

DVHA Routing Form

Type of Agreement: Grant Agreement #: 03410-6105-12 Form of Agreement: Amendment Amendment #: 1

Name of Recipient: University of Vermont - VCHIP Vendor #: 42844

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

Brief Explanation of Agreement: **Continue expansion of medical home evaluation and medical record evaluation for the state's Blueprint for Health initiative.**

Start Date: 10/20/2011 End Date: 06/30/2012 Maximum Amount: \$798,663.00

Amendments Only: Maximum Prior Amount: \$785,522.00 Percentage of Change: 1.67%

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

Funding Source			
Global Commitment 93.778	\$798,663.00		

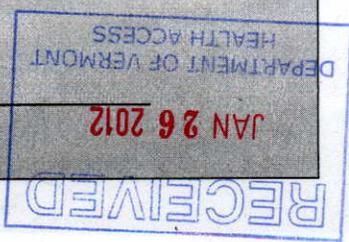
- Contents of Attached Packet
- AA-14
 - Attachments A, B, C & F
 - Attachment G - Academic Research
 - Sole Source Memo
 - Attachment D - Modifications to C & F
 - MOU
 - Qualitative/Justification Memo
 - Attachment E - Business Associate Agreement
 - Other: **Amendment 1, Original Grant**

Reviewer	Reviewer Initials	Date In	Date Out
DVHA Grant & Contract Administrator	Kate Jones	<i>CEJ</i>	12/19
DVHA BO	Jill Gould	<i>JG</i>	12/20/11
DVHA Commissioner	Mark Larson	<i>ML</i>	12/20/11
AHS Attorney General	Seth Steinzor	<i>SS</i>	1/24/12
Following Approvals for Contracts Only:			
AHS CIO			
AHS Central Office			
AHS Secretary			

Vision Account Codes: **3410010000 20405 550500 41628**

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

Vision PO #: **3595**



1. **Parties:** This is an Amendment for Grant #03410-6105-12 for services between the State of Vermont, Department of Vermont Health Access, (hereinafter called "State"), and the University of Vermont, (hereinafter called "Grantee"). This is the 1st change.
2. **Reason for Amendment:** The reason for this Amendment is to add facilitator training and travel for Health Team Works Training.
3. **Replace:** The following sections of grant #03410-6105-12 will be replaced in their entirety as follows:

- a. Delete Number 3 on page 1 of 25 (Maximum Amount), and replace with the following:

Maximum Amount: In consideration of the services to be performed by Grantee, the State agrees to pay Grantee, in accordance with the payment provisions specified in Attachment B, a sum not to exceed **\$798,663.00**

- b. Delete Number 5 on page 1 of 25 (Source of Funds), and replace with the following:

Source of Funds: State \$ 0 Special \$ 0 Other - \$ 798,663.00
GC

- c. By adding on page 5 of 25, prior to the Performance Standards heading (Attachment A, Scope of Work).

Health Team Works training: Two of Grantee's facilitators attended the Health Team Works training in early December, 2011 in Lakewood, Colorado. The facilitators completed the assessment, all pre-work and post work and participated in monthly teleconferences with Health Team Works staff. Facilitators were responsible for paying for and making travel arrangements to attend the training ensuring they arrive and leave Colorado within the appropriate amount of time to attend the entire training. Meals were not covered under this grant agreement. These Health Team Works training and travel expenses for both facilitators, including UVM indirect costs, will not exceed \$13,141.21.

- d. By replacing paragraph 2 on page 8 of 25 (Attachment B, Payment Provisions) with the following:

Grantee will invoice the Department of Vermont Health Access (DVHA) on a quarterly basis, for the previous quarter's actual and approved expenditures. Quarterly invoicing in arrears will continue through the life of the grant. The maximum payable amount under this Grant shall not exceed **\$798,663.00**.

e. By Replacing on page 9 the approved budget with the following approved budget:

Department of Vermont Health Access
Budget

Grant Number -
03410-6105-12

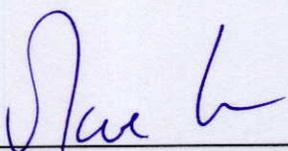
	Original Budget	Grant Number - 03410-6105-12
Grantee Name: VCHIP		
Grantee's/Contractor's Contact Person: Grantee's/Contractor's Email Address:	Sara Barry sara.barry@uvm.edu GRANT/CONTRACT BUDGET	FOCUS AREA
PERSONNEL		
Salaries and Benefits		Evaluation
Judy Shaw-Principal Investigator	5,649	
Sara Barry-Evaluation Advisor	4,757	
Juli Krulewitz-Lead Evaluator	60,544	
TBN-Data Analyst	14,297	
Mike DeSarno- Data Manager	6,425	
TBN Chart Reviewers	59,785	
Kara Bisonnette – Project Coordinator	37,065	
Nick Adams – Research Specialist	56,127	
Patterson, Dana, McLaughlin - NCQA Surveyors (3 FTE)	148,260	
Neil Sarkar	5,428	
Diantha Howard/TBN Informatics Developer	39,001	
Sub Grantee/Sub Contractors		
Beth Tolmie-Focus Group Leader	14,000	
April Henderson – Transcription	1,600	
Total Personnel	452,938	
OPERATING		
Advertising/Marketing		Evaluation
Training	7,000	
Travel	21,924	
Telephone	6,750	
Supplies/Materials	33,388	
Participant Stipends	500	
Printing/Postage	75,750	
Other		
Total Operating	145,312	
INDIRECT COSTS/ADMIN		
Facilities & Administration	33.50%	
Total Administration	200,414	
TOTAL GRANT/CONTRACT AMOUNT	798,663	

4. **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.

THE PARTIES SET FORTH BELOW AGREE TO EXECUTE THIS AMENDMENT:

BY THE STATE OF VERMONT:

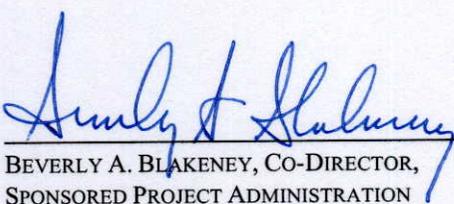
BY THE GRANTEE:



MARK LARSON, COMMISSIONER

2-2-12

DATE



BEVERLY A. BLAKENEY, CO-DIRECTOR,
SPONSORED PROJECT ADMINISTRATION
UNIVERSITY OF VERMONT

JAN 30 2012

DATE

AHS/DVHA