new providers or where there have been systemic failures do to external events.

2. Definitions:

Provider: Vermont Public Transportation Association (VPTA)
Broker: Entity contracted with VPTA to provide transports
Carrier: Taxi, bus, van company, individual or volunteer drivers, etc.
Department: Office of Vermont Health Access

3. General Agreement Provisions:

- a. The period of performance under this Agreement is specified on the signature page to which this document is attached.
- b. This Agreement may be changed only in writing and only by a duly authorized representative of the parties involved.
- c. This Agreement may be terminated by either party with 90 days written notice to the other party.

4. General Provider Duties:

- a. Assure confidentiality of all eligibility information entrusted to it or its brokers.
- b. Accept agreed-upon amounts as full compensation for services provided.
- c. Bill the Department's Fiscal Agent (EDS) for services rendered by contracted brokers. Such claims shall be submitted as specified by the Department no later than 180 days after the date of service.
- d. Maintain all books, documents, payroll, papers, accounting records and other evidence of costs incurred under this Agreement and make them available at reasonable times during the period of this Agreement, and for three years thereafter, for inspection by any authorized representative of the State or federal government. If any litigation, claim, or audit commences before the expiration of the three-year period, upon notice of such action to the Provider, such records shall be retained until all litigation, claims, or audit findings involving the records have been resolved. The State, by any

- authorized representative, shall have the right at all reasonable times, to inspect or otherwise evaluate work performed or being performed by the Provider and its brokers.
- e. Provide the Department with copies of all contracts executed with brokers.
 - f. Provide broker training as necessary to assure adherence to Department policies and procedures, and to assure quality and continuity of service.
 - g. Make necessary arrangements to resolve disputes with and among brokers, and between brokers and carriers and to enforce all provisions of this Agreement.
 - h. Notify the Department without delay if it appears that transportation services may not be available in any location, and take all possible steps to restore such service.
 - i. Require sub-contractors to provide to VPTA quarterly financial reports including unaudited balance sheet and profit and loss statements with a brief narrative on performance for the quarter. Reports must be submitted 60 days after the quarter ends.
 - j. Review of each sub-contractor's cost allocation plan that is submitted to and approved by the Agency of Transportation.

5. Specific Provider Duties Regarding Medicaid Transportation:

- a. Arrange directly or indirectly through participating brokers, only medically necessary transportation (excluding ambulance services) for eligible Vermont Medicaid enrollees who qualify for transportation services.
- b. Assure that local arrangements are made within each locality statewide, for the provision and reimbursement of emergency Medicaid transportation during non-business hours and convey those arrangements to the Department.
- c. Comply with all federal and State rules applicable to Medicaid providers, and assure that brokers comply with Medicaid procedures and provisions set forth in the Department's Medicaid/Reach-up Transportation Procedural Manual (attached by reference).
- d. The provider will bear the expense of services which are denied either because the recipient was found to be ineligible for Medicaid on the date of service or because the service provided failed to meet Medicaid transportation criteria. This provision shall not apply if the Department is responsible for errors, omissions or delays.
- e. Assure that subcontractor field offices provide continuous telephone coverage Monday through Friday between the hours of 7:45 am to 4:30 pm.

6. Specific Provider Duties Regarding Reach-up Transportation:

- a. Arrange directly or indirectly through participating brokers, only necessary training/employment-related transportation for Vermont Reach-up participants as identified in writing by the Department's district offices.
- b. Assure that brokers comply with Reach-up procedures/provisions of the Department's Medicaid/Reach-up Transportation Procedural Manual (attached by reference).
- c. The provider will bear the expense of services which are denied because the recipient was found to be ineligible for Reach-up services on the date of service or because the service failed to meet Reach-up transportation criteria. This provision shall not apply and if the Department is responsible for errors, omissions or delays.

- d. Assure that subcontractor field office provides continuous telephone coverage Monday through Friday 7:45 am to 4:30 pm.

7. Duties of the Office of Vermont Health Access:

- a. Maintain and make available guidelines and definitions to assist the Provider in the operational implementation of this Agreement (attached by reference).
- b. Respond in a timely manner to pertinent questions from the Provider or brokers as appropriate.
- c. Provide timely program eligibility information to the Provider or brokers as appropriate.
- d. Provide forms for billing for both Medicaid and Reach-up transportation and for notification of denial of service.
- e. Pay the Provider for transportation costs billed in a timely and accurate manner and render such reimbursement per applicable State and Federal regulations and provisions of this Agreement.
- f. The Department extends "employee status" for purposes of general liability to persons serving as "volunteer drivers" for the provision of Medicaid and/or Reach-up transportation. Such insurance-of-last-resort afforded by the State of Vermont's policy for Bodily Injury and Property Damage Liability applies as additional insurance coverage to volunteers while operating their vehicles to fulfill applicable Medicaid and/or Reach up transportation duties. Coverage only applies to an individual acting within the scope of his or her duties as a Medicaid/Reach-up "volunteer driver" and will only be provided as "excess insurance" over and above other available coverage.

8. VPTA Central Office - Finance and Management Tasks:

- a. Provide centralized Medicaid billing for transportation brokers
- b. Reconciliation of EDS Remittance Advices (RAs) to transportation broker Program Reports (Invoices) alleviating need for local staff position at each of nine regional brokers.
- c. Functions as internal auditor of billing through reconciliation process, as well as through monitoring mode costs to insure that "the least expensive mode appropriate to client needs" is selected while conserving OVHA resources.
- d. Works with OVHA and EDS to resolve claims payments and processing issues.
- e. Provide brokers and OVHA with highly detailed quarterly and annual statistical reports on transportation expenditures by month, broker, mode, and program.
- f. Provides OVHA with a central point of contact for most program questions relative to billing and service.
- g. Provide a central annual, independent financial and overall compliance audit for OVHA.
- h. Maintains detailed accounting records, annual independent audits of brokers, and insurance certificates for all brokers in central files.
- i. Assures that brokers and sub-contractors are safe, reliable, and provide the best quality service available to meet client needs.

9. VPTA Central Office – Broker Support and Technical Assistance:

- a. Recertify brokers annually.
- b. Assure all subcontractors have proper insurance and necessities to deliver services successfully.
- c. Update all brokers on proper claim code and software protocols
- d. Provide technical assistance with compliance with changing software needs.
- e. Provide training on software, Medicaid regulation, specialized passenger service needs, and HIPPA compliance which began in 2003.
- f. Engage a computer consultant to provide management information systems software and data management programs that work with EDS systems for all brokers needing HIPPA compliant software.
- g. Provide staff support and management services for software for billing and tracking along with troubleshooting assistance when necessary.
- h. Resolve questions from brokers relative to payments and denied claims.
- i. Maintain working capital account and line of credit to support brokers awaiting claims payments or in emergency situation (i.e., equipment failures or systemic failures to assure uninterrupted service).

10. VPTA Central Office – Client Relations will alleviate workload of OVHA staff by:

- a. Maintain an 800 number and field high volumes of calls
- b. Refer 800 line caller to the appropriate service provider and/or program for covered services whether public transit, carpooling, or social service transportation including Medicaid
- c. Mediate disputes and/or resolve problems between brokers and clients when special situations or complaints arise.
- d. Approve doctor referrals for unusual or out of state trips.
- e. Directly assist beneficiaries to book lodging at approved locations using VPTA credit. This service insures that only covered services are provided by having accommodation billed directly to VPTA.
- f. Use central staff to arrange special transportation by rail or air transports for out of state travel working directly with case workers and clients while insuring the least costly, most appropriate mode is selected.
- g. Use advanced bookings and direct billing procedures to cover the cost of out of state travel and lodging that would otherwise present a burden to small providers or clients.
- h. Work closing with OVHA staff to ensure that objectives and parameters of the Medicaid transportation components are met while complying with guidelines in the Vermont Medicaid/Reach-up Transportation Procedural Manual (12/00) or successor.

11. VPTA Central Office – Reporting Requirements:

Submit quarterly and a year end spreadsheet with the following information pertaining to the Medicaid program that shall be provided by each of the brokers. Information to include the number and mode and cost of the trips for the following categories:

1. Successful Trip (i.e. Scheduled-Taken)
2. Client Rescheduled
3. Broker Rescheduled
4. Client Canceled in Advance
5. No-Show - Canceled
6. No-Show - Driver
7. Successful Trip Scheduled within the last 48 hours (i.e. Last Minute Trip Request)

For implementation purpose the first quarter of SFY 06 will be a partial quarter and these reports are expect to be fully implemented by the second quarter of SFY 06.

12. VPTA Central Office-AHS Notifications and Quarterly Performance Reports:

VPTA provide Cathy Voyer, Director of Housing and Transportation; e-mail address is cathyv@ahs.state.vt.us with one annual schedule for SFY 07 of all anticipated board meetings for VPTA and sub contractors. All sub contractors shall provide VPTA seven (7) days advance notice for any changes.

VPTA shall compile sub contractors quarterly financial and operating status reports 60 days after the quarter ends and provide those to Cathy Voyer, AHS and Samantha Haley, OVHA.

13. Other Contract provisions

No-Shows In accordance with CMS regulations, only services delivered may be paid. No-shows may not be billed to Medicaid. To reduce the incidence of no shows, we will agree upon policies and procedures for enforcement and sanctions for beneficiaries who violate the agreed upon policy. A draft policy is currently circulating among stakeholders for comment. OVHA will work jointly with the providers in the enforcement of this policy.

Urban Area Bus Pass Program VPTA, CCTA and OVHA will work together to up-date and redesign the bus program to ensure that it is both helpful to the beneficiaries and cost effective. The mutually agreed upon provisions will be developed during the first quarter of State Fiscal Year 2007 and be implemented as soon as practical. The agreement may be amended to include modifications to the CCTA administration grant as necessary to accomplish this objective.

Special Services Transportation Special transportation services to OVHA approved mental health facilities will be provided by agreement with several of the service providers covered by this agreement. Referenced separately this year is Special Services Transportation Agency, Colchester, VT. Additional special services may be provided upon mutual agreement and available resources among the providers and appended to this agreement.

Out of State Travel VPTA will step up monitoring of out-of-area and out-of-state travel for treatments. No out of state travel will be reimbursed unless VPTA staff has reviewed and determined the need for this service.

Attached by Reference

Vermont Medicaid/Reach-up Transportation Procedural Manual (12/00) or successor

ATTACHMENT B
Payment Schedule for SFY 07
VPTA, Provider # 1001689

July 7, 2006	\$ 325,224.17
September 1, 2006	325,224.17
November 3, 2006	325,224.17
January 5, 2007	325,224.17
March 2, 2007	325,224.17
May 4, 2007	<u>325,224.17</u>
Total	<u>\$1,951,345.02</u>

ATTACHMENT C
CUSTOMARY STATE CONTRACT PROVISIONS

1. Entire Agreement. This contract represents the entire agreement between the parties on the subject matter. All prior agreements, representations, statements, negotiations, and understandings shall have no effect.
2. Applicable Law. This contract will be governed by the laws of the State of Vermont.
3. Appropriations. If this contract extends into more than one fiscal year of the state (July 1 to June 30), and if appropriations are insufficient to support this contract, the State may cancel at the end of the fiscal year, or otherwise upon the expiration of existing appropriations authority.
4. No Employee Benefits for Contractors. The Contractor understands that the State will not provide any individual retirement benefits, group life insurance, group health and dental insurance, vacation and sick leave, workers compensation or other benefits or services available to State employees, nor will the State withhold any federal or state taxes except as required under applicable tax laws, which shall be determined in advance of execution of the contract. The Contractor understands that all tax returns required by the Internal Revenue Code and the State of Vermont, including but not limited to income, withholding, sales and use, and rooms and meals, must be filed by the Contractor, and information as to contract income will be provided by the State of Vermont to the Internal Revenue Service and the Vermont Department of Taxes.
5. Independence, Liability. The Contractor will act in an independent capacity and not as officers or employees of the State. The Contractor shall indemnify, defend and hold harmless the State and its officers and employees from liability and any claims, suits, judgments, and damages arising as a result of the Contractor's acts and/or omissions in the performance of this contract. The Contractor shall notify its insurance company and the State within 10 days of receiving any claim for damages, notice of claims, pre-claims, or service of judgments or claims, for any act or omissions in the performance of this contract.
6. Insurance. Before commencing work on this contract the Contractor must provide certificates of insurance to show that the following minimum coverage are in effect. The Contractor must notify the State no more than 10 days after receiving cancellation notice of any required insurance policy. It is the responsibility of the Contractor to maintain current certificates of insurance on file with the State through the term of the contract. Failure to maintain the required insurance shall constitute a material breach of this contract.

Workers Compensation: With respect to all operations performed, the Contractor shall carry workers compensation insurance in accordance with the laws of the State of Vermont.

General Liability and Property Damage: With respect to all operations performed under the contract, the Contractor shall carry general liability insurance having all major divisions of coverage including, but not limited to:

Premises - Operations
Independent Contractors' Protective
Products and Completed Operations
Personal Injury Liability
Contractual Liability

The policy shall be on an occurrence form and limits shall not be less than:

- \$1,000,000 Per Occurrence
- \$1,000,000 General Aggregate
- \$1,000,000 Products/Completed Operations Aggregate
- \$ 50,000 Fire Legal Liability

Automotive Liability: The Contractor shall carry automotive liability insurance covering all owned, non-owned and hired vehicles used in connection with the contract. Limits of coverage shall not be less than: \$1,000,000 Combined single limit.

Professional Liability: Before commencing work on this contract and throughout the term of this contract, the Contractor shall procure and maintain professional liability insurance for any and all services performed under this contract, with minimum coverage of \$ N/A per occurrence.

No warranty is made that the coverage and limits listed herein are adequate to cover and protect the interests of the Contractor for the Contractor's operations. These are solely minimums that have been set to protect the interests of the State.

