MEMORANDUM

To: Joint Fiscal Committee members
From: Daniel Dickerson, Fiscal Analyst
Date: August 10, 2016
Subject: Grant Request #2838, #2839

Enclosed please find two (2) items that the Joint Fiscal Office has received from the administration.

**JFO #2838** – $24,000 grant from the National Park Service to the VT Dept. of Housing and Community Development. The grant funds will be used by the Department to create a geospatial map of the southern portion of Mount Independence State Historic Site. The map will contain visible historical features and be compared against other historical documents to assess the use of the southern side of the Mount in Revolutionary War engagements.

[JFO received 8/3/16]

**JFO #2839** - $200,000 grant from various sources (see below) to the VT Dept. of Health. The funds will be used to develop and implement a physician-based “produce prescription program” in two Vermont counties. Patients who receive supplemental nutrition assistance program (SNAP) benefits will be given coupons by their physicians to buy fresh or frozen produce in participating local stores. The Department will evaluate the success of the program during the one-year funding period. Grantors are as follows:

1. USDA National Institute of Food and Agriculture $100,000
2. City Market Food Co-op $15,000
3. UVM Medical Center $15,000
4. In-Kind services (list attached to grant documents) $70,000
   Total $200,000

[JFO received 8/3/16]

Please review the enclosed materials and notify the Joint Fiscal Office (Daniel Dickerson at (802) 828-2472; ddickerson@leg.state.vt.us) if you have questions or would like an item held for legislative review. Unless we hear from you to the contrary by August 24, 2016 we will assume that you agree to consider as final the Governor’s acceptance of these requests.
STATE OF VERMONT
FINANCE & MANAGEMENT GRANT REVIEW FORM

Grant Summary: Grant of $200,000.00 to increase fruit and vegetable consumption amount to Vermont's SNAP participants.

Date: 7/28/2016

Department: VDH - Health and Disease Prevention

Legal Title of Grant: Food Insecurity Nutrition Incentive (FINI) Grant

Federal Catalog #: 10.331

Grant/Donor Name and Address:
- USDA, National Institute of Food and Agriculture, 800 9th Street, SW, Washington, DC 20024
- City Market, 82 S. Winooski Avenue, Burlington, VT 05401
- UVM Medical Center, 128 Lakeside Avenue, Suite 106, Burlington, VT 05401

Grant Period: From: 6/1/2016 To: 5/31/2017

Grant/Donation

<table>
<thead>
<tr>
<th>SFY 1</th>
<th>SFY 2</th>
<th>SFY 3</th>
<th>Total</th>
<th>Comments</th>
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<tbody>
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Position Information:

<table>
<thead>
<tr>
<th># Positions</th>
<th>Explanation/Comments</th>
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</table>

Additional Comments: (ATTN Dan Dickerson:) Email included identifying 1:1 match

Department of Finance & Management
Secretary of Administration
Sent To Joint Fiscal Office

Date 8/1/16

(Initial)
(Initial)
STATE OF VERMONT REQUEST FOR GRANT (ACCEPTANCE) (Form AA-1)

**BASIC GRANT INFORMATION**

1. **Agency:** Human Services  
2. **Department:** Department of Health  
3. **Program:** Health Promotion and Disease Prevention  
4. **Legal Title of Grant:** Food Insecurity Nutrition Incentive (FINI) Grant  
5. **Federal Catalog #:** 10.331

6. **Grant/Donor Name and Address:**  
   - USDA, National Institute of Food and Agriculture, 800 9th Street, SW, Washington, DC 20024  
   - City Market, 82 S. Winooski Avenue, Burlington, VT 05401  
   - UVM Medical Center, 128 Lakeside Avenue, Suite 106, Burlington, VT 05401

7. **Grant Period:**  
   - From: 6/1/2016  
   - To: 5/31/2017

8. **Purpose of Grant:**  
   To increase fruit and vegetable consumption among Vermont's SNAP participants

9. **Impact on existing program if grant is not Accepted:**  
   None

10. **BUDGET INFORMATION**

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<th>Expenditures</th>
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<td>State Funds:</td>
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<td>Cash</td>
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<tr>
<td>In-Kind</td>
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<td>Federal Funds:</td>
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<tr>
<td>(Direct Costs)</td>
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<td>(Statewide Indirect)</td>
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<tr>
<td>(Departmental Indirect)</td>
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<tr>
<td>Other Funds:</td>
</tr>
<tr>
<td>Grant (source City Market &amp; UVM Medical Center)</td>
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<tr>
<td><strong>Total</strong></td>
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</tbody>
</table>

Appropriation No: 3420021000  
Amount: $130,000

Department of Finance & Management  
Version 1.7 6/19/2013
STATE OF VERMONT REQUEST FOR GRANT (*) ACCEPTANCE (Form AA-1)

Has current fiscal year budget detail been entered into Vantage?  □ Yes  ❌ No

PERSONAL SERVICE INFORMATION

11. Will monies from this grant be used to fund one or more Personal Service Contracts?  ❌ Yes □ No
If “Yes”, appointing authority must initial here to indicate intent to follow current competitive bidding process/policy.

