

1. **Parties:** This is an Amendment for Grant #03410-6121-12 for services between the State of Vermont, Department of Vermont Health Access, (hereinafter called “State”), and Little Rivers Health Care, Inc., (hereinafter called “Grantee”). This is the second change.

2. **Reason for Amendment:** The reason for this Amendment is addition of Health Service Area specific training, consultation, and travel expenses.

3. **By deleting on pages 1 of 2 of Amendment 1 dated 4/30/2012, Section 3 “Maximum Amount” and its contents, and substituting in lieu of thereof the following Section 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 \$167,138.

4. **By deleting on pages 1 of 2 of Amendment 1 dated 4/30/2012, Section 5 “Source of Funds” and its contents, and substituting in lieu of thereof the following Section 5:**

**Source of Funds:** GC \$160,400 Special: HIT \$5,000 Settlement \$ 1,738

5. **By adding on page 10 of 23 of the original agreement, the following section to Attachment A (Scope of Work):**

**J. HSA-Specific Training, Consultation, and Travel Expenses:**

Upon approval of the assigned Blueprint Assistant Director, the Grantee will coordinate training, consultation, and travel expenses up to \$10,000 for project management, community health team staff, practice facilitation, community-based self-management programs and Blueprint primary care practices. These activities will include support for learning collaboratives, travel to statewide meetings, registration fees for training events, and speaker’s fees.

6. **By adding at the bottom of page 12 of 23 of the original agreement, the following passage to Attachment B (Payment Provisions):**

**HSA-Specific Training, Consultation, and Travel Expenses**

The Grantee will invoice the State monthly for the actual expenses incurred for training, consultation and travel not to exceed \$10,000. Mileage expense for use of personal vehicles will be reimbursed at the current State rate. Meals will be reimbursed as actual expenses up to the current State rate.

7. **By deleting the budget table on page 2 of 2 of Amendment 1 dated 4/30/2012, in Attachment B (Payment Provisions), and substituting in lieu of thereof the following budget table:**

**Approved Budget for SFY 2012:**

Project Management	\$70,000
Care Coordination	\$60,000
HIT Data Entry	\$5,000
Self-Management Programs	\$12,400
HSA-Specific Training & Consultation	\$10,000
Tobacco Cessation Training	\$1,738
Program Budget Total	\$159,138

HLW Incentive	\$1,500
Tobacco Cessation Incentive	\$1,500
QI Activity [optional]	\$5,000
Potential Incentives Total	\$8,000
<b>Total</b>	<b>\$167,138</b>

8. **Amendment:** All other terms and conditions of the original grant remain in full force and effect. No other changes, modifications, or amendments in the terms and conditions of this grant shall be effective unless reduced to writing, numbered, and signed by the duly authorized representative of the State and Grantee.

**WE, THE UNDERSIGNED PARTIES, AGREE TO BE BOUND BY THIS GRANT.**

**STATE OF VERMONT**

**GRANTEE**

**By:**

**By:**

\_\_\_\_\_

\_\_\_\_\_

**Mark Larson, Commissioner**

**Gail Auclair, CEO**

**AHS/DVHA**

**Little Rivers Health Care, Inc.**

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_