7. **Reliance by the State on Representations:** All payments by the State under this contract will be made in reliance upon the accuracy of all prior representations by the Contractor, including but not limited to bills, invoices, progress reports and other proofs of work.
8. **Records Available for Audit.** The Contractor will maintain all books, documents, payroll, papers, accounting records and other evidence pertaining to costs incurred under this agreement and make them available at reasonable times during the period of the contract and for three years thereafter for inspection by any authorized representatives of the State or Federal government. If any litigation, claim or audit is started before the expiration of the three year period, the records shall be retained until all litigation, claims or audit findings involving the records have been resolved. The State, by any authorized representative, shall have the right at all reasonable times to inspect or otherwise evaluate the work performed or being performed under this contract.
9. **Fair Employment Practices and Americans with Disabilities Act:** Contractor agrees to comply with the requirement of Title 21 V.S.A. Chapter 5, Subchapter 6, relating to fair employment practices, to the full extent applicable. Contractor shall also ensure, to the full extent required by the Americans with Disabilities Act of 1990, that qualified individuals with disabilities receive equitable access to the services, programs, and activities provided by the Contractor under this contract. Contractor further agrees to include this provision in all subcontracts.
10. **Set Off:** The State may set off any sums which the Contractor owes the State against any sums due the Contractor under this contract; provided, however, that any set off of amounts due the State of Vermont as taxes shall be in accordance with the procedures more specifically provided hereinafter.
11. **Taxes Due to the State.**
 - a. Contractor understands and acknowledges responsibility, if applicable, for compliance with State tax laws, including income tax withholding for employees performing services within the State, payment of use tax on property used within the State, corporate and/or personal income tax on income earned within the State.

b. Contractor certifies under the pains and penalties of perjury that, as of the date the contract is signed, the Contractor is in good standing with respect to, or in full compliance with, a plan to pay any and all taxes due the State of Vermont.

c. Contractor understands that final payment under this contract may be withheld if the Commissioner of Taxes determines that the Contractor is not in good standing with respect to or in full compliance with a plan to pay any and all taxes due to the State of Vermont.

d. Contractor also understands the State may set off taxes (and related penalties, interest and fees) due to the State of Vermont, but only if the Contractor has failed to make an appeal within the time allowed by law, or an appeal has been taken and finally determined and the Contractor has no further legal resource to contest the amounts due.

12. Child Support. (Applicable if Contractor is a natural person, not a corporation or partnership.) Contractor states that, as of the date the contract is signed, he/she:
- is not under any obligation to pay child support; or
 - is under such an obligation and is in good standing with respect to that obligation; or
 - has agreed to a payment plan with the Vermont Office of Child Support Services and is in full compliance with that plan.

Contractor makes this statement with regard to support owed to any and all children residing in Vermont. In addition, if the Contractor is a resident of Vermont, Contractor makes this statement with regard to support owed to any and all children residing in any other state or territory of the United States.

13. Subcontractors. The Contractor shall not assign or subcontract the performance of this agreement or any portion thereof to any other contractor without the prior written approval of the State. Contractor also agrees to include in all subcontract agreements a tax certification in accordance with paragraph II above.

Notwithstanding the foregoing, the State agrees that the Contractor may assign this contract, including all of the Contractor's rights and obligations hereunder, to any successor in interest to the Contractor arising out of the sale of or reorganization of the Contractor.

14. No Gifts or Gratuities. Contractor shall not give title or possession of any thing of substantial value (including property, currency, travel and/or education programs) to any officer or employee of the State during the term of this contract.

15. Copies. All written reports prepared under this contract will be printed using both sides of the paper.

16. Access to Information. The Contractor agrees to comply with the requirements of AHS Rule No. 96-23 concerning access to information. The Contractor shall require all of its employees performing services under this contract to sign the AHS affirmation of understanding or an equivalent statement.

17. Suspension and Debarment. Non-federal entities are prohibited by Executive Orders 12549 and 12689 from contracting with or making sub-awards under covered transactions to parties that are suspended or debarred or whose principals are suspended or debarred. Covered transactions include procurement contracts for goods or services equal to or in excess of \$25,000 and all non-procurement transactions (sub-awards to sub-recipients). By signing this contract, current Contractor certifies as applicable, that the

contracting organization and its principals are not suspended or debarred by GSA from federal procurement and non-procurement programs.

18. Health Insurance Portability & Accountability Act (HIPAA). The confidentiality of any health care information acquired by or provided to the independent contractor shall be maintained in compliance with any applicable state or federal laws or regulations.
19. Abuse Registry. The Contractor agrees not to employ any individual, or use any volunteer, to provide for the care, custody, treatment, or supervision of children or vulnerable adults if there is a substantiation of abuse or neglect or exploitation against that individual. The Contractor will check the Adult Abuse Registry in the Department of Disabilities, Aging and Independent Living. Unless the Contractor holds a valid childcare license or registration from the Division of Child Development, Department for Children and Families, the Contractor shall also check the Central Child Abuse Registry. (See 33 V.S.A. §4919 & 33 V.S.A. §6911).
20. Voter Registration. When designated by the Secretary of State, the Contractor agrees to become a voter registration agency as defined by 17 V.S.A. §2103 (41), and to comply with the requirements of State and Federal law pertaining to such agencies.
21. Non-Discrimination Based on National Origin as evidenced by Limited English Proficiency. The Contractor agrees to comply with the non-discrimination requirements of Title VI of the Civil Rights Act of 1964, 42 USC Section 2000d, et seq., and with the federal guidelines promulgated pursuant to Executive Order 13166 of 2000, which require that contractors and sub-grantees receiving federal funds must assure that persons with limited English proficiency can meaningfully access services. To the extent the Contractor provides assistance to individuals with limited English proficiency through the use of oral or written translation or interpretive services in compliance with this requirement, such individuals cannot be required to pay for such services.

Rev. AHS -06/16/05

ATTACHMENT D

BUSINESS ASSOCIATE AGREEMENT

This Business Associate Agreement (“Agreement”) is entered into by and between **the State of Vermont, Agency of Human Services, operating by and through its Office of Vermont Health Access** (“Covered Entities”) and **Vermont Public Transportation Association (VPTA)** (“Business Associate”), as of July 1, 2006 (“Effective Date”).

Preliminary Statement: Covered Entity and Business Associate have entered into the Contract to which this Business Associate Agreement is an attachment pursuant to which Business Associate provides to Covered Entity certain services (“Services”) which may require the use and/or disclosure of health information. For the avoidance of any doubt, “Services” includes all work performed by the Business Associate for or on behalf of Covered Entity. This Agreement supplements and is made a part of the Contract.

The parties enter into this Agreement to comply with standards promulgated under the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”), including the Standards for the Privacy of Individually Identifiable Health Information, at 45 CFR Parts 160 and 164 (“Privacy Rule”), and the Security Standards, at 45 CFR Parts 160 and 164 (“Security Rule”).

Agreement: In consideration of the foregoing, and in consideration of the desire of Covered Entity to continue receiving Services, and of Business Associate to continue providing Services, the parties agree as follows:

1. **Definitions:** All capitalized terms in this Agreement have the meanings identified in this Agreement, 45 CFR Part 160, or 45 CFR Part 164. The term “Individual” includes a person who qualifies as a personal representative in accordance with 45 CFR 164.502(g). All references to PHI mean Protected Health Information. All references to Electronic PHI mean Electronic Protected Health Information.
2. **Permitted and Required Uses/Disclosures of PHI:**
 - 2.1 Except as limited in this Agreement, Business Associate may use or disclose PHI to perform the Services, provided that any use or disclosure would not violate the minimum necessary policies and procedures of Covered Entity. Business Associate shall not use or disclose PHI in any manner that would constitute a violation of the Privacy Rule if used or disclosed by Covered Entity in that manner. Business Associate may not use or disclose PHI other than as permitted or required by this Agreement or as Required by Law.
 - 2.2 Business Associate may make PHI available to its employees who need access to provide Services (provided that Business Associate makes such employees aware of the use and disclosure restrictions in this Agreement and binds them to comply with such restrictions). Business Associate may only disclose PHI for the purposes authorized by this Agreement: (a) to its agents (including subcontractors), in accordance with Sections 6 and 14; or (b) as otherwise permitted by Section 3.
3. **Business Activities:** Business Associate may use PHI received in its capacity as a “Business Associate” to Covered Entity, if necessary, for its proper management and administration or to carry out its legal responsibilities. In addition, Business Associate may disclose PHI received in its capacity as “Business Associate” to Covered Entity, for its proper management and administration or to carry out its legal responsibilities, if a disclosure is Required by Law, or: (a) Business Associate obtains reasonable written assurances (via a written contract) from the person to whom the information is to be disclosed that the PHI shall remain confidential and be used or further disclosed only as Required by Law or for the purpose for which it was disclosed to the person; and (b) the person promptly notifies Business Associate (who in turn

will promptly notify Covered Entity) in writing of any instances of which it is aware in which the confidentiality of the PHI has been breached. All uses and disclosures of PHI for the purposes identified above must be of the minimum amount of PHI necessary to accomplish such purposes.

4. **Safeguards:** Business Associate shall implement and use appropriate safeguards to prevent the use or disclosure of PHI, other than as provided for by this Agreement. Business Associate shall identify in writing, upon request from Covered Entity, all of the safeguards that it uses to prevent impermissible uses or disclosures of PHI.
5. **Reporting:** Business Associate shall report in writing to Covered Entity any use or disclosure of PHI in violation of this Agreement by Business Associate or its agents (including subcontractors). Business Associate shall provide such written report promptly after it becomes aware of any such use or disclosure. Business Associate shall provide Covered Entity with the information necessary for Covered Entity to investigate any such use or disclosure. Business Associate may use PHI to report violations of law to appropriate federal and state authorities, consistent with 45 CFR 164.502(j)(1).
6. **Agreements by Third Parties:** Business Associate shall ensure that any agent, including a subcontractor, to whom it provides PHI received from, or created or received by Business Associate on behalf of, Covered Entity, agrees in a written contract to the same restrictions and conditions that apply through this Agreement to Business Associate, with respect to such PHI. By way of example, the written contract must include those restrictions and conditions set forth in Section 12. Business Associate must enter into the written contract before any use or disclosure of PHI by such agent, and such written contract must identify Covered Entity as a direct and intended third party beneficiary, with the right to enforce any breach of the contract concerning the use or disclosure of PHI. Business Associate shall provide a copy of the written contract to Covered Entity upon request. Business Associate may not make any disclosure of PHI to any agent without the prior written consent of Covered Entity.
7. **Access to PHI:** Business Associate shall provide access to PHI in a Designated Record Set to Covered Entity or, as directed by Covered Entity, to an Individual, to meet the requirements under 45 CFR 164.524. Business Associate shall provide such access in the time and manner reasonably designated by Covered Entity. Business Associate shall promptly forward to Covered Entity for handling any request for access to PHI that Business Associate directly receives from an Individual.
8. **Amendment of PHI:** Business Associate shall make any amendments to PHI in a Designated Record Set that Covered Entity directs or agrees to pursuant to 45 CFR 164.526, whether at the request of Covered Entity or an Individual. Business Associate shall make such amendments in the time and manner reasonably designated by Covered Entity. Business Associate shall promptly forward to Covered Entity for handling any request for amendment to PHI that Business Associate directly receives from an Individual.
9. **Accounting of Disclosures:** Business Associate shall document disclosures of PHI and all 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 164.528. Business Associate shall provide such information to Covered Entity, or as directed by Covered Entity, to an Individual, to permit Covered Entity to respond to an accounting request. Business Associate shall provide such information in the time and manner reasonably designated by Covered Entity. Business Associate shall promptly forward to Covered Entity for handling any accounting request that Business Associate directly receives from an Individual.

- 10. Books and Records:** Subject to the attorney-client and other applicable legal privileges, Business Associate shall make its internal practices, books, and records (including policies and procedures and PHI) relating to the use and disclosure of PHI received from, or created or received by Business Associate on behalf of, Covered Entity available to the Secretary in the time and manner designated by the Secretary. Business Associate shall make the same information available to Covered Entity (without regard to the attorney-client or other applicable legal privileges), upon request, in the time and manner reasonably designated by Covered Entity, so that Covered Entity may determine whether Business Associate is in compliance with this Agreement.
- 11. Termination:**
- 11.1 This Agreement commences on the Effective Date and shall remain in effect until terminated by Covered Entity, or until all of the PHI provided by Covered Entity to Business Associate, or created or received by Business Associate on behalf of Covered Entity, is destroyed or returned to Covered Entity, subject to Section 15.12.
- 11.2 If Business Associate breaches any material term of this Agreement, Covered Entity may either: (a) provide an opportunity for Business Associate to cure the breach, and Covered Entity may terminate each Services Agreement, without liability or penalty, if Business Associate does not cure the breach within the time specified by Covered Entity; or (b) immediately terminate each Services Agreement, without liability or penalty, if Covered Entity believes that cure is not reasonably possible; or (c) if neither termination nor cure are feasible, Covered Entity shall report the breach to the Secretary. Covered Entity has the right to seek to cure any breach by Business Associate and this right, regardless of whether Covered Entity cures such breach, does not lessen any right or remedy available to Covered Entity at law, in equity, or under this Agreement or any Services Agreement, nor does it lessen Business Associate's responsibility for such breach or its duty to cure such breach.
- 12. Return/Destruction of PHI:**
- 12.1 Business Associate shall, in connection with the expiration or termination of a Services Agreement, return or destroy all PHI received from Covered Entity, or created or received by Business Associate on behalf of Covered Entity, and pertaining to that Services Agreement, that Business Associate still maintains in any form or medium (including electronic), within thirty (30) days after such expiration or termination. Business Associate shall not retain any copies of such PHI. Business Associate shall certify for Covered Entity, in writing, when all PHI has been returned or destroyed, and that Business Associate does not continue to maintain any PHI, with such certification to be provided during such thirty (30) day period.
- 12.2 Business Associate shall provide to Covered Entity notification of any conditions that Business Associate believes make the return or destruction of PHI infeasible. If Covered Entity agrees that return or destruction is infeasible, Business Associate shall extend the protections of this 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 Associate maintains such PHI.
- 13. Notice/Training:** Business Associate understands that: (a) there may be civil or criminal penalties for misuse or misappropriation of PHI; and (b) violations of this Agreement may result in notification by Covered Entity to law enforcement officials and regulatory, accreditation, and licensure organizations. If

requested by Covered Entity, Business Associate shall participate in information security awareness training regarding the use, confidentiality, and security of PHI.

14. Security Rule Obligations: The following provisions of this Section 14 apply to the extent that Business Associate creates, receives, maintains or transmits Electronic PHI on behalf of Covered Entity.

