

DVHA Routing Form

Revision Date 5/1/12

Type of Agreement: Grant Agreement #: 03410-6111-12 Form of Agreement: Amendment Amendment #: 4

Name of Recipient: Fletcher Allen Health Care Vendor #: 7449

Program Manager: Lisa Dulsky Watkins Phone #: 802-872-7535

Agreement Manager: Emily Trantum Phone #: 802-879-5946

Brief Explanation of Agreement: **Amend current grant for an additional year, add to the scope of work, and revise Attachment B.**

Start Date: 11/14/2011 End Date: 9/30/2013 Maximum Amount: \$503,610.00

Amendments Only: Maximum Prior Amount: \$605,610.00 Percentage of Change: -16.80%

Bid Process (Contracts Only): Standard Simplified Sole Source Statutory Master Contract SOW

Funding Source

Global Commitment 93.778	\$455,900.00	GC- HIT	\$20,000.00
Special: Settlement	\$22,710.00	Special: HIT	\$5,000.00

Contents of Attached Packet

- AA-14 Attachments A, B, C & F Attachment G - Academic Research
- Sole Source Memo Attachment D - Modifications to C & F MOU
- Qualitative/Justification Memo Attachment E - Business Associate Agreement Other: **Base, Amendment 1, 2, & 3**

Reviewer	Reviewer Initials	Date In	Date Out
DVHA Grant & Contract Administrator	Kate Jones	4/19	4/25
DVHA BO	Jill Gould <i>Cornel Hawthorn</i>	4-25	4-25
DVHA Commissioner or Designee	Mark Larson, Commissioner	4.25	4.29
AHS Attorney General	Seth Steinzor, AAG		5/2/13
Following Approvals for Contracts Only:			
AHS CIO			
AHS Central Office			
AHS Secretary			

Vision Account Codes:

AMENDMENT

It is agreed by and between the State of Vermont, Department of Vermont Health Access (hereafter called the "State") and Fletcher Allen Health Care (hereafter called the "Grantee") that the grant on the subject of administering the Vermont Blueprint Integrated Health System in the Chittenden County Health Service Area, effective November 14, 2011 is hereby amended effective July 15, 2013 as follows:

1. By deleting on page 1 of 19 of Amendment 3, Section 3 (Maximum Amount) and substituting in lieu thereof the following Section 3:

3. Maximum Amount: In consideration of services to be performed by the Grantee, the State agrees to pay the Grantee, per payment provisions specified in Attachment B, a sum not to exceed \$503,610.

2. By deleting Section 5 (Source of Funds) on page 1 of 19, as amended by Amendment 3, and substituting in lieu thereof the following Section 5:

5. Source of Funds: GC \$455,900 Special: HIT \$5,000 Settlement \$22,710 GC-HIT \$20,000

3. By deleting in its entirety Section F (Community-Based Self-Management Programs) of Attachment A as amended on page 9 of Amendment 3, and substituting in lieu thereof the following Section F:

F. Community-Based Self-Management Programs

The objective of Blueprint community-based self-management programs is to provide a coordinated approach to patient self-management support. Ideally, advanced primary care practices use a variety of mechanisms to work with their patients to establish goals and action plans, provide support and develop strategies for self-management. That work is reinforced when CHTs provide self-management counseling and education to patients with complex needs. For those patients who wish to participate in specialized group programs, the State supports Healthier Living Workshops (HLW) for chronic disease, diabetes, and chronic pain; Tobacco Cessation programs; Wellness Recovery Action Plan (WRAP) Workshops; and the Diabetes Prevention Program.

The Grantee shall oversee local planning, participant recruitment, implementation and evaluation of the community based self-management programs.

The Grantee shall ensure that all workshops will be led by certified leaders as specified by the State. The Grantee shall assure the retention of certified course leaders to lead the workshops. The Grantee shall ensure that the regional coordinator reviews workshop evaluations with every leader or leader pair following each workshop and makes a plan for improvements.

The Grantee shall ensure that the HSA has at least one person providing support to the tobacco cessation group program that is certified as a tobacco treatment specialist (TTS) by an accepted training program. A list of accepted training programs is available through the Vermont Department of Health.

The Grantee shall ensure that interpreter services from appropriately credentialed interpreters are available to workshop participants upon request.

As part of the statewide evaluation of the Blueprint self-management programs, the Grantee will provide participant data in a format specified by the State for each workshop.