Appointing Authority Name: Harry Chen, MD  Agreed by:  [Initial]

12. Limited Service Position Information:

<p>| | | |</p>
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</thead>
<tbody>
<tr>
<td># Positions</td>
<td>Title</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total Positions

12a. Equipment and space for these positions:

□ Is presently available.  □ Can be obtained with available funds.

13. AUTHORIZATION AGENCY/DEPARTMENT

If we certify that no funds beyond basic application preparation and filing costs have been expended or committed in anticipation of Joint Fiscal Committee approval of this grant, unless previous notification was made on Form AA-1PN (if applicable):

Signature:  [Signature]  Date:  7/18/06

Title: Commissioner

14. SECRETARY OF ADMINISTRATION

□ Approved:

[Signature or designate signature]  Date:  07/28/06

15. ACTION BY GOVERNOR

☐ Check One Box:

☑ Accepted

☐ Rejected

[Governor’s signature]  Date:  7/29/06

16. DOCUMENTATION REQUIRED

Required GRANT Documentation

☐ Request Memo

☐ Dept. project approval (if applicable)

☐ Notice of Award

☐ Grant Agreement

☐ Grant Budget

☐ Notice of Donation (if any)

☐ Grant (Project) Timeline (if applicable)

☐ Request for Extension (if applicable)

☐ Form AA-1PN attached (if applicable)

End Form AA-1

(*) The term “grant” refers to any grant, gift, loan, or any sum of money or thing of value to be accepted by any agency, department, commission, board, or other part of state government (see 32 V.S.A. §5).
The Department of Health has received a grant from the Department of Agriculture, National Institute of Food and Agriculture, providing $100,000 over one year to enable the Department to implement an incentive program to increase fruit and vegetable consumption among Vermont’s SNAP participants. In addition to this, City Market and the UVM Medical Center have also donated $15,000 each towards the incentive program.

This funding will strengthen the Department’s capacity to connect with Vermont SNAP recipients through health care and retail. Goals include: (1) motivate and support SNAP recipients to purchase and consume more fruits and vegetables; (2) health care providers identifying low income patients and addressing the importance of fruit and vegetable consumption to health; and 3) retailers will be incentivized to support increased purchases of produce by SNAP recipients.

The funds will be used to cover the cost of coupon books for SNAP recipients, stipends for medical practices, program evaluation, processing fees and project coordination.

The USDA grant requires a 1:1 match. This requirement is met by local cash contributions and local in-kind services in support of the program. Letters of support are included in the grant application.

The Health Department is hereby seeking approval to receive $130,000 in new Federal and local funds in State Fiscal Year 2017. We have attached the grant award documents, and a copy of the grant application.
Vermont Match

- Diane Imrie, Director of Nutrition Services ($75.00 per hour x 47 hrs.): $3,500.00
- Farm to Plate planning partners ($30.00 per hour x 40 hours in the year x 8 people): $2,010.00
- Retailer time in training, managing the coupon process, providing feedback for evaluation (15.00 hr x 40 hours x 3 retailers): $5,400.00
- Evaluation, Linda Berlin (in-kind) $35.00 hr x .10 + benefits: $7,692.00
- UVM Medical Center Community Health Improvement $15,000.00 cash donation
- Vermont Retail and Grocers Association (VRGA)- administration of coupon redemption process (.10 per $ value of coupon:) $2,085.00
- City Market: $15,000.00 cash donation
- UVM medical contacts: $38,825.00
- Rutland (medical center for enrolling 125 patients $6250 + CHT follow-up): $10,550
- Match Total: $100,062
## SFY17 FINI Budget

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<thead>
<tr>
<th>VISION Account</th>
<th>Admin &amp; Support</th>
<th>Public Health</th>
<th>VDH Total</th>
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<td>(3420021000)</td>
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<td><strong>Total Indirect Costs</strong></td>
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### Appropriation Summary