- 14.1 Business Associate shall implement and use administrative, physical, and technical safeguards that reasonably and appropriately protect the Confidentiality, Integrity and Availability of the Electronic PHI that it creates, receives, maintains or transmits on behalf of Covered Entity. Business Associate shall identify in writing, upon request from Covered Entity, all of the safeguards that it uses to protect such Electronic PHI.
- 14.2 Business Associate shall ensure that any agent, including a subcontractor, to whom it provides Electronic PHI agrees in a written contract to implement and use administrative, physical, and technical safeguards that reasonably and appropriately protect the Confidentiality, Integrity and Availability of the Electronic PHI. Business Associate must enter into the written contract before any use or disclosure of Electronic PHI by such agent, and such written contract must identify Covered Entity as a direct and intended third party beneficiary, with the right to enforce any breach of the contract concerning the use or disclosure of Electronic PHI. Business Associate shall provide a copy of the written contract to Covered Entity upon request. Business Associate may not make any disclosure of Electronic PHI to any agent without the prior written consent of Covered Entity.
- 14.3 Business Associate shall report in writing to Covered Entity any Security Incident pertaining to such Electronic PHI (whether involving Business Associate or an agent, including a subcontractor). Business Associate shall provide such written report promptly after it becomes aware of any such Security Incident. Business Associate shall provide Covered Entity with the information necessary for Covered Entity to investigate any such Security Incident.
- 14.4 Business Associate shall comply with any reasonable policies and procedures Covered Entity implements to obtain compliance under the Security Rule.

15. Miscellaneous:

- 15.1 Notwithstanding anything to the contrary in any Services Agreement, in no event shall any provision limiting Business Associate's liability to Covered Entity, including, but not limited to, provisions creating a cap on damages, excluding certain types of damages, limiting available remedies, or shortening a statute of limitations, present in any Services Agreement, apply with respect to any breach by Business Associate of any term of this Agreement.
- 15.2 In the event of any conflict or inconsistency between the terms of this Agreement and the terms of any Services Agreement, the terms of this Agreement shall govern, with respect to its subject matter. Otherwise, the terms of each Services Agreement continue in effect.
- 15.3 Any reference to "promptly" in this Agreement shall mean no more than seven (7) business days after the circumstance or event at issue has transpired. A reference in this Agreement to a section in the Privacy Rule or Security Rule means the section as in effect or as amended or renumbered.
- 15.4 Business Associate shall mitigate, to the extent practicable, any harmful effect that is known to it of a use or disclosure of PHI in violation of any provision of this Agreement.

- 15.5 Business Associate shall cooperate with Covered Entity to amend this Agreement from time to time as is necessary for Covered Entity to comply with the Privacy Rule, the Security Rule, or any other standards promulgated under HIPAA.
- 15.6 Any ambiguity in this Agreement shall be resolved to permit Covered Entity to comply with the Privacy Rule, Security Rule, or any other standards promulgated under HIPAA.
- 15.7 In addition to applicable state law, the parties shall rely on applicable federal law (e.g., HIPAA, the Privacy Rule and Security Rule) in construing the meaning and effect of this Agreement.
- 15.8 This Agreement may be amended or modified, and any right under this Agreement may be waived, only by a writing signed by an authorized representative of each party.
- 15.9 Nothing express or implied in this Agreement is intended to confer, upon any person other than the parties hereto, any rights, remedies, obligations or liabilities whatsoever. Notwithstanding the foregoing, the Covered Entity in this Agreement is the Agency of Human Services, operating by and through its Department of Prevention, Assistance, Transition, and Health Access and its successors Office of Vermont Health Access. Covered Entity and Business Associate agree that the term "Covered Entity", as used in this Agreement, also means any other Department, Division or Office of the Agency of Human Services, to the extent that such other Department, Division, or Office has a relationship with Business Associate that would require, pursuant to the Privacy or Security Rules, entry into an agreement of this type.
- 15.10 As between Business Associate and Covered Entity, Covered Entity owns all PHI provided by Covered Entity to Business Associate, or created or received by Business Associate on behalf of Covered Entity.
- 15.11 Business Associate shall abide by the terms and conditions of this Agreement with respect to all PHI it receives from Covered Entity, or creates or receives on behalf of Covered Entity, even if some of that information relates to specific Services for which Business Associate may not be a "Business Associate" of Covered Entity under the Privacy Rule.
- 15.12 The provisions of this Agreement that by their terms encompass continuing rights or responsibilities shall survive the expiration or termination of this Agreement. For example: (a) the provisions of this Agreement shall continue to apply if Covered Entity determines that it would be infeasible for Business Associate to return or destroy PHI, as provided in Section 12.2; and (b) the obligation of Business Associate to provide an accounting of disclosures, as set forth in Section 9, survives the expiration or termination of this Agreement, with respect to accounting requests (if any) made after such expiration or termination.
- 15.13 This Agreement constitutes the entire agreement of the parties with respect to its subject matter, superseding all prior oral and written agreements between the parties in such respect.

ATTACHMENT E

Agency of Human Services Rule # 96-23 Final Adopted Rule for Access to Information

Definition.

“Agency” means the Agency of Human Services or any of the offices, departments or programs that comprise the Agency.

“AHS” means the Vermont Agency of Human Services.

“Client” means an individual or family who is voluntarily served by a department, office, program, Contractor or grantee of the Agency of Human Services.

“Contractor” means an individual or entity with whom the Agency or any of its departments, offices, or programs has a contract to provide personal services.

“Employee” means any person who works in a full-time, part-time, temporary or contractual position for the Agency or any of its departments, offices, or programs.

1.6 “Grantee” means an individual or entity with whom the Agency or any part thereof has a grant to provide personal services.

1.7 “Program” means a set of services, (such as determining and processing ANFC benefits, verifying and setting up delivery for WIC foods) for which the Agency bears fiscal responsibility.

1.8 “Administrative Obligations” means activities pursuant to federal or state laws or regulations (such as verification of eligibility, verification of service delivery, detection of fraud, monitoring of quality assurance, audit of expenditure reports) which provide for accountability in the use of public funds.

Basic Principles

Presumption of Confidentiality

All information specific to, and identifying of, individuals and families is presumed to be confidential and subject to these standards. Employees shall not disclose the information unless a specific exception to the presumption applies or the disclosure is authorized by the client, a court or as otherwise authorized by law or rule.

Existing Statutes

These rules are not intended to expand or diminish current provisions in law relating to disclosure of confidential information.

Information Collection

Employees shall collect and record only that information needed to fulfill the goal of serving the client and meeting administrative or legal obligations.

Informing Clients

At the initial meeting with each client, or within two weeks, employees shall review and offer to provide the rules for access to information to the client.

Permissible Disclosures

Client consent

No information about a client shall be released without prior consent from the client, unless directly connected with the administration of a program or necessary for compliance with federal or state laws or regulations.

Sharing "Non-identifiable" Information

Information that does not identify a client may be used for statistical research, forecasting program needs, or other such purposes.

Public Information

Information defined as public by 1 VSA & 317 or other applicable statute is available to the public. The procedures in the public records statute shall be followed before public information is released.

Information Sharing for Administrative Purposes

Employees may share information which is necessary to satisfy the Agency's administrative obligations. Departments will develop written agreements limiting the kinds of information to be shared when programs are jointly administered by different Departments. No information shall be released to a person or entity that is out of state, unless directly connected with the administration of a program or necessary for compliance with federal or state laws or regulations.

Disclosure Without Consent in Limited Circumstances

Employees must release sufficient information to comply with mandatory reporting requirements for cases involving the abuse, neglect, or exploitation of children and persons who are elderly or who have disabilities. Information may be released without consent when Vermont law creates a duty to warn identified individuals of potential harm to their person or property, in response to court orders, or to investigate or report criminal activity as required by federal or state law or regulation. Only information relevant to the situation shall be disclosed. The employee shall document the date, purpose and content of the report, the name, address and affiliation of the person to whom the information was released, and shall notify the client that the information was disclosed.

Procedures Related to Consent

Obtaining Informed Consent

Prior to releasing confidential information the Agency shall obtain the client's informed consent. This includes providing information about consent in a language and format understandable to the client. Reasonable accommodations shall be made for special needs based on the individual or family's education, culture, or disability. Employees shall inform clients that granting consent is not a pre-requisite for receiving services, and shall explain that they may apply for services separately.

Consent of Minors to Release of Information

Employees shall obtain the consent of a minor client to release information concerning treatment for which parental consent is not required.

Format for Consent to Share Information

Consent for the sharing or release of information shall ordinarily be in writing. If an emergency situation requires granting of verbal consent, written consent shall be obtained at the next office visit or within thirty days, whichever comes sooner. Required information will include:

1. Names of the people about whom information may be shared.
2. A checklist of the kinds of information to be shared.
3. A checklist of the departments within the Agency to receive the information.
4. A statement or date covering expiration of consent.
5. A statement about procedures for revoking consent.
6. Signature of individuals covered by the consent, or their parents or guardians.
7. Signature of the individual explaining the consent process with their position and job title.
8. A space to provide individualized instructions.

A copy of the consent form shall be provided to all signatories.

Client Access to Records

Unless prohibited by federal or state law or regulation, clients shall be permitted to view and obtain copies of their records. Each department within the Agency shall have written procedures which permit clients to verify personal information they have provided for accuracy and completeness and for placing amendments to the information in their files. Employees shall take reasonable steps to present records in a form accessible to the client, including but not limited to large type format or verbal review. A fee not to exceed the actual cost of copying may be charged for records exceeding 10 pages. This fee shall be waived if it would prohibit access.

Procedures to Protect Confidentiality

Staff Training

All AHS employees and all AHS volunteers and interns, shall be instructed in these rules. AHS shall train their Contractors and grantees who shall, in turn, provide the same instruction for their employees, interns, and volunteers.

Response to Requests for Information

An employee shall not respond to requests from outside the Agency for information about clients even to acknowledge that the person is a client, unless authorized. If a client has consented to or requests that information be released, the employee shall comply with the request.

Designated Individual

Each agency or department shall appoint one or more trained staff members to be responsible for responding to all requests for client information when there is no written consent to release, and no statutory or administrative authority permitting release of the requested information. These individuals shall be specially trained in maintaining confidentiality. A list of the designated individuals for each department and office shall be maintained in the Attorney General's Office, Human Services Division.

Affirmation of Understanding

Employees shall sign an affirmation that they will comply with these rules. This affirmation shall be part of their personnel files. Supervisors shall review this affirmation during annual evaluations. Violation of these rules shall result in disciplinary action.

Written Agreements with Grantees or Contractors

The following assurance, or one similar to it, will be included in all AHS grants/contracts signed after these rules have been approved:

[Grantee/Contractor] agrees to comply with the requirements of AHS Rule No. 96-23 concerning access to information. The Contractor shall require all of its employees to sign the AHS Affirmation of Understanding or an equivalent statement.

Client Referrals

When referring a client to another agency for services, if the referral does not meet the criteria for permissible disclosures under Section 3.4, the initial agency shall obtain the consent of the client for the referral and alert the receiving agency that confidential client information accompanies the referral.

Documentation of Disclosure

Requests for disclosures of client information shall be maintained in the client's file if the

request does not meet the definition of a permissible disclosure under Section 3.4. Employees shall document in writing any information actually disclosed, along with the name of the person/agency to whom it was disclosed and the date of the disclosure. When permissible disclosures are made under Section 3.4, documentation may be limited to the name of the department/agency/program to whom the disclosure was made.

Information Systems

Computerized Information

When developing a computerized data system, the Agency shall:

1. Develop security procedures consistent with the rule;
2. Instruct staff in the security procedures;
3. Inform clients if a computerized system is being used;
4. Establish written agreements with participating agencies outlining procedures for sharing and protecting information.
5. Develop security procedures in relation to the transmission of information.

Security Procedures

The Agency shall develop a protocol which is consistent with the requirements of this rule to safeguard confidential client information. Contractors and grantees shall also develop a protocol or shall adopt the protocol of the Agency. The protocol shall be designed to safeguard written information, data in computer systems, and verbal exchange of information. The protocol shall prohibit unauthorized access to records and include an appropriate disciplinary process for violations of the security rules.

Procedures

Written procedures for implementing these rules shall be used as the basis for employee instruction and shall be available for review in the Agency Central Office.

AGENCY OF HUMAN SERVICES
103 South Main Street
Waterbury, Vermont 05676

RECEIVED
JUN 29 2006
OFFICE OF VERMONT
HEALTH ACCESS

AFFIRMATION OF UNDERSTANDING STATEMENT

As a Contractor for the State of Vermont, I affirm that I have read the Agency of Human Services (AHS) Rule No. 96-23 concerning Access to Information, and that I agree to comply with the requirements of AHS Rule No. 96-23.

I shall require all of my employees performing services under this contract, to sign an affirmation of understanding statement. Employee statements need not be sent to the State. However, they shall remain in Contractor's personnel records. The State can request copies of such documents if necessary.

Vt. Public Transportation Assoc.
Name of Company

6/25/2006
Date


Authorized Signature

Executive Director
Title

ATTACHMENT G

VPTA Statewide Medicaid & Reachup Transportation Proposal for SFY 2007, Dated June 16, 2006
Summary has 43 pages.

***Statewide
Medicaid & Reach Up
Transportation Proposal
for
FY 2007
July 1, 2006 to June 30, 2007***



MEDICAID/REACH UP TRANSPORTATION PROGRAM

PROFILE OF VERMONT PUBLIC TRANSPORTATION ASSOCIATION AND REGIONAL BROKER SERVICES

Vermont Public Transportation Association

The Vermont Public Transportation Association (VPTA) is a private nonprofit corporation. The organization's purpose is to promote the social and economic welfare of Vermont residents by encouraging, developing and/or providing transportation services to access employment, education, medical, social, recreational, and other services for all Vermont citizens.

VPTA encourages the use, development, and support of public transportation. To further this purpose, VPTA's activities may include: providing information about public transportation to the public and to government officials and agencies; providing coordination, information, and resource sharing for its members; and contracting with government agencies for the administration, coordination, and development of transportation services on a statewide basis.

VPTA has successfully partnered with the Vermont Agency of Human Services to deliver comprehensive statewide Medicaid and Reach Up transportation since 1986. The VPTA statewide brokerage infrastructure offers a coordinated network of providers around the state. In addition to Medicaid and Reach Up services, VPTA's established infrastructure permits it to provide services, management and billing for the Office of Drug and Alcohol Programs, Department of Corrections, Department of Health (Ladies First and Children in Crisis) and Department of Children's Services under mini-agreements at low or no cost. These programs are billed directly by VPTA central office staff and are reconciled prior to billing. The administrative costs for these services are minimal and essentially absorbed by VPTA's central office as a matter of goodwill to the State.

VPTA also offers Management Training, Driver Training, Technical Assistance, and other support services to its nine regional brokers in addition to centralized management and fiscal services. The expertise of the central office staff includes several decades of working in and fine-tuning the coordination of all aspects of the management of a statewide network.