- CHT will enter patient encounter data into DocSite either directly, through an interface with the Health Information Exchange, or a file sent to DocSite, whichever is available at that time. For payment, encounter data should be entered and up-to-date by the end of each quarter: \$2,000.00 per quarter.

Up to \$8,000, for which the Grantee can invoice the State on January 15, 2013 and July 15, 2013 and which will be paid as follows:

- Documentation that Grantee has evaluated the number of referrals to the CHT from each practice relative to the practice's number of total unique Vermont patients, and conducted additional in-person outreach activities to practices that have the lowest proportion of CHT referrals: \$3,800 for conducting evaluation and outreach up to twice during grant year.

Payments for project management will only be issued after all reports due in that month or quarter are received by the State.

Health Information Technology Interface with State Health Information Exchange and Covisint DocSite Registry

The Grantee will use best efforts to encourage its owned and the community based practices to optimize the HIE and electronic health record resources available in the HSA. To accomplish this work the Grantee may invoice for up to \$20,000 in information technology payments for the following activities which may include funds directly provided to the community-based primary care practices to accomplish this work:

- Up to \$3,000 per practice to assist in practice-level data entry or EMR modification, upon approval by the State's Blueprint Assistant Director of a proposal for such work and completion of the work
- Up to \$3,000 per practice to assist in successful DocSite connectivity, as evidenced by practice satisfaction with connectivity, which may include payments for additional personnel time beyond the normal scope of their responsibilities in the practices or by the Grantee; or payments to EMR vendors to develop the interfaces on behalf of the practices
- Up to \$1,000 per practice to assist in successful generation of reports from DocSite or the EMR to support panel management as evidenced by practice satisfaction with reporting, which may include payments for additional personnel time beyond the normal scope of their responsibilities in the practices or by the Grantee; or payments to EMR vendors to develop the reports on behalf of the practices

Community Based Self-Management Programs

The community based self-management budget supports the salary and benefits of the regional coordinator, plus all other expenses to implement the workshops, including but not limited to marketing, leader stipends, materials, book and CDs for participants, and facility expenses. The Grantee shall invoice the State monthly up to the sum of \$2,500 for self-management activities in Section F based on expenses incurred and completion of grant deliverables.

Grantee may also invoice for actual expenses up to \$3,000 for the local master trainer to provide consultation to the State, HLW training, HLW refreshers, or audits.

In addition to the monthly base payments, the Grantee shall be paid \$200 per participant who completes:

- **HLW/WRAP:** 4 or more sessions of a Healthier Living Workshop (chronic disease, diabetes, or chronic pain) or Wellness Recovery Action Planning Workshop with 10 or more registrants.

Note: Each line item of this budget covers all expenses needed to meet the deliverables as outlined in the grant agreement (including personnel salaries and benefits; supplies; equipment; overhead; marketing; travel; and community self-management program leader training, auditing, and stipends), unless otherwise specified.

Approved Budget for October 1, 2012 to September 30, 2013:

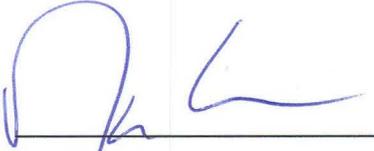
Project Management	\$140,400
Project Management Milestones	\$13,600
Health Information Technology Interfaces	\$20,000
Self-Management Programs	\$30,000
Self-Management Master Trainer Consultation	\$3,000
Self-management Completers (\$200 each)	\$23,600
Training and Travel	\$10,000
Training Carried Over (2011-2012)	\$10,000
Flexible funding	\$7,500
Amendment #4 Total	\$258,100

The total grant award was calculated by adding the budgets from the annual periods October 1, 2011 to September 30, 2012 and October 1, 2012 to September 30, 2013. If the Grantee expends less than the budgeted amount to accomplish the work outlined in the 2011/2012 Scope of Work to be Performed, then the maximum amount of the grant for the grant period October 1, 2011 to September 30, 2013 will be reduced by administrative letter to reflect the unexpended funds in the first annual period.

This amendment consists of 6 pages. Except as modified by this amendment and any previous amendments, all provisions of this grant, (#03410-6111-12) dated **November 14, 2011** shall remain unchanged and in full force and effect.

STATE OF VERMONT
DEPARTMENT OF VERMONT HEALTH ACCESS

GRANTEE
FLETCHER ALLEN HEALTH CARE



MARK LARSON, COMMISSIONER

7.12.13
DATE



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7-9-13
DATE