

DVHA Routing Form

Type of Agreement: MOU Agreement #: 03410-204-12 Form of Agreement: New Amendment #: _____

Name of Recipient: Central Vermont Community Land Trust Vendor #: _____

Agreement Manager: Jason Elledge Phone #: 802-879-5946

Brief Explanation of Agreement: **NVRH will receive monthly payments from Medicare for Community Health Teams and shall disburse a portion of such payments to Central Vermont Community Land Trust for further disbursement to fund SASH in Washington and Orange Counties.**

Start Date: January 1, 2012 End Date: June 30, 2014 Maximum Amount: \$0.00

Amendments Only: Maximum Prior Amount: _____ Percentage of Change: _____

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

Funding Source	
	\$0.00

- 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: _____

Reviewer	Reviewer Initials	Date In	Date Out
DVHA Grant & Contract Administrator	Kate Jones	KJ	12/14
DVHA BO	Jill Gould	JG	12/15/11
DVHA Commissioner or Designee	Mark Larson, Commissioner	ML	12-21-11
AHS Attorney General	Seth Steinzor	SS	12/29/11
Following Approvals for Contracts Only:			
AHS CIO			
AHS Central Office			
AHS Secretary			

Vision Account Codes: N/A

Subrecipient Module	Initials & Date
<input type="checkbox"/> Entry	_____
<input type="checkbox"/> FFATA Entry	_____

Vision PO #: _____

MEMORANDUM OF UNDERSTANDING
BETWEEN THE BLUEPRINT FOR HEALTH AND
NORTHEASTERN VERMONT REGIONAL HOSPITAL AND
CENTRAL VERMONT COMMUNITY LAND TRUST

THIS MEMORANDUM AGREEMENT, effective January 1, 2012, is by and between Northeastern Vermont Regional Hospital, Inc. ("NVRH"), the Blueprint for Health of the Department of Vermont Health Access ("State") and Central Vermont Community Land Trust, the designated regional housing organization or ("DRHO") for the Support and Services at Home program ("SASH") in Washington and Orange Counties.

WHEREAS, the State is engaged in developing and implementing a statewide network of Community Health Teams;

WHEREAS, SASH shall work as an extension of Community Health Teams throughout the State of Vermont;

WHEREAS, NVRH will receive monthly payments from Medicare for Community Health Teams and shall disburse a portion of such payments to the DRHO for further disbursement to fund SASH in Washington and Orange Counties;

NOW THEREFORE, in consideration of the premises and the agreements hereinafter set forth, the Parties agree as follows:

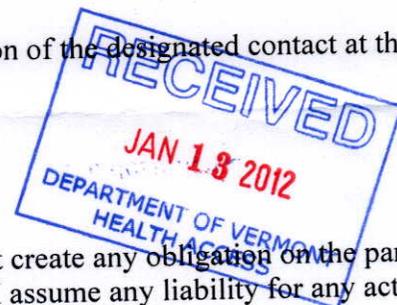
1. Payment: Within fifteen (15) days of receipt of each monthly Medicare payment, NVRH shall distribute a portion of such payment to the DRHO in the manner set forth in Paragraph 2, below. The amount of each distribution shall be determined pursuant to the breakdown of Core Community Health Team payments and SASH payments provided to the NVRH project manager within ten business days of the beginning of each calendar year quarter by the Blueprint for the State's Health Associate Director or her/his designee.

2. Contact: NVRH shall send all payments to the attention of the designated contact at the following address: Central Vermont Community Land Trust
Attn: Jenn Allard
107 North Main Street,
Barre, VT 05641

3. Limitation: NVRH's payments to the DRHO shall not create any obligation on the part of NVRH to monitor the performance of the DRHO, nor shall NVRH assume any liability for any act or failure to act by the DRHO.

4. Term: This Agreement is effective January 1, 2012 and will remain in effect through June 30, 2014.

5. Cancellation: This Agreement may be suspended or cancelled by any Party by giving the other Parties written notice at least 90 days in advance. Notwithstanding this provision, if a



governmental agency with due authority determines that a program or facility operated by one or more of the other Parties, wherein services authorized under this agreement are provided, is not in compliance with State and Federal law or is operating with deficiencies that pose immediate jeopardy to a person's health, welfare or safety, the State may terminate this Agreement immediately and notify the other Parties accordingly. Also, in the event that federal funds related to this Agreement become unavailable or are reduced, the State may cancel this Agreement with no obligation to pay the other Parties from State revenues.

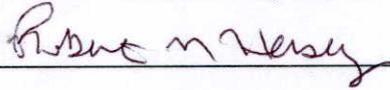
power).

7. No Third Party Beneficiary: This Agreement is solely for the benefit of the Parties hereto and no third party beneficiary is intended.

8. Applicable Law: This Agreement shall be governed by and interpreted exclusively under the laws of the State of Vermont.

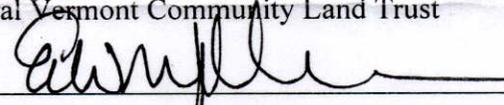
IN WITNESS WHEREOF, the Parties have executed this Agreement, to be effective as of the date stated above.

Northeastern Vermont Regional Hospital, Inc.

By: 

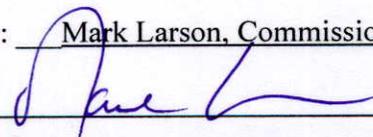
Date: 1/12/12

Central Vermont Community Land Trust

By: 
Eileen Pellicier, Executive Director

Date: 1/12/12

Department of Vermont Health Access

By: Mark Larson, Commissioner


Date: 1.18.12