VPTA staff expertise was demonstrated when the failure of two systems occurred within several months of each other during FY 03. In both instances, VPTA central office staff found alternate locations to establish dispatching and billing services and contracted with the other members of its brokerage network to avoid significant interruption of Medicaid transportation services. During the first six months of FY 04, VPTA directly operated the brokerage service in Southern Windsor and Windham Counties and provided training and support during the transition to a new operator. In FY 05 and FY06, VPTA central staff has been called upon to assist several brokers with financial consulting, billing, and support services. We believe that VPTA's human and organizational resources and two decades of experience managing the Medicaid program have proven to be an invaluable asset to OVHA under both normal and challenging circumstances. Staff resumes are presented in Appendix 2.

The objective of the VPTA Medicaid/Reach Up Transportation Program has always been to provide the most cost effective, appropriate transportation based on individual needs, medical circumstances, and available community resources. VPTA's Medicaid Program has been nationally recognized for its cost effective and innovative coordination of services.

Administrative Costs and Direct Trip Expenses

In the early years of the VPTA Medicaid Transportation Agreement with the Agency of Human Services, a charge known as a "loading fee" was added to each trip. This loading fee was billed separately on each trip. As electronic data processing systems advanced, this fee added a line to the claim filed for each trip. At roughly \$0.78 per line of claim, the cost of data processing alone increased the Medicaid expenses substantially. Approximately 10 years ago, this procedure was reviewed and OVHA and VPTA agreed that a negotiated flat rate for administration that roughly equated to the loading fee per trip would reduce data processing. For the audited fiscal year ended June 30, 2005, VPTA's administrative charge per trip equated to a state wide average rate of \$3.20 statewide.

Direct trip charges represent the variable, actual costs of services by volunteer, bus, van, taxi, air, and rail at the prevailing community rate and hotel accommodations and meal reimbursements. During FY 05 VPTA provided 532,028 one-way trips at a direct trip cost of \$6,208,181. It is difficult to characterize any trip as typical since client needs vary by their residence and may be a simple trip on a fixed-route bus to a routine appointment or multiple long-distance trips to a dialysis unit or even long distance trips to out-of-state specialty hospitals for some acute cases. The average direct trip cost for all trips state wide was \$14.91 up just \$1.08 from the previous fiscal year.

A study of the history of costs per trip annually shows that the total cost per trip has increase on average just \$0.85 per year. VPTA believes this can be attributed to careful monitoring by its staff, and strict adherence to the principle of "least cost, most appropriate" mode, as well as delivery of nearly one-third of trips by volunteer drivers reimbursed only for mileage at the GSA rate.

VPTA's proposal for FY 2007 administration request is \$184,415 above that of the previous year and \$238,185 with the inclusion a new line item for volunteer recruitment and retention of \$53,770 that will be used to recruit and maintain our valuable volunteer corps statewide.

All providers have reviewed both cost allocation methods and controllable expenses to make adjustments wherever possible. Costs have been calculated to be higher in all locations, due to the increase volunteer reimbursements established by the GSA rate and sharp and continuing increase in the price of fuel. In addition, the rising costs of employee health and general liability insurance and the need to add staffing in some locations to manage the higher volumes of demand for services accounts for these increases.

While VPTA's request this year represents an overall increase of 14%, trips have increased by 16% from FY05 to FY06 and this trend can be expected to continue in FY07. Overall, the higher volume of trips anticipated, based on recent trends, projects the administration fee per trip to be reduced again to \$2.78 in FY 06; down from \$3.20 in FY05.

VPTA's central office in White River Junction is the locus for Medicaid and Reach Up management, reporting and monitoring activity for the brokers around the state. This administrative support represents \$0.63 of the \$3.20 administration cost per trip. A staff of four performs critical functions that would otherwise fall to each broker and to state personnel in OVHA. The major aspects of VPTA's central office fall in to three categories: Fiscal Services and Management, Support and Technical Assistance, and Client Relations. These are as follows:

Finance and Management

- Centralized Medicaid Billing for Transportation Brokers.
- Reconciliation of EDS Remittance Advices (RAs) to transportation broker Program Reports (Invoices) alleviating need for local staff position at each of 9 regional brokers.
- Functions as internal auditor of billing through reconciliation process, as well as through monitoring mode costs to insure that “the least expensive mode appropriate to client needs” is selected while conserving OVHA resources.
- Works with OVHA and EDS to resolve claims payments and processing issues.
- Provides brokers and OVHA with highly detailed quarterly and annual statistical reports on transportation expenditures by month, broker, mode and program.
- Provides OVHA with a central point of contact for most program questions relative to billing and service.
- Provides a central annual, independent financial and overall compliance audit for OVHA.
- Maintains detailed accounting records, annual independent audits of brokers, and insurance certificates for all brokers in Central files.
- Insures that brokers and sub-contractors are safe, reliable and provide the best quality service available to meet client needs.

Broker Support and Technical Assistance

- Resolves broker’s questions relative to payments and denied claims.
- VPTA maintains working capital account and line of credit to support brokers awaiting claims payments or in emergency situations (i.e., equipment failures or systemic failures to assure uninterrupted service)
- Completes paperwork to annually recertify brokers.
- Dispenses forms to Brokers as needed and keeps them up to date on EDS’ codes and software protocols.
- Provides technical assistance with compliance with changing software needs.
- Provides Training on Software, Medicaid Regulations, Specialized Passenger Service Needs, and HIPAA compliance which began in 2003.
- VPTA’s staff has led brokers to undertake software and other process improvements.
- Engaged a computer consultant to provide management information systems software and data management programs that work with EDS systems.
- Provides staff support and management services for software for billing and tracking along with troubleshooting assistance when necessary.
- Holds subcontracts with all providers that require proper insurance and other characteristics of service are in place to deliver services successfully.
- Establishes new operations in regions that are transitioning service to new providers or where there have been systemic failures due to external events.
- Provides back-up billing assistance to brokers.
- Acts as a central travel office and pre-payment guarantor for clients needing out-of-state services.

Client Relations

VPTA alleviates workload that would otherwise require additional staff at OVHA by:

- Fielding a high volume of calls from a statewide toll free line 1-877-5RIDEVT (1-877-574-3388) and referring callers to appropriate service provider and/or program for covered services.
- Mediating disputes and/or resolving problems between brokers and clients when special situations or complaints arise.
- Calling upon the broker network to fill capacity gaps between areas on a regular basis.
- Approving doctor referrals for unusual or out-of-state trips.
- VPTA central office staff book lodging at approved locations. It insures that only covered services are provided by having accommodation billed directly to VPTA's credit account.
- VPTA central staff arranges special transportation by rail or air transports for out-of-state travel working directly with case workers and clients while insuring the least cost, most appropriate mode is selected.
- VPTA advance bookings and direct billing procedures cover the cost of out-of-state travel and lodging that would otherwise present a burden to small providers or clients.
- VPTA works closely with OVHA staff to ensure that objectives and parameters of the Medicaid transportation component are met while complying with guidelines in the transportation manual.



VPTA's Statewide Transportation Network

Regional transportation brokers or providers form the statewide Medicaid/Reach Up service delivery network. These brokers are the state and federally designated public transportation providers funded by the State of Vermont through Federal Transit Administration Grants. As such they meet state statutory and federal mandates to coordinate public and human service transportation. Each of the nine regions essentially correlates with pre-established medical service areas. We also employ the services SSTA (Specialized Transportation Services, Inc.) of a non-profit para-transportation service based in Colchester. Following is a brief description of each of the nine regional brokers:

Addison County Transit Resources

Addison County Transit Resources (ACTR) proposed to be the Medicaid/Reach Up transportation broker for the Addison County. ACTR is a single purpose, nonprofit agency based in Middlebury providing transportation services to residents and visitors of Addison County. Incorporated in 1992, ACTR has seen ridership grow by an average of 29% each year. ACTR has been the regional Medicaid/Reach Up transportation broker since 1995 and has developed extensive experience in arranging and providing transportation for this unique population.

Chittenden County Transportation Authority

Chittenden County Transportation Authority (CCTA) provides fixed route and para-transit services within its member communities: Burlington, South Burlington, Essex, Winooski, and Shelburne, as well as a large portion of the populations of Colchester, Williston, Charlotte, Richmond, Hinesburg, Milton, Jericho, Underhill, Huntington, St. George, Westford, and Bolton, for whom it is the only alternative to the private auto. CCTA is the Chittenden County Medicaid Transportation Broker and provides about a third of the state's Medicaid trips at rates that compare very favorably to other providers. CCTA selects the least costly, appropriate mode of transportation available for its Medicaid/Reach Up clients.

Green Mountain Transit Agency (a CCTA affiliate)

Green Mountain Transit Agency (GMTA) was founded in 2003, as a nonprofit organization to meet the transportation needs of Central Vermont residents. GMTA serves all of Washington County, which includes the Capitol District, and transportation brokerage to the towns of Orange, Washington, and Williamstown in Orange County. GMTA matches transportation requests with available resources, getting people where they need to go.

Connecticut River Transit, Inc.

Connecticut River Transit, Inc. (CRTI) began operating in November 2003 re-establishing transit operations in Southern Windsor and Windham Counties after the dissolution of Town and Village Bus. VPTA directly covered Medicaid transportation in the region for the period July 1 through December 31, 2003. CRTI undertook provision of Medicaid transportation services on January 1, 2004 from its offices located in Springfield, Vermont. CRTI is continuing to rebuild local transit services. They have successfully continued the Medicaid transportation program using the volunteer corps, local taxis, and their own para-transit vans and buses.

Green Mountain Chapter - American Red Cross

The Green Mountain Chapter - American Red Cross (GMCARC) Voltran Program has been on a continuous growth pattern. As lead agency for Medicaid/Reach Up transportation in the Bennington Area, GMCARC networks with many agencies to meet community transportation needs. GMCARC utilizes both its public transit vehicles and their Red Cross autos to deliver Medicaid services.

Marble Valley Regional Transit District

The Marble Valley Regional Transit District (MVRTD - The Bus) is a public nonprofit transportation district comprised of three member towns -- Rutland City, Rutland Town, and Proctor. It is the largest non-urban transportation provider in the State of Vermont and primary provider of coordinated transportation services in Rutland County. MVRTD provides Medicaid transportation services through a carefully coordinated network of service options. Medicaid staff evaluates client eligibility, special needs, and least expensive, most appropriate transportation mode for the circumstances.

Northwest Vermont Public Transit Network, Inc.

The Northwest Public Transit Network, Inc. (NTWRK-The Network) was incorporated in 1991. The Vermont Agency of Transportation approved the Network as the Franklin and Grand Isle County public transportation provider in 1998. The Network completed and received approval of its Short-Range Transportation Plan in 1997 and implemented the first phase. It was established to develop and/or provide access to medical services, social activities, educational opportunities and employment through the use of passenger service transportation in St. Albans. The Network has undergone a management change during the past year and is working hard to improve all its processes and procedures to insure the delivery of the best service possible in the Franklin-Grand Isle region.

Rural Community Transportation, Inc.

The Rural Community Transportation, Inc. (RCTI) is a private nonprofit incorporated in November 1991. Originally known as NEKCA Transportation, RCTI was created through a grant from the Federal Transit Administration to coordinate Medicaid transportation service in Caledonia, Essex, Lamoille, and Orleans counties. RCTI serves the largest geographic area in the State of Vermont -- the entire North East Kingdom -- encompassing 20% of the state's most rural residents. RCTI is based in St. Johnsbury and has satellite offices located in Morrisville and Newport, Vermont.

Stagecoach Transportation Services, Inc.

Stagecoach Transportation Services, Inc., (STSI) has provided public transportation services across Orange and Northern Windsor Counties since 1976. STSI provides Medicaid/Reach Up transportation across a 31-town area that includes most of Orange County, northern Windsor County including White River Junction and portions of Addison and Rutland Counties.

Special Services Transportation Agency

SSTA is a private non-profit operating from Colchester, VT. SSTA was incorporated in May 1982 with just one van. Today its fleet includes 38 vans and 43 full-time employees. As their name suggests, SSTA provide specialized services to both within and outside of Chittenden County for a variety of state and local social service agencies. It is also the current subcontractor with CCTA for ADA and a number of other special services.



PROGRAM SUMMARY

FY 05 Results & FY 06 in Progress FY 07 Proposal

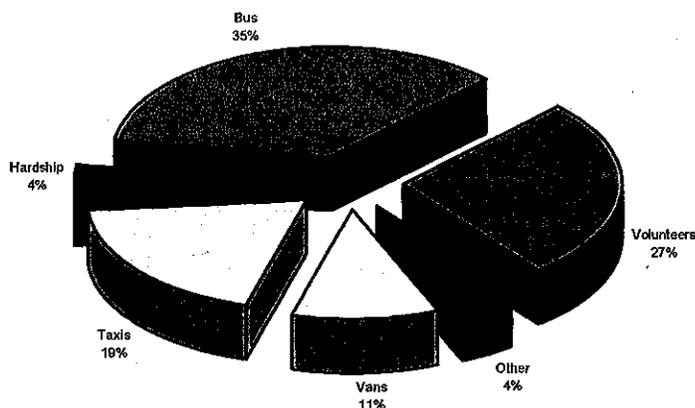
FY 05 Audited Results

- ◆ The increase in trips provided resulted in a lower administrative cost per trip to Medicaid, however, actual costs for operating the program by all brokers exceeded budget.
- ◆ The final trip count for all brokers for FY 05 was 532,028 for 15,744 trips above proposal estimates.
- ◆ VPTA central fiscal administration was \$0.63 per trip. The total statewide average fiscal and management charge was \$3.24 per trip based on budgeted expenditures.
- ◆ The actual costs of administering the Medicaid program at the local and state levels exceeded projected contract budgets. Those costs were associated with steeply rising utility costs, liability and health insurance premiums, and the continuing maintenance and upgrades to billing and tracking software to comply with EDS protocols. The broker budget overruns were partially offset but statewide the costs exceeded budget by approximately \$5,000.

- ◆ FY 05 Medicaid/Reach Up trips were distributed among the following modes:

Volunteers	27%	Taxi	19%
Bus	35%	Van	11%
Hardship	4%	Other	4%

MEDICAID/REACH UP MODE OF TRAVEL FY 2005



FY 2006 Estimated Performance

- ◆ The total administrative budget for FY 06 including central VPTA fiscal administration and management is \$1,713,160. Actual costs of administration are expected to be \$1,836,475 a total of **\$123,315 above budget**.
- ◆ Virtually all brokers will be absorbing costs for operating the Medicaid transportation program over and above the fixed administration set annually. These additional costs are very significant for several of the brokers and can be attributed to an increase in demand for services, insurance and energy costs.
- ◆ VPTA central fiscal administration is estimated to be \$0.58 per trip; the broker cost is \$2.40. The statewide fiscal and management charge will be \$2.98 per trip based on an estimate of actual expenditures.



FY 2007 PROPOSAL SUMMARY

- ◆ The total administrative budget for FY 2007 including central VPTA fiscal administration and management that VPTA has proposed is up \$184,415 a requested 11.8% increase from FY 06 before the addition of a new volunteer recruitment and retention line item of \$53,770. The total requested increase of \$238,185 represents an increase of 14%.
- ◆ Analysis of historic performance data over the 8 fiscal years from FY00 through FY07 shows that the annualized average administrative increase is just over 5%. These have declined over time from \$3.68 per trip in FY00 to an estimate of \$2.88 projected for FY07 after the addition of the new line item.
- ◆ From FY 00 through FY 06 direct trip costs have risen about \$1.00 per trip per year and combined admin and direct trip increases have been held to just \$0.85 per trip annually. This seems quite remarkable in the context of rising GSA rates, fuel and insurance price increases, and demands for additional service.
- ◆ The capped administrative budget proposed represents a 14% increase on the administrative side, but year to date performance estimates of increased demand for services predicts a 15.85% increase in trips by the end of FY 06. Based on recent history we have projected a modest 10% increase in trips during FY07.
- ◆ Financial summaries by broker and for VPTA administration along with historic performance data are presented on the following pages.
- ◆ The total request for FY07 administration is \$1,951,345 up \$238,185 from the previous fiscal year.



**FY 06 Administration Budget
Comparison to Actual**

	FY 07 Med Broker	FY 06 Budget	Actual Estimated Administrative Expenses at Year End	Amount (Over) Budget	VPTA Est Trips at Year End	
ACTR	\$	131,029	\$ 143,319	\$ (12,290)	31,805	
CCTA	\$	156,289	\$ 157,289	\$ (1,000)	262,979	
CRT	\$	145,130	\$ 151,091	\$ (5,961)	46,439	
GMCARC	\$	95,660	\$ 106,499	\$ (10,839)	20,332	
GMTA	\$	144,969	\$ 151,585	\$ (6,616)	47,045	
MVRTD	\$	168,180	\$ 185,275	\$ (17,095)	41,182	
NVPTN	\$	148,400	\$ 149,500	\$ (1,100)	40,925	
RCT	\$	276,414	\$ 327,534	\$ (51,120)	98,305	
STAGE	\$	98,500	\$ 108,628	\$ (10,128)	26,924	
Sub Total	\$	1,364,571	\$ 1,480,720	\$ (116,149)	615,936	
VPTA	\$	348,589	\$ 355,755	\$ (7,166)	615,936	
	\$	-				
Total	\$	1,713,160	\$ 1,836,475	\$ (123,315)		
Admin Cost per Trip						
Brokers			Medicaid	PT System Subsidy	Actual Cost	
			\$	2.22 \$	0.19 \$	2.40
Central Office			\$	0.57 \$	0.01 \$	0.58
Total			\$	2.78 \$	0.20 \$	2.98

**MEDICAID/REACH UP PROGRAM
EIGHT YEAR BUDGET HISTORY**

	FY 00	FY 01	FY 02	FY 03	FY 04	FY 05	Budget	Requested	Granted
	7-99 to 6-00	7-00 to 6-01	7-01 to 6-02	7-02 to 6-03	7-03 to 6-04	7-04 to 6-05	7-05 to 6-06	7-06 to 6-07	7-06 to 6-07
							FY 06	FY 07	FY 07
BROKER	Average								
ACTR	\$92,452	\$102,397	\$104,599	\$104,599	\$120,346	\$135,504	\$131,029	\$150,684	150,684
CCTA	\$117,779	\$107,256	\$105,005	\$105,005	\$107,229	\$151,813	\$157,958	\$178,680	178,690
CRTI	\$120,066	\$127,653	\$130,398	\$130,398	\$133,160	\$157,472	\$145,130	\$181,736	166,900
GMARC	\$84,177	\$88,899	\$90,810	\$90,810	\$92,734	\$90,975	\$95,660	\$117,710	110,009
GMTA	\$120,617	\$135,548	\$138,462	\$138,462	\$141,395	\$143,626	\$144,969	\$159,802	159,802
MVRTD	\$130,237	\$140,924	\$143,954	\$143,954	\$147,003	\$177,482	\$168,180	\$176,589	176,589
NTWRK	\$114,600	\$123,489	\$126,144	\$126,144	\$128,816	\$148,639	\$148,400	\$162,100	162,100
RCTI	\$278,343	\$293,446	\$299,755	\$299,755	\$306,105	\$258,773	\$276,414	\$368,707	317,876
STSI	\$85,815	\$91,423	\$93,389	\$93,389	\$95,367	\$98,545	\$98,500	\$102,500	102,500
BROKER TOTAL	\$1,144,086	\$1,211,035	\$1,232,516	\$1,232,516	\$1,272,155	\$1,362,829	\$1,366,240	1,598,518	1,525,150
VPTA Admin	\$274,189	\$293,396	\$302,003	\$308,400	\$308,370	\$337,601	\$348,589	\$372,425	372,425
Volunteer Retention									
BUDGET TOTAL	\$1,418,275	\$1,504,431	\$1,534,519	\$1,540,916	\$1,580,525	\$1,700,430	\$1,714,829	2,024,713	\$1,951,345
8-Year Average	5.37%	6%	2%	0%	3%	8%	1%	18%	14%
Trips Delivered	384,993	380,667	397,972	398,717	490,383	532,028	615,936	677,530	677,530
Admin Cost per Trip	\$3.68	\$3.95	\$3.86	\$3.86	\$3.22	\$3.20	\$2.78	2.88	2.88
Average Yrly Decrease	\$ (0.69)								Unknown
Direct Trip Totals	\$2,641,123	\$3,046,005	\$3,369,937	\$4,171,305	\$5,199,245	\$6,208,181	\$7,923,088		
Average Yrly Increase	\$1.00	\$8.00	\$8.47	\$10.46	\$10.60	\$11.67	\$12.86		
Total Cost Per Trip	\$10.54	\$11.95	\$12.32	\$14.33	\$13.83	\$14.87	\$15.65		
Average Yrly Increase	\$0.85								

Trips increased 15.8% over all from FY05 to FY06 and are estimated to increase another 10% in FY07
 Statewide Admin request increase is 14.94% from FY 06 to FY 07 before volunteer recruitment and retention.

Van Rates / Full Time Equivalents

HOURLY VAN RATES

FY 07 Med Broker	FY 07 Van	FY 06 Approvd	CHANGE	NoSho Cost	Fuel	Maint	Wages Benefits	Insurance	Capital Match	G & A
ACTR	\$ 51.00	\$41.00	\$ 10.00	\$ 1.00	\$ 8.63	\$ 2.40	\$ 15.60	\$ 3.40	\$ 1.00	\$ 18.97
CCTA(SSTA)	\$ 49.00	\$44.00	\$ 5.00	\$ 0.49	\$ 9.00	\$ 2.51	\$ 18.00	\$ 6.00	\$ 1.00	\$ 12.00
CRT	\$ 56.00	\$52.50	\$ 3.50	\$ 0.22	\$ 8.92	\$ 5.57	\$ 25.44	\$ 2.51	\$ 2.00	\$ 11.34
GMCARC	\$ 50.00	\$44.00	\$ 6.00	\$ 0.50	\$ 8.58	\$ 7.42	\$ 13.45	\$ 2.55	\$ 1.00	\$ 16.50
GMTA	\$ 55.50	\$49.50	\$ 6.00	\$ 0.56	\$ 8.78	\$ 4.19	\$ 18.90	\$ 6.73	\$ 1.00	\$ 15.34
IMVRTD	\$ 56.12	\$46.30	\$ 9.82	\$ 0.51	\$ 7.54	\$ 10.13	\$ 18.95	\$ 3.57	\$ 1.00	\$ 14.42
NVPTN	\$ 52.00	\$40.00	\$ 12.00	\$ 0.52	\$ 8.72	\$ 4.23	\$ 13.85	\$ 6.85	\$ 0.50	\$ 17.33
RCT	\$ 48.00	\$45.00	\$ 3.00	\$ 0.96	\$ 7.18	\$ 8.29	\$ 12.96	\$ 2.28	\$ 0.96	\$ 15.37
STAGE	\$ 47.60	\$37.00	\$ 10.60	\$ 0.60	\$ 8.18	\$ 3.82	\$ 14.38	\$ 2.73	\$ 2.00	\$ 15.89
Median	\$ 50.50	\$ 44.00	\$ 7.50							
Average	\$ 51.69	\$ 44.37	\$ 7.32							

FULL TIME EQUIVALENTS

FY 07 Med Broker	Hours	FTEs	ED	Bus / Fin Mgr.	Bkkpr.	Prog. Mgr	HR	Ops Mgr	Admn Asst.	Brokrg/ Vol Coord	Sched/Disp atchers
ACTR	7,488	3.60	0.15	0.15	0.6	0	0.6	0.6	0.6	0.6	1.5
CCTA	5,824	2.80	0.05	0.10	0.55	0.1	0.1	0.20	0.20	0.20	1.80
CRT	5,745	2.80	0.12	0.26	0.61	0.12	0.28	0.21	0.21	0.21	1.2
GMCARC	4,888	2.35	0.1	0.2	0.1	0.2	0.2	0.75	0.75	0.75	0.5
GMTA	5,824	2.80	0.05	0.05	0.05	0.05	0.15	0.15	0.63	0.8	1.8
IMVRTD	8,392	4.03	0.15	0.15	0.3	0.15	0.15	0.15	0.63	1.0	1.5
NVPTN	6,720	3.23	0.45	0.56	2.00	0.50	0.5	0.5	0.5	0.72	1.0
RCT	15,714	7.55	0.20	0.50	2.00	0.50	0.50	0.50	0.50	0.50	4.35
STAGE	4,420	2.13	0.26	0.26	0.26	0.26	0.26	0.26	0.26	0.26	1.35
VPTA	8,070	3.88	0.90	0.99	1.0	0.99	0.99	0.99	0.99	0.99	1.35
TOTAL	73,085	35.14									

*2080 hrs. = 1 FTE

Volunteer Expense Good Will Funding

FY 07 Med Broker	NS Vol Exp	Incidents	Incident Adm.	Fund EST
ACTR	\$ 1,928	124 \$	372 \$	2,300
CCTA	N/A	N/A	N/A	N/A
CRT	\$ 4,800	330 \$	990 \$	5,790
GMCARC	\$ 3,960	360 \$	1,080 \$	5,040
GMTA	\$ 3,000	454 \$	1,362 \$	4,362
MVRTD	\$ 1,984	216 \$	648 \$	2,632
NVPTN	\$ 9,875	569 \$	1,707 \$	11,582
RCT	\$ 16,297	1189 \$	3,567 \$	19,864
STAGE	\$ 1,300	300 \$	900 \$	2,200
TOTALS	\$ 43,144	3542 \$	10,626 \$	53,770

FY06 YTD and YRND Estimate Combined Medicaid R/U Direct Trip Report with 8.8 Months Trips

By Broker	volmiles	voltrips	taxitrips	taxiamt	bustrips	busamt	vanamts	hardmiles	hardtrips	hardamt	othertrips	otheramt	totmiles	tottrips	YRND Est	totamtYTD
ACTR	556,982	19,322	736	6,892.50	663	47,684.34	332.00	111,300.00	2,211	20,034.00	0.00	814.72	868,182	23,324	31,805	\$ 337,141.53
CCTA	43,854	2,778	25,208	447,342.65	148,682	386,785.52	12,945.00	148,113.00	2,364	26,940.34	0.00	44,599.40	182,967	192,951	262,979	\$ 1,209,277.41
CRTI	652,244	12,470	5,998	92,035.63	365	3,138.28	10,420.00	146,088.00	2,599	26,281.62	3.00	7,335.71	788,243	31,855	43,439	\$ 678,681.64
GMCARC	5,242	147	0	2,350.01	0	0	975.00	3,585.00	30	645.46	13,757.00	215,675.70	8,828	14,910	20,332	\$ 244,584.69
GMTA	683,890	20,895	3,694	26,443.80	5,809	59,207.86	384.00	139,946.00	3,313	25,070.28	425.00	8,205.70	822,606	34,500	47,045	\$ 465,561.22
MVRTD	341,351	8,886	3,669	60,782.81	16,217	289,945.88	0.00	89,683.00	1,428	12,364.74	0.00	14,784.00	410,044	30,200	41,182	\$ 540,070.49
NTRK	572,884	10,424	12,874	212,225.18	0	0	6,349.00	11,023.00	365	1,989.72	0.00	1,987.30	583,887	30,012	40,825	\$ 624,155.81
RCT	1,471,681	41,780	11,422	127,288.48	931	21,323.52	14,946.00	109,547.00	2,782	18,116.46	225.00	9,038.51	1,572,328	72,080	98,305	\$ 1,294,322.88
STSI	196,078	4,332	7,253	167,078.00	0	0	4,381.00	106,490.00	3,786	18,988.20	0.00	927.62	301,568	19,744	26,924	\$ 382,628.94
Totals	4,523,858	121,894	70,864	1,140,168.06	173,537	795,088	59,711	1,330,529.99	18,870	150,270.84	14,410	393,449	6,384,553	449,486	612,935	\$ 5,756,424.71