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<td>Total Subgrants</td>
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<tr>
<td></td>
<td>$0</td>
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Vermont Department of Health Fruit and Vegetable Coupon Project

<table>
<thead>
<tr>
<th>A. PERSONNEL</th>
<th>FINI Fund Request</th>
<th>VT Match</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suzanne (.04)</td>
<td>$2,760.00</td>
<td></td>
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</tbody>
</table>

**TOTAL SALARIES**  
$2,760.00

**B. FRINGE BENEFITS**  
40% of salary  
$1,104.00

**TOTAL PERSONNEL**  
$3,864.00

**OTHER PERSONNEL**  
Diane Imrie, Director of Nutrition Services, UVM Medical Center, consultation with grocers and retailers (47 hrs @ $75.00 per hour)  
$3,500.00

Farm to Plate planning partners ($30.00 per hour x 40 hours in the year x 8 people)  
$2,010.00

Retailer time in training, managing the coupon process, providing feedback for evaluation (15.00 hr x 40 hours x 4 retailers)  
$5,400.00

Hannaford ($1,200)  
Price Chopper ($3,000)  
Farmers Market, Rutland ($1,200)  

Evaluation, Linda Berlin (in-kind)  
$7,692.00

**C. TRAVEL**  
Mileage for coordinator to attend project related meetings (740 miles @.56)  
$415.00

Funds for coordinator to travel to required FINI annual meeting  
$2,000.00

**E. MATERIALS/SUPPLIES**  
Educational materials for medical staff to distribute to patients  
$2,800.00

**F. CONTRACTUAL**  
Vermont Retail and Grocers Association (VRGA)- administration of coupon redemption process (.10 per $ value of coupon)  
$8,115.00  
$2,085.00

**H. OTHER**  
Fruit and vegetable coupons (680 $150.00 coupon books total)
<table>
<thead>
<tr>
<th>Description</th>
<th>Direct Cost</th>
<th>Indirect Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>$150.00 coupon books: 512 from FINI funds + $15,000 cash donation from UVM Medical Center CHI (cash donation) for 68 books + $15,000.00 (cash donation) from City Market for 100 books</td>
<td>$72,000.00</td>
<td>$30,000.00</td>
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<tr>
<td>Price Chopper processing fee for coupons - .08; 200 coupons X $150 = $30,000 x .08 = 2,400</td>
<td>$2,400.00</td>
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<tr>
<td>Stipends to medical practices ($2,250 x 3)</td>
<td>$6,750.00</td>
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<tr>
<td>UVM medical contacts: 410 people: $25.00 first contact by provider; $25.00 for CHT follow-up calls; $45.00 for CHT second appointment)</td>
<td></td>
<td>$38,825.00</td>
</tr>
<tr>
<td>Rutland (medical center for enrolling 125 patients $6250 + CHT follow-up: $4,300, see letters of support)</td>
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<td>$10,550.00</td>
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<td><strong>I. TOTAL DIRECT CHARGES</strong></td>
<td><strong>$98,344.00</strong></td>
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<tr>
<td><strong>J. TOTAL INDIRECT CHARGES</strong></td>
<td><strong>$1,656.00</strong></td>
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The Vermont Department of Health uses a Cost Allocation Plan, not an indirect rate. The Vermont Department of Health is a department of the Vermont Agency of Human Services, a public assistance agency, which uses a Cost Allocation Plan in lieu of an indirect rate agreement as authorized by OMB Circular A-87, Attachment D. This Cost Allocation Plan was approved by the US Department of Health and Human Services effective October 1, 1987. A copy of the most recent approval letter is attached. The Cost Allocation Plan summarizes actual, allowable costs incurred in the operation of the program. These costs include items which are often shown as direct costs, such as telephone and general office supply expenses, as well as items which are often included in an indirect rate, such as the cost of office space and administrative salaries. These costs are allocated to the program based on the salaries and wages paid in the program. Because these are actual costs, unlike an Indirect Cost Rate, these costs will vary from quarter to quarter and cannot be fixed as a rate. Based on costs allocated to similar programs during recent quarters, we would currently estimate these allocated costs at 60% of the direct salary line item.