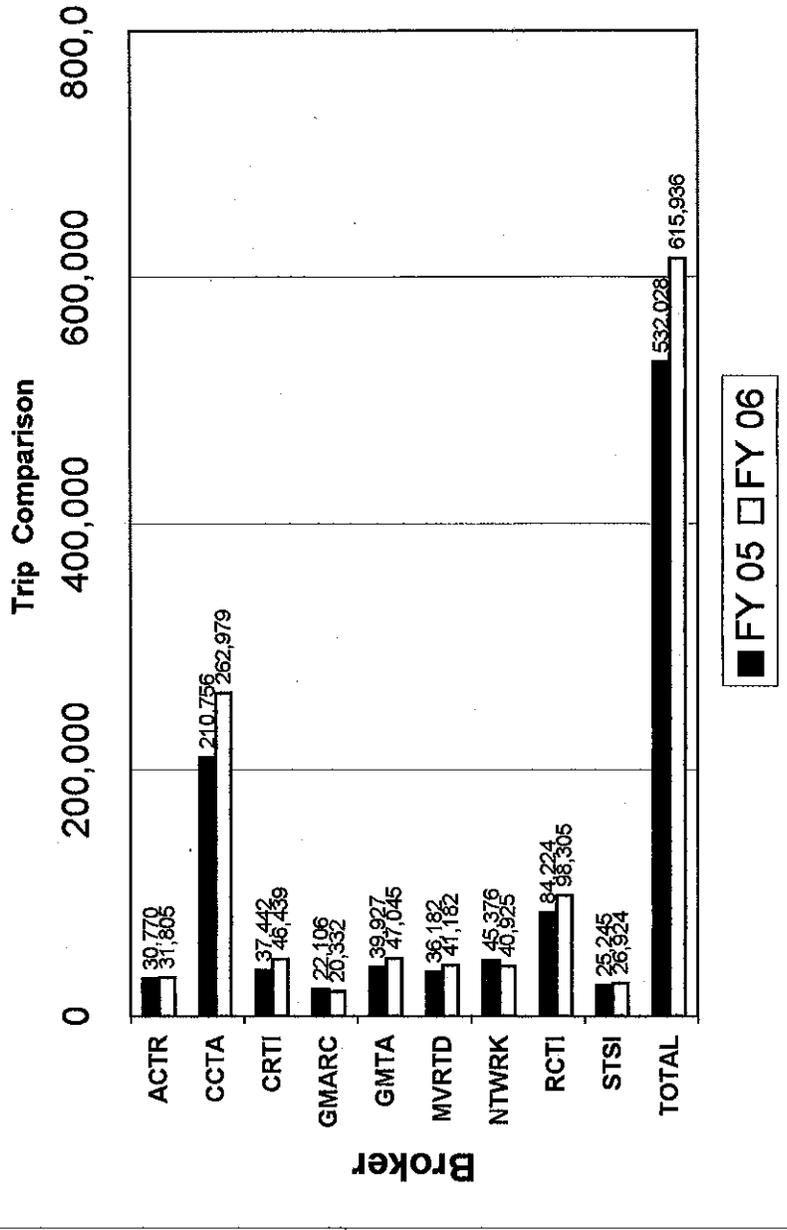
FY06 -YRND	volmiles	voltrips	taxitrips	taxiamt	bustrips	busamt	vanamts	hardmiles	hardtrips	hardamt	othertrips	otheramt	totmiles	tottrips	YRND Est	est amt yrend
FY06 -YRND	6,181,541.33	161,459	84,435	1,520,225.41	231,383	1,684,117.80	67,515	1,113,196	25,160	204,381.12	19,213	404,588.21	7,484,789	405,419	612,935	\$ 7,675,232.95
FY05-RND	5,908,143.00	142,974	98,799	1,403,914.04	186,380	841,125	1,401,072	1,088,104	23,977	192,274	20,528	425,640	6,574,247	552,028	552,028	\$ 6,208,181.37
# Change	525,398	17,785	12,295	116,311	44,523	418,995	372,968	45,092	1,543	6,087	1,213	-19,042	850,522	80,907	80,907	\$ 1,508,051.58
% Change	12%	4%	4%	8%	24%	25%	15%	7%	7%	3%	-6%	-5%	13%	15%	15%	23%

FY 05 Year End Audited Report

ACTR	CCTA	CRTI	GMARC	GMTA	MVRTD	NTRK	RCTI	STSI	Totals	% by Mode
587,724.00	30,248.00	689,683.00	9,222.00	814,019.00	506,143.00	1,471,681.00	196,078.00	121,894.00	4,523,858.00	27%
19,322	2,778	12,470	147	20,895	8,886	41,780	4,332	121,894	199,415	19%
736	25,208	5,998	0	3,694	3,669	11,422	7,253	70,864	136,813	4%
6,892.50	447,342.65	92,035.63	2,350.01	26,443.80	60,782.81	127,288.48	167,078.00	1,140,168.06	1,893,818.14	35%
663	148,682	365	0	5,809	16,217	931	0	173,537	184,577	11%
332.00	12,945.00	10,420.00	975.00	384.00	0	14,946.00	4,381.00	59,711	100,000.00	15%
111,300.00	148,113.00	146,088.00	3,585.00	139,946.00	89,683.00	109,547.00	106,490.00	1,330,529.99	1,893,449.00	4%
2,211	2,364	2,599	30	3,313	1,428	2,782	3,786	18,870	39,449	4%
20,034.00	26,940.34	26,281.62	645.46	25,070.28	12,364.74	18,116.46	18,988.20	150,270.84	192,274	4%
0.00	0.00	3.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,784.00	1,987.30	927.62	393,449	404,588.21	7%
0.00	0.00	0.00	13,757.00	425.00	0.00	9,038.51	0.00	14,410	14,410	4%
814.72	44,599.40	7,335.71	215,675.70	8,205.70	14,78					

**Addison County Transit Resources
Middlebury, VT**

	FY 05	FY 06	Est Increase
ACTR	30,770	31,805	
CCTA	210,756	262,979	
CRTI	37,442	46,439	
GMARC	22,106	20,332	
GMTA	39,927	47,045	
MVRTD	36,182	41,182	
NTWRK	45,376	40,925	
RCTI	84,224	98,305	
STSI	25,245	26,924	
TOTAL	532,028	615,936	83,908 16%



APPENDIX 1

Statewide Medicaid & Reach Up Trip Rates & Budgets for FY 2007



**Addison County Transit Resources
Middlebury, VT**

ACTR	FY 06	2.91 FTEs
Items	Percentage	Budget
Salaries	67.8%	\$ 88,889
Benefits	14.5%	18,982
Legal/Cont	0.2%	215
Office Sup	0.7%	862
Telephone	2.3%	3,014
Postage	0.5%	645
Travel	0.6%	753
Photocopy	0.2%	323
Office Ren	5.6%	7,365
Office Utiliti	0.0%	
Audit	1.2%	1,615
Acctg Serv	0.0%	
Personnel	0.0%	
Personnel	0.4%	516
Insurance	0.7%	907
Fees	2.0%	2,615
Printing	2.3%	3,014
Mktg-Educ	0.4%	561
Off Equip	0.3%	430
Off Equipm	0.0%	
Furniture	0.0%	
Service Ch	0.0%	
Off Mainte	0.0%	
Interest	0.2%	323
	100.0%	\$ 131,029

Total Budget	\$131,029
Est Yrmd	\$ 143,318

Total Trips	31,805
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Total Admin Cost Per Trip Actual	\$4.12 4.51
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Trip Increase from FY05	3%
1,035	
30,770	

ACTR	FY07	3.6 FTEs
Items	Percentage	Budget
Salaries	61.7%	\$ 92,960
Benefits	12.5%	\$ 18,898
Legal/Cont	1.4%	\$ 2,078
Office Sup	1.0%	\$ 1,579
Telephone	2.9%	\$ 4,308
Postage	0.9%	\$ 1,282
Travel	1.3%	\$ 1,910
Photocopy	0.3%	\$ 466
Office Ren	6.7%	\$ 10,095
Office Utiliti	0.0%	\$ -
Audit	1.4%	\$ 2,110
Acctg Serv	0.0%	\$ -
Personnel	0.0%	\$ -
Personnel	0.4%	\$ 533
Insurance	4.1%	\$ 6,146
Fees	3.5%	\$ 5,302
Printing	0.8%	\$ 1,195
Mktg-Educ	0.2%	\$ 356
Off Equip	1.0%	\$ 1,447
Off Equipm	0.0%	\$ -
Furniture	0.0%	\$ -
Service Ch	0.0%	\$ -
Off Mainte	0.0%	\$ -
Interest	0.0%	\$ 19
	100.0%	\$ 150,684

Total Budg	\$150,684
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Total Trips	34,986
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Total Admin Cost Per T	\$4.31
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Increase \$	19,655
Approved	15%

**Chittenden County Transit Authority
Burlington, VT**

CCTA	FY 06	3.25 FTEs
Items	Percentage Budget	Budget
Salaries	60.8%	\$ 95,055
Benefits	14.4%	22,522
Legal/Consult	0.7%	1,166
Office Supplies	3.3%	5,235
Telephone	7.7%	11,975
Postage	0.0%	
Travel	0.0%	
Photocopy	0.0%	
Office Rent	0.0%	
Office Utilities	6.4%	9,932
Audit	2.0%	3,200
Acctg Services	0.8%	1,200
Personnel Train	0.0%	
Personnel Ads	0.3%	520
Insurance	0.1%	147
Fees	0.0%	
Printing	0.0%	
Mktg-Educ Ads	0.0%	
Off Equip Maint	0.0%	
Off Equipment	1.3%	1,983
Furniture	0.1%	200
Service Charge	0.0%	
Off Maintenance	2.0%	3,155
Interest	0.0%	
	100.0%	\$ 156,289

Total Budget \$156,289
Est. Yrmd \$157,289

Total Trips 262,979

Total Admin Cost Per Trip \$0.59
Actual \$0.60

Trip Increase from 05 52,223 20%
210,756

CCTA	FY07	2.8 FTEs
Items	Percentage Budget	Budget
Salaries	58%	\$ 103,687
Benefits	20%	36,291
Legal/Consult	1%	1,166
Office Supplies	3%	5,235
Telephone	7%	11,975
Postage	0%	
Travel	0%	
Photocopy	0%	
Office Rent	0%	
Office Utilities	6%	9,932
Audit	2%	3,200
Acctg Services	1%	1,200
Personnel Train	0%	
Personnel Ads	0%	520
Insurance	0%	147
Fees	0%	
Printing	0%	
Mktg-Educ Ads	0%	
Off Equip Maint	0%	
Off Equipment	1%	1,983
Furniture	0%	200
Service Charge	0%	
Off Maintenance	2%	3,155
Interest	0%	
	100%	\$ 178,690

Approved
Total Budget \$ 178,690

Total Trips 289,277

Total Admin Cost Per Trip \$ 0.62

Increase Approved \$ 22,401 14%

Connecticut River Transit, Inc.
Springfield, VT

CRT Items	FY 06		2.3 FTEs	
	Percent	Budget	Budget	
Salary/CRTSf	49.7%	72,176		
Benefits/CRTSf	14.2%	20,643		
Professional Services	6.2%	8,956		
Non-Expend Supplies/CRT Sf	0.0%			
Office Supplies/CRTSf	2.4%	3,484		
Telephone/CRT Sf	2.3%	3,407		
Postage/CRT Sf	0.4%	581		
Travel/CRT Sf	2.4%	3,484		
Photocopy/CRT Staff	0.5%	772		
Office Rent/CRT	3.3%	4,781		
Office Utilities/CRTSf	0.0%			
Audit/CRT	0.0%			
Accounting Services/CRT Sf	0.0%			
Personnel training/CRT Sf	0.0%			
Personnel advertising/CRT	1.1%	1,544		
Insurance/CRT Sf	7.2%	10,482		
Fees/CRT Sf	2.0%	2,878		
Printing/CRTSf	0.0%			
Newspaper Advertising/CRT	4.6%	6,745		
Offe Equip. Maint.-CRT Sf	0.0%			
Office Equipment/CRT	2.3%	3,373		
Office Equipment/CRT	0.0%			
Furniture/CRT	0.0%			
Office Maint./ CRTSf	0.8%	1,204		
Interest payable/CRT	0.3%	463		
Temporary Employees/CRT Sf	0.0%			
Bank Service Charge/CRTSf	0.1%	157		
Internet Connection/CRT Sf	0.0%			
Total	100.0%	145,130		

Total Budget \$ 145,130
Yrmd Est. \$ 151,091

Total Trips 46,439

Total Admin Cost per trip Actual \$ 3.13
\$ 3.25

Trip Increase from FY 05 2.4%
8,997
\$7,442

CRT - REVISION NEEDED Items	FY 07		2.8 FTEs	
	Percent	Budget	Budget	
Salary/CRTSf	56.8%	\$ 103,300.00		
Benefits/CRTSf	17.8%	\$ 32,286.00		
Professional Services	4.6%	\$ 8,303.00		
Non-Expend Supplies/CRT Sf	0.0%			
Office Supplies/CRTSf	3.2%	\$ 5,775.00		
Telephone/CRT Sf	2.4%	\$ 4,368.00		
Postage/CRT Sf	0.4%	\$ 723.00		
Travel/CRT Sf	3.2%	\$ 5,866.00		
Photocopy/CRT Staff	1.1%	\$ 2,089.00		
Office Rent/CRT	1.5%	\$ 2,644.00		
Office Utilities/CRTSf	0.4%	\$ 777.00		
Audit/CRT	0.0%			
Accounting Services/CRT Sf	0.0%			
Personnel training/CRT Sf	1.5%	\$ 2,796.00		
Personnel advertising/CRT	0.0%			
Insurance/CRT Sf	1.9%	\$ 3,491.00		
Fees/CRT Sf	0.7%	\$ 1,323.00		
Printing/CRTSf	0.0%			
Newspaper Advertising/CRT	3.0%	\$ 5,364.00		
Offe Equip. Maint.-CRT Sf	0.0%			
Office Equipment/CRT	1.3%	\$ 2,432.00		
Office Equipment/CRT	0.0%			
Furniture/CRT	0.0%			
Office Maint./ CRTSf	0.0%			
Interest payable/CRT	0.0%	\$ 18.00		
Temporary Employees/CRT Sf	0.0%			
Bank Service Charge/CRTSf	0.0%			
Internet Connection/CRT Sf	0.1%	\$ 181.00		
Total	100.0%	\$ 181,736.00		

Needs Revision
Total Budget \$ 181,736
Approved \$ 166,900

Total Trips 51,083

Projected
Total Admin Cost per trip 166,900
\$3.27

Increase \$ 36,605.89 25%
Approved \$ 21,769.52 15%

**Green Mountain Chapter-American Red Cross
Bennington, VT**

GMCARC	FY 06	Percentage	Budget	2.0 FTEs
Items				
Salaries		64.8%	\$ 62,000	
Benefits		6.7%	6,400	
Legal/Consult		0.3%	250	
Office Supplies		1.3%	1,200	
Telephone		1.0%	1,000	
Postage		0.4%	350	
Travel		0.8%	800	
Photocopy		0.6%	600	
Office Rent		5.4%	5,160	
Office Utilities		2.6%	2,500	
Audit		1.7%	1,600	
Acctg Services		2.1%	2,000	
Personnel Train		0.8%	800	
Personnel Ads		0.0%	-	
Insurance		3.3%	3,200	
Fees		1.6%	1,500	
Printing		0.5%	500	
Mktg-Educ Ads		0.0%	-	
Off Equip Maint		0.6%	600	
Off Equipment		3.7%	3,500	
Furniture		0.2%	200	
Service Charge		0.0%	-	
Off Maintenance		1.6%	1,500	
Interest		0.0%	-	
		100.0%	\$ 95,660	

Total Budget \$ 95,660
Est. Yrmd \$ 106,499

Total Trips 20,332

Total Admin Cost Per Trip \$4.70
Actual 5.24

Trip Increase from FY05 -1,774 -8.0%
22,106

GMCARC	F707	Percentage	Budget	2.35 FTEs
Items				
Salaries		58.6%	\$ 69,020	
Benefits		14.1%	16,580	
Legal/Consult		0.2%	250	
Office Supplies		1.1%	1,300	
Telephone		1.4%	1,600	
Postage		0.3%	400	
Travel		0.7%	800	
Photocopy		0.5%	600	
Office Rent		4.4%	5,160	
Office Utilities		2.3%	2,700	
Audit		1.5%	1,800	
Acctg Services		2.2%	2,600	
Personnel Train		0.3%	400	
Personnel Ads		0.0%	-	
Insurance		2.7%	3,200	
Fees		1.3%	1,500	
Printing		0.4%	500	
Mktg-Educ Ads		0.0%	-	
Off Equip Maint		0.5%	600	
Off Equipment		4.7%	5,500	
Furniture		0.2%	200	
Service Charge		0.0%	-	
Off Maintenance		2.5%	3,000	
Interest		0.0%	-	
		100.0%	\$ 117,710	

Approved 110,009

Needs Revision
Total Budget \$ 117,710
Approved \$ 110,009.00

Total Trips 22,365

Projected
Total Admin Cost Per Trip \$4.92

Increase \$ 22,050 23%
Approved 110,009.00 15%

**Green Mountain Transit Agency
Berlin, VT**

GMTA	FY06	2.0 FTEs
Items	Percentage	Budget
Salaries	64.1%	\$ 92,959
Benefits	18.1%	26,199
Legal/Consult	0.0%	-
Office Supplies	4.6%	6,614
Telephone	2.2%	3,200
Postage	0.0%	-
Travel	0.0%	-
Photocopy	0.0%	
Office Rent	0.0%	
Office Utilities	2.1%	3,000
Audit	1.8%	2,547
Acctg Services	0.6%	800
Personnel Train	0.2%	300
Personnel Ads	0.1%	150
Insurance	3.7%	5,340
Fees	0.0%	
Printing	0.0%	
Mktg-Educ Ads	0.0%	
Off Equip Maint	0.0%	
Off Equipment	1.7%	2,400
Furniture	0.1%	200
Service Charge	0.0%	
Off Maintenance	0.9%	1,260
Interest	0.0%	
	100.0%	\$ 144,969

Total Budget \$ 144,969
Est Yrmd \$ 151,585

Total Trips 47,405

Total Admin \$ 144,969
Cost Per Trip \$ 3.06
Actual \$ 3.20

Trip Increase from FY05
7,478 19%
39,927

GMTA	FY 07	2.8 FTEs
Items	Percentage	Budget
Salaries	61.9%	\$98,882.03
Benefits	21.7%	34,609
Legal/Cons	0.0%	
Office Sup	4.1%	6,614
Telephone	2.0%	3,200
Postage	0.0%	-
Travel	0.0%	-
Photocopy	0.0%	
Office Rent	0.0%	
Office Utiliti	1.9%	3,000
Audit	1.6%	2,547
Acctg Serv	0.5%	800
Personnel	0.2%	300
Personnel	0.1%	150
Insurance	3.3%	5,340
Fees	0.3%	500
Printing	0.0%	
Mktg-Educ	0.0%	
Off Equip	0.0%	
Off Equipm	1.5%	2,400
Furniture	0.1%	200
Service Ch	0.0%	
Off Mainte	0.8%	1,260
Interest	0.0%	
	100.0%	\$ 159,802

Approved
Total Budget \$ 159,802

Total Trips 51,750

Total Admin \$ 159,802
Cost Per Trip \$3.37

Increase \$ 14,833
Approved 10%

**Marble Valley Regional Transit District
Rutland, VT**

MVRTD	FY 06	3.20 FTEs
Items	Percentage	Budget
Salaries	57.3%	\$ 96,420
Benefits	17.8%	29,890
Legal/Consult	0.2%	400
Office Supplies	5.3%	8,950
Telephone	3.6%	6,120
Postage	0.3%	550
Travel	0.6%	1,000
Photocopy	0.0%	50
Office Rent	0.0%	
Office Utilities	1.0%	1,700
Audit	2.0%	3,300
Acctg Services	0.9%	1,500
Personnel Train	0.3%	500
Personnel Ads	0.2%	300
Insurance	3.0%	5,000
Fees	1.5%	2,500
Printing	1.5%	2,500
Mktg-Educ Ads	1.5%	2,500
Off Equip Maint	0.9%	1,500
Off Equipment	1.8%	3,000
Furniture	0.3%	500
Service Charge	0.0%	
Off Maintenance	0.0%	
Interest	0.0%	
	100.0%	\$ 168,180

MVRTD	FY 07	4.03 FTEs
Items	Percentage	Budget
Salaries	60.1%	\$ 106,062
Benefits	13.8%	24,394
Legal/Consult	0.2%	400
Office Supplies	5.4%	9,473
Telephone	3.5%	6,120
Postage	0.3%	550
Travel	1.1%	2,000
Photocopy	0.0%	50
Office Rent	0.0%	
Office Utilities	1.0%	1,700
Audit	2.5%	4,500
Acctg Services	1.4%	2,500
Personnel Train	0.6%	1,040
Personnel Ads	0.2%	300
Insurance	2.8%	5,000
Fees	1.4%	2,500
Printing	1.4%	2,500
Mktg-Educ Ads	1.4%	2,500
Off Equip Maint	0.8%	1,500
Off Equipment	1.7%	3,000
Furniture	0.3%	500
Service Charge	0.0%	
Off Maintenance	0.0%	
Interest	0.0%	
	100.0%	\$ 176,589

Approved
Total Budget \$ 176,589

Total Trips 45,300

Total Admin \$ 176,589
Cost Per Trip \$3.90

Increase \$ 8,409
Approved 5%

Total Budget \$ 168,180
Est. Ymd \$ 185,275

Total Trips 41,182

Total Admin \$ 168,180
Cost Per Trip \$4.08
Actual \$ 4.50

Trip Increase from FY05 14%
5,000
36,182

**Northeast Vermont Public Transit Network
St. Albans, VT**

NVPTN	FY 06	1.6 FTEs
Items	Percentage	Budget
Salaries	30.3%	\$ 45,000
Benefits	13.3%	19,800
Legal/Consult	0.7%	1,100
Office Supplies	1.8%	2,700
Telephone	1.8%	2,600
Postage	0.7%	1,000
Travel	2.0%	3,000
Photocopy	0.0%	
Office Rent	5.4%	8,000
Office Utilities	1.4%	2,100
Audit	4.8%	7,100
Acctg Services	1.3%	2,000
Personnel Train	1.0%	1,500
Personnel Ads	0.3%	500
Insurance	22.9%	34,000
Fees	2.6%	3,800
Printing	2.2%	3,200
Mktg-Educ Ads	1.2%	1,800
Off Equip Maint	0.6%	900
Off Equipment	2.2%	3,200
Furniture	0.6%	900
Service Charge	0.0%	-
Off Maintenance	1.5%	2,200
Interest	1.3%	2,000
	100.0%	\$ 148,400

Total Budget \$ 148,400
Est Yrmd \$ 149,500

Total Trips 40,925

Total Admin \$ 148,400
Cost Per Trip \$3.63
Actual 3.65

Trip Increase from 05
(4,451) -10%
45,376

NVPTN	FY 07	3.23 FTEs
Items	Percentage	Budget
Salaries	32.7%	\$ 53,000
Benefits	14.2%	23,000
Legal/Consult	0.5%	800
Office Supplies	1.7%	2,700
Telephone	1.9%	3,000
Postage	0.6%	900
Travel	1.9%	3,000
Photocopy	2.0%	3,200
Office Rent	5.6%	9,100
Office Utilities	1.4%	2,200
Audit	4.4%	7,100
Acctg Services	1.2%	2,000
Personnel Train	0.3%	500
Personnel Ads	0.3%	500
Insurance	22.0%	35,700
Fees	2.3%	3,800
Printing	0.3%	500
Mktg-Educ Ads	1.1%	1,800
Off Equip Maint	0.6%	1,000
Off Equipment	2.0%	3,200
Furniture	0.6%	900
Service Charge	0.0%	
Off Maintenance	1.4%	2,200
Interest	1.2%	2,000
	100.0%	\$ 162,100

Approved
Total Budget \$ 162,100

Total Trips 45,018

Total Admin \$ 162,100
Cost Per Trip \$3.60

Increase \$ 13,700
Approved 9%

**Rural Community Transit
St. Johnsbury, Morrisville, Newport, VT**

RCT	FY06		7.4 FTEs		Needs Revision		FY 07		7.5 FTEs	
	Items	Percentage	Budget	Total Budget	RCT	Items	Percentage Budget	Est. Ymd.	Total Budget	
	Salaries	62.5%	\$ 172,789	\$ 276,414		Salaries	59.3%	\$ 218,694		
	Benefits	12.8%	35,383	\$ 327,534		Benefits	17.1%	62,989		
	Legal/Consult	0.2%	600			Legal/Consult	0.0%	57		
	Office Supplies	0.7%	2,013			Office Supplies	2.0%	7,469		
	Telephone	1.2%	3,393			Telephone	1.4%	5,219		
	Postage	4.6%	12,612			Postage	1.2%	4,320		
	Travel	0.6%	1,726	\$2.81		Travel	0.3%	1,053		
	Photocopy	0.5%	1,507	3.33		Photocopy	0.6%	2,275		
	Office Rent	1.5%	4,104			Office Rent	2.2%	8,124		
	Office Utilities	1.1%	3,085			Office Utilities	1.5%	5,492		
	Audit	2.5%	6,825			Audit	2.1%	7,721		
	Acctg Services	3.0%	8,193			Acctg Services	3.6%	13,448		
	Personnel Train	0.4%	1,029			Personnel Train	0.3%	1,143		
	Personnel Ads	0.0%	100			Personnel Ads	0.0%	-		
	Insurance	5.9%	16,368			Insurance	4.4%	16,114		
	Fees	0.2%	585			Fees	0.5%	1,988		
	Printing	0.4%	1,101			Printing	0.1%	459		
	Mktg-Educ Ads	0.1%	322			Mktg-Educ Ads	0.0%	76		
	Off Equip Maint	0.1%	210			Off Equip Maint	0.0%	79		
	Off Equipment	0.2%	525			Off Equipment	0.0%	-		
	Furniture	0.0%	105			Furniture	0.0%	-		
	Service Charge	0.0%	-			Technical Services	2.0%	7,349		
	Off Maintenance	0.0%	-			Off Maintenance	0.0%	-		
	Interest	1.4%	3,839			Interest	1.3%	4,638		
		100.0%	\$ 276,414	14,081			100.0%	\$ 368,707		
				84,224						

Total Budget	\$ 368,707
Approved	\$ 317,876
Total Trips	108,136
Total Admin	
Cost Per Trip	\$2.94
Increase	\$ 92,293
Approved	\$ 41,462
	33%
	15%

**Stagecoach Transportation Service, Inc.
Randolph, VT**

STAGE	FY06	Percentage	Budget	2.0 FTEs
Items				
Salaries		62.9%	\$ 62,000	
Benefits		15.0%	14,750	
Legal/Consult		0.0%		
Office Supplies		1.6%	1,600	
Telephone		3.0%	3,000	
Postage		0.0%		
Travel		0.2%	200	
Photocopy		0.3%	300	
Office Rent		10.2%	10,000	
Office Utilities		0.0%		
Audit		2.7%	2,650	
Acctg Services		0.0%		
Personnel Train		0.0%		
Personnel Ads		0.0%		
Insurance		3.6%	3,500	
Fees		0.5%	500	
Printing		0.0%		
Mktg-Educ Ads		0.0%		
Off Equip Maint		0.0%		
Off Equipment		0.0%		
Furniture		0.0%		
Service Charge		0.0%		
Off Maintenance		0.0%		
Interest		0.0%		
		100.0%	\$ 98,500	

Total Budget \$ 98,500
Est. Yrnd \$ 108,628

Total Trips 26,924

Total Admin
Cost Per Trip \$3.66

Trip Increase from 05
1,679 7%
25245

STAGE	FY07	Percentage	Budget	2.13 FTEs
Items				
Salaries		62.9%	\$ 64,500	
Benefits		15.0%	15,350	
Legal/Consult		0.0%		
Office Supplies		1.6%	1,650	
Telephone		3.4%	3,500	
Postage		0.0%		
Travel		0.2%	200	
Photocopy		0.3%	300	
Office Rent		10.1%	10,350	
Office Utilities		0.0%		
Audit		2.6%	2,650	
Acctg Services		0.0%		
Personnel Train		0.0%		
Personnel Ads		0.0%		
Insurance		3.4%	3,500	
Fees		0.5%	500	
Printing		0.0%		
Mktg-Educ Ads		0.0%		
Off Equip Maint		0.0%		
Off Equipment		0.0%		
Furniture		0.0%		
Service Charge		0.0%		
Off Maintenance		0.0%		
Interest		0.0%		
		100.0%	\$ 102,500	

Approved
Total Budget \$ 102,500

Total Trips 29,616

Total Admin
Cost Per Trip \$3.46

Increase \$ 4,000
4%

CHITTENDEN COUNTY TRANSPORTATION AUTHORITY
FY 07 Medicaid Provider Rate Information

Non Public Transit Route Charges

1. Hourly Rate / Van (Medicaid Only) \$49.00 (SSTA)
2. Hourly Rate / Van (Combined Ridership) \$49.00 (SSTA)

Please describe practice for computing charges and list the amounts charged using the following example. There are 4 individuals to be carried on the van:

2 Medicaid Riders	<u>\$24.50</u>
1 Elderly & Disabled Program Rider	<u>\$12.25</u>
1 Self-pay or General Public Rider	<u>\$12.25</u>

SSTA provides the Medicaid lift equipped van transportation in Chittenden County. They will all be charged a per trip charge based upon the hourly rate. The per trip cost is called a "seat charge." The seat charge cost is based up a zonal fare system similar to how cab companies bill for their services. We have taken the hourly rate and based on ridership information have come to a seat charge where applicable.

Example, a ride from anywhere in Burlington to anywhere in Burlington is charged \$19.60 per one way trip. This is based on the average amount of 1-way trips that can be done in an hour in Burlington. So, \$49.00 an hour divided by 2.5 one way trips equals \$19.60 per one way trip.

Public Transit Route Charges

Please list fare charged to each of the following:

Single Medicaid Rider	\$1.25
Elderly & Disabled Program Rider	Half Fare
A Self-pay or General Public Rider	\$1.25

CCTA also operates a Medicaid bus pass program and the price of the monthly pass will need to be increased for FY 06 due to an increase of the base fare for the general public that went into effect February 21, 2005.

Taxi Charges

The Community Rate(s) in our Region is: It is a zonal fare program, within Burlington is approximately \$16, from Burlington to Williston is \$25.50 and from Burlington to Shelburne is approximately \$32.00. Other trips vary depending upon the length of the trip and the established fare policy established by the two cab companies that CCTA uses for the Medicaid program.

CONNECTICUT RIVER TRANSIT, INC.
FY 07 Medicaid Provider Rate Information

Non Public Transit Route Charges

1. Hourly Rate / Van (Medicaid Only) \$56.00
2. Hourly Rate / Van (Combined Ridership) \$56.00-MDCD / \$54.00-nonMDCD

Please describe practice for computing charges and list the amounts charged using the following example. There are 4 individuals to be carried on the van:

2 Medicaid Riders	<u>14.00 each</u>
1 Elderly & Disabled Program Rider	<u>13.50</u>
1 Self-pay or General Public Rider	<u>13.50</u>

The length of time traveled, divided by the number of riders, times the rate

Public Transit Route Charges

Please list fare charged to each of the following:

Single Medicaid Rider	<u>- 0 -</u>
Elderly & Disabled Program Rider	<u>- 0 -</u>
A Self-pay or General Public Rider	<u>- 0 -</u>

Volunteer Driver Charges

Please describe practice for computing charges and list the amounts charged to:

Medicaid Riders	Actual mileage, plus 17 miles for each hour of wait time (after the first hour), x \$0.445/per mile or the current GSA rate.
Combined Ridership	Computed the same as above, divided by the number of riders.

Taxi Charges

The Community Rate(s) in our Region is:

Brattleboro Taxi \$3.00, plus \$2/mi.
Days In Town, depending upon distance \$14.00; \$16.00 \$18.00.

GREEN MOUNTAIN CHAPTER – AMERICAN RED CROSS
FY 07 Medicaid Provider Rate Information

Non Public Transit Route Charges

- | | |
|---|------------------|
| 1. Hourly Rate / Van (Medicaid Only) | \$50. per hr |
| 2. Hourly Rate / Van (Combined Ridership) | \$50.0.00 per hr |

Please describe practice for computing charges and list the amounts charged using the following example. There are 4 individuals to be carried on the van:

2 Medicaid Riders	\$12.50 each (\$25.00)
1 Adult Day (5310) Program Rider	\$12.50
1 Self-pay or General Public Rider	\$12.50

All Medicaid rides are billed in ¼ hr increments. Unless there are two Medicaid riders, then the cost is split. If there are other riders than the billing is broken down to the other rider programs and the appropriate amounts are deducted from the Medicaid bill. The Green Mountain Chapter of the American Red Cross uses donations to cover charges incurred by that group of the general public that has the inability to pay.

Public Transit Route Charges

Please list fare charged to each of the following:

Single Medicaid Riders	\$0.50 per ride
Adult Day (5310) Program Rider	\$0.50 per ride
A Self-pay or General Public Rider	\$0.50 per ride

Volunteer Driver Charges

Please describe practice for computing charges and list the amounts charged to:

Medicaid Riders	\$0.445 per mile
Combined Ridership	\$0.445 per mile divided by the # of riders
Current GSA Rate	

Taxi Charges

The Community Rate in our Region is:

Newest taxi service has provided rate of \$4.50 per trip for approx. 1-mile trip.

GREEN MOUNTAIN TRANSIT AGENCY
FY 07 Medicaid Provider Rate Information

Non Public Transit Route Charges

- | | |
|---|-----------------------|
| 1. Hourly Rate / Van (Medicaid Only) | \$55.50 (Bus and Van) |
| 2. Hourly Rate / Van (Combined Ridership) | \$55.50 (Bus and Van) |

Please describe practice for computing charges and list the amounts charged using the following example. There are 4 individuals to be carried on the van:

2 Medicaid Riders	<u>\$27.75</u>
1 Elderly & Disabled Program Rider	<u>\$13.88</u>
1 Self-pay or General Public Rider	<u>\$13.88</u>

GMTA would take the number of passengers (4) and divide the hourly rate by that number. GMTA would then bill each program that amount.

Public Transit Route Charges

Please list fare charged to each of the following:

Single Medicaid Rider	<u>\$1.00</u> \$2.00 (Deviated Trip)
Elderly & Disabled Program Rider	<u>\$.50</u>
A Self-pay or General Public Rider	<u>\$1.00</u> \$2.00 (Deviated Trip)

Volunteer Driver Charges

Please describe practice for computing charges and list the amounts charged to:

Medicaid Riders	\$0.445 per mile
-----------------	------------------

GMTA charges \$0.405 per mile from the driver's home, to the clients home to pick them up, to their appointment and back again with the final stop at the driver's home. There is also a wait charge of 17 miles per hour for long layovers for volunteer drivers.

Combined Ridership	\$0.445 per mile
--------------------	------------------

GMTA tracks each rider by mileage and apportions each share of the combined trip to each funding source. The volunteer driver receives only the total miles driven.

Taxi Charges

The Community Rate(s) in our Region are: \$5 to \$6 within Barre City or Montpelier, \$8 to \$9 from Montpelier/Barre City to the hospital and between Barre and Montpelier \$10 to \$12.

MARBLE VALLEY REGIONAL TRANSIT DISTRICT
FY 07 Medicaid Provider Rate Information

Non Public Transit Route Charges

- | | |
|---|----------------|
| 1. Hourly Rate / Van (Medicaid Only) | <u>\$54.50</u> |
| 2. Hourly Rate / Van (Combined Ridership) | <u>\$54.50</u> |

Please describe practice for computing charges and list the amounts charged using the following example. There are 4 individuals to be carried on the van:

- | | |
|------------------------------------|--------------------------|
| 2 Medicaid Riders | <u>25% each of total</u> |
| 1 Adult Day (5310) Program Rider | <u>25% of total</u> |
| 1 Self-pay or General Public Rider | <u>25% of total</u> |

Public Transit Route Charges

Please list fare charged to each of the following:

- | | |
|------------------------------------|--------------|
| Single Medicaid Riders | <u>\$.50</u> |
| Adult Day (5310) Program Rider | <u>\$.50</u> |
| A Self-pay or General Public Rider | <u>\$.50</u> |

Volunteer Driver Charges

Please describe practice for computing charges and list amounts charged to:

- | | |
|------------------------|--|
| Single Medicaid Riders | <u>0 charged to riders; \$.445 per mile charged to Medicaid or the current GSA rate.</u> |
| Combined Ridership | <u>MVRTD has not had the opportunity to combine ridership in volunteer vehicles, however would use a shared cost similar to the example under I.2 above.</u> |

Taxi Charges

The Community Rate in our Region is:

\$8.00 - \$16.50 per one way trip in Rutland; increases with distance from the city.

NORTHWEST VERMONT PUBLIC TRANSIT NETWORK
FY 07 Medicaid Provider Rate Information

Non Public Transit Route Charges

- | | |
|---|--------------|
| 1. Hourly Rate / Van (Medicaid Only) | <u>52.00</u> |
| 2. Hourly Rate / Van (Combined Ridership) | <u>52.00</u> |

Please describe practice for computing charges and list the amounts charged using the following example. There are 4 individuals to be carried on the van:

2 Medicaid Riders	<u>13.00 each</u>
1 Elderly & Disabled Program Rider	<u>13.00</u>
1 Self-pay or General Public Rider	<u>13.00</u>

Public Transit Route Charges

Please list fare charged to each of the following:

Single Medicaid Rider	<u>1.00</u>
Elderly & Disabled Program Rider	<u>1.00</u>
A Self-pay or General Public Rider	<u>1.00</u>

Fares for the down town shuttle are \$1.00 1-way. St. Albans to Sheldon \$2.00 1-way, St. Albans to Enosburg \$2.75 1-way, St. Albans to Berkshire \$2.75 1-way, St. Albans to Richford \$3.00 1-way.

Volunteer Driver Charges

Please describe practice for computing charges and list the amounts charged to:

Medicaid Riders	<u>\$0.445 per mile</u>
Combined Ridership	<u>\$0.445per mile (divided by number of riders)</u>
Current GSA Rate	

Taxi Charges

The Community Rate(s) in our Region is:	<u>Varies depending on zone.</u>
<u>Zone 1 in City limits \$6.50-\$7.50</u>	<u>Zone 2 St. Albans Town \$10.00</u>
<u>St. Albans to Swanton \$25.00</u>	<u>St. Albans to Burlington \$75.00</u>

The above are 1-way charges. Rate per mile for other areas is \$1.85 per mile.

RURAL COMMUNITY TRANSPORTATION, INC.
FY 07 Medicaid Provider Rate Information

Non Public Transit Route Charges

- | | |
|---|-----------------|
| 1. Hourly Rate / Van (Medicaid Only) | <u>\$ 48.00</u> |
| 2. Hourly Rate / Van (Combined Ridership) | <u>\$ 48.00</u> |

Please describe practice for computing charges and list the amounts charged using the following example. There are 4 individuals to be carried on the van:

2 Medicaid Riders	<u>\$ 24.00 per hr</u>
1 Adult Day (5310) Program Rider	<u>\$ 12.00 per hr</u>
1 Self-pay or General Public Rider	<u>\$ 12.00 per hr</u>

Assuming all time is equal. Based on the individual's time spent on the van, rounded to the nearest 15 minutes intervals, times the hourly rate would give you the cost per person.

Public Transit Route Charges

Please list fare charged to each of the following:

Single Medicaid Riders	<u>\$2.00</u>
Adult Day (5310) Program Rider	<u>\$2.00</u>
A Self-pay or General Public Rider	<u>\$2.00</u>

RCT encourages 10 day pass @\$15.00 or 1 month pass @\$38.00

Volunteer Driver Charges

Please describe practice for computing charges and list the amounts charged to:

Medicaid Riders	\$.445
Combined Ridership	\$.445

Shared trips are split based on mileage. If it is 10 miles for the Medicaid person then the cost is \$4.45 and if it is 20 miles pickup and return to second person then it would be \$8.90 and total mileage is 30 miles = \$13.35.

Taxi Charges

The Community Rate in our Region is: Varies by individual taxi company.

STAGECOACH TRANSPORTATION SERVICES, INC.
FY 07 Medicaid Provider Rate Information

I. Non Public Transit Route Charges

- 3. Hourly Rate / Van (Medicaid Only) \$47.60
- 4. Hourly Rate / Van (Combined Ridership) \$45.00 discounted rate

Please describe practice for computing charges and list the amounts charged using the following example. There are 4 individuals to be carried on the van:

2 Medicaid Riders	<u>\$11.90</u> each
1 Adult Day (5310) Program Rider	<u>\$11.25</u>
1 Self-pay or General Public Rider	<u>\$11.25</u>

Charges for Medicaid passengers are pro-rated by:

- a. Number of passengers attributable to Medicaid if all passengers have common pick-up / drop off points (i.e. 2 of 4 passengers are Medicaid = 50% of ridership is Medicaid. If it is a one hour route, then Medicaid would be charged 50% of hourly Medicaid rate of \$47.60) or \$23.80 for the two Medicaid passengers. The Adult Day passenger and the Self-pay passenger would each be charged 25% of the one hour route time, using the community hourly rate.
- b. Route time attributable to Medicaid passengers if passengers have different pick-up / drop-off points. If introduction of two Medicaid passengers lengthens a route by a 15 minute segment, than Medicaid would be charged 25% of hourly Medicaid rate. Passengers being paid by other funding sources will be billed on an hourly pro-ration to the amount time their trip(s) added to the route, using the Community rate. The core route cost would be distributed as indicated in #1 above.

c. Public Transit Route Charges

Please list fare charged to each of the following:

Single Medicaid Riders	published fare
Adult Day (5310) Program Rider	published fare
Self-pay or General Public Rider	published fare

d. Volunteer Driver Charges

Please describe practice for computing charges and list the amounts charged to:
 Medicaid Riders charged at Medicaid or \$0.445 per mile or the current GSA rate
 Combined Ridership charged to Medicaid or \$0.445 per mile or the current GSA rate,
 pro-rated by # of passengers if all have common pick-up and drop-off or by distance if
 passengers have different pick-up – drop-off points.

e. Taxi Charges

The Community Rate in our Region is: \$1.50 per mile

SPECIAL SERVICES TRANSPORTATION AGENCY
FY 07 Medicaid Provider Rate Information

Hourly Van Charges

1. Hourly Rate / Van (Medicaid Only) \$49.00 (SSTA)
2. Hourly Rate / Van (Combined Ridership) \$49.00 (SSTA)

Please describe practice for computing charges and list the amounts charged using the following example. There are 4 individuals to be carried on the van:

2 Medicaid Riders	<u>\$24.50</u>
1 Elderly & Disabled Program Rider	<u>\$12.25</u>
1 Self-pay or General Public Rider	<u>\$12.25</u>

SSTA provides the Medicaid lift equipped van transportation in Chittenden County. They will all be charged a per trip charge based upon the hourly rate. The per trip cost is called a "seat charge." The seat charge cost is based up a zonal fare system similar to how cab companies bill for their services. We have taken the hourly rate and based on ridership information have come to a seat charge where applicable.

Example, a ride from anywhere in Burlington to anywhere in Burlington is charged \$19.60 per one way trip. This is based on the average amount of 1-way trips that can be done in an hour in Burlington. So, \$49.00 an hour divided by 2.5 one way trips equals \$19.60 per one way trip.

SSTA will provide transportation on call to approved mental health facilities. Charges for these services will be set by mutual agreement between the provider and OVHA and are currently at \$10.00 above the community hourly rate.