**K. BUDGET TOTAL**

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<thead>
<tr>
<th></th>
<th>Direct Cost</th>
<th>Indirect Cost</th>
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# National Institute of Food and Agriculture
## AWARD FACE SHEET

<table>
<thead>
<tr>
<th>1. Award No.</th>
<th>2. Amendment No.</th>
<th>3. Proposal Number</th>
<th>4. Period of Performance</th>
<th>5. Type of Instrument</th>
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<tbody>
<tr>
<td>2016-70025-25230</td>
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<td>2016-02384</td>
<td>06/01/2016 through 05/31/2017</td>
<td>Grant</td>
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<th>6. Type of Action</th>
<th>7. CFDA Number</th>
<th>8. FAIN</th>
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<table>
<thead>
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<th>11. Authority:</th>
<th>12. Agency (Name and Address)</th>
<th>13. Awardee Organization</th>
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<tbody>
<tr>
<td>7 U.S.C. 7517, Section 4405 of 7 U.S.C. 7517 as amended by Section 4208 of the Agricultural Act, Food Insecurity Nutrition Incentive Program</td>
<td>Awards Management Division National Institute of Food and Agriculture/USDA Washington, DC 20250-2271</td>
<td>Vermont Department of Health Burlington, VT 05402-0070</td>
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<table>
<thead>
<tr>
<th>14. Program Point of Contact:</th>
<th>15. Project Director/Performing Organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jane M. Clary</td>
<td>Suzanne Kelley</td>
</tr>
<tr>
<td>Telephone: 202-720-3891</td>
<td>Telephone: 202-401-0327</td>
</tr>
<tr>
<td><a href="mailto:jclary@nifa.usda.gov">jclary@nifa.usda.gov</a></td>
<td><a href="mailto:gmartin@nifa.usda.gov">gmartin@nifa.usda.gov</a></td>
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<tr>
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<td>Grand Total</td>
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<tr>
<th>18. Title of Proposal</th>
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<tbody>
<tr>
<td>Connecting health and food: an incentive program to increase fruit and vegetable consumption among Vermont's SNAP participants through health care and retail.</td>
</tr>
</tbody>
</table>

### PROVISIONS

This Award incorporates the following:

1. FY 2015 funds in the amount of $1,656 are being withheld pending receipt and approval of Oversight's Review of Cost Allocation Plan.
2. The referenced proposal and any revision thereto - incorporated by reference
3. NIFA General Terms and Conditions (03/16) at http://nifa.usda.gov/terms-and-conditions
5. The Approved Award Budget
6. NIFA Project Initiation Documents - incorporated by reference
7. The obligation of funds may be terminated without further cause unless the recipient commences the timely drawdown of funds; initial drawdown of funds signifies acceptance of award terms and conditions and should commence in a timely manner within the award period.
8. Prohibition against using funds under Grants and Cooperative Agreements with Entities that require certain internal confidentiality agreements are referenced at https://nifa.usda.gov/prohibition-confidentiality-agreements
9. One hundred percent matching is required for this award. All matching must directly benefit and be specifically identifiable with approved project objectives. The awardee is required to maintain complete, accurate, up-to-date records to support all matching activities under the award. Matching requirements may not be satisfied with Federal funds or with property or services provided under another Federal assistance award. Grantee must report cost-sharing annually on Form SF-425.
10. The Project Director is required to attend the annual Project Director's workshop/conference as stipulated in the RFA.

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**FOR THE UNITED STATES DEPARTMENT OF AGRICULTURE**

This award, subject to the provisions above, shall constitute an obligation of funds on behalf of the Government. Such obligation may be terminated without further cause unless the recipient commences the timely drawdown of funds; such drawdowns may not exceed one year from issuance date of the award.

Typed Name
Rochelle McCrea
Authorized Departmental Officer

Signature
RMCCREA

Date
05/19/2016
National Institute of Food and Agriculture

AWARD FACE SHEET

1. Award No. 2016-70025-25230
2. Amendment No.
3. Proposal Number 2016-02384
4. Period of Performance 06/01/2016 through 05/31/2017
5. Type of Instrument Grant

6. Type of Action New
7. CFDA Number 10.331
8. FAIN 20167002525230
9. Method of Payment ASAP 70025252307002516000
10. CRIS Number 1009406

11. Authority:
   7 U.S.C. 7517, Section 4405 of 7 U.S.C. 7517 as amended by Section 4208 of the Agricultural Act, Food Insecurity Nutrition Incentive Program

12. Agency (Name and Address)
   Awards Management Division
   National Institute of Food and Agriculture/USDA
   Washington, DC 20250-2271

13. Awardee Organization
   Vermont Department of Health
   Burlington, VT 05402-0070

14. Program Point of Contact: Jane M. Clary
   Telephone: 202-720-3991
   jclary@nifa.usda.gov
   Administrative Point of Contact: Gail Martin
   Telephone: 202-401-0327
   gmartin@nifa.usda.gov

15. Project Director/Performing Organization
   Suzanne Kelley
   Vermont Department of Health
   Burlington, VT 05402-0070

16. Funding:

<table>
<thead>
<tr>
<th>Federal</th>
<th>Non-Federal</th>
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<td>+ or -</td>
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17. Funds Chargeable

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<td>16- 643-70025</td>
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18. Title of Proposal
   Connecting health and food: an incentive program to increase fruit and vegetable consumption among Vermont’s SNAP participants through health care and retail.

FOR THE UNITED STATES DEPARTMENT OF AGRICULTURE

This award, subject to the provisions above, shall constitute an obligation of funds on behalf of the Government. Such obligation may be terminated without further cause unless the recipient commences the timely drawdown of funds; such drawdowns may not exceed one year from issuance date of the award.

NIFA-2009
Dr. Harry Chen, Commissioner Vermont Department of Health  
PO Box 70, 108 Cherry St.  
Burlington, VT 05402

Dear Dr. Chen,

I am writing in strong support of the Vermont Department of Health’s (VDH) USDA FINI pilot project proposal: Connecting health and food: an incentive program to increase fruit and vegetable consumption among SNAP participants through health care and retail stores.

This project is exciting because it pulls together multiple sectors that are working toward increasing fruit and vegetable consumption for low income Vermonters and improving health outcomes by providing support through health care providers, and incentives through coupons, for this vulnerable population. In addition, the project engages retailers who play an essential role in making access to healthy food possible.

VDH is Vermont’s lead public health agency and administrator of the state’s SNAP-Ed program; as such, they are the logical organization to manage this project. VDH has a proven track record of gathering partners and successfully implementing health and obesity prevention programs, including a statewide Healthy Retailer Initiative, promoting healthy (and local) food in retail stores.

City Market is uniquely poised to partner on this project. We are a Member-owned food cooperative, and the only full scale grocery store in downtown Burlington. We offer a wide variety of organic, local and conventional produce to meet all nutrition and budgetary needs and we have a very strong mission to support access to healthy food for our community. For example, our Food for All Program (.1-'.1-1A) offers a 10% discount on groceries to community members who participate in 3Squares VT, WIC or SSDI/SSI. We currently have over 1,000 Members participating in this program. Just last fiscal year alone through this program we offered discounts that amounted to almost $180,000 in extra purchasing power for these Members.

City Market agrees to take the coupons generated from this program and to provide a cash match of $15,000 to be able to increase the number of coupons given out from the Burlington health care provider’s office. In addition, our partnership would include staff time to create the coupons and the coupon booklets for both Chittenden County and the Rutland area.

City Market is extremely interested in this pilot project and we’re excited to be a partner in making it a success! Please let me know if you need additional information and many thanks for your consideration.

Sincerely,

Allison Weinhagen, Director of Community Engagement  
aweinhagen@citymarket.coop  
802-861-9750
Dear Dr. Chen,

I am writing in strong support of the Vermont Department of Health’s (VDH) USDA FINI pilot project proposal: Connecting health and food: an incentive program to increase fruit and vegetable consumption among SNAP participants through health care and retail stores.

This project is exciting because it pulls together multiple sectors that are working toward increasing fruit and vegetable consumption for low income Vermonters and improving health outcomes by providing support through health care providers, and incentives through coupons, for this vulnerable population. In addition, the project engages retailers who play an essential role in making access to healthy food possible.

VDH is Vermont’s lead public health agency and administrator of the state’s SNAP-Ed program. They are the logical organization to manage this project. VDH has a proven track record of gathering partners and successfully implementing health and obesity prevention programs, including a statewide Healthy Retailer Initiative, promoting healthy (and local) food in retail stores.

The University of Vermont Medical Center is very interested in this pilot, and pleased to be a partner in making it a success. As such, the UVM Medical Center will contribute up to a $15,000.00 cash match upon notice of award to support it.

Best of luck with the grant.

Sincerely,

Julie Cole, Sr. Community Benefit Strategist
The University of Vermont Medical Center
128 Lakeside Ave, Suite 106
Burlington, VT 05401
Title: Connecting Health And Food: Vermont Incentive Program To Increase Fruit And Vegetable Consumption Through Health Care And Retail

PD: Kelley, Suzanne
Institution: Vermont Department Of Health

CO-PD: Institution:
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The goals of this project are:
1. Motivate and support SNAP recipients to purchase and consume more fruits and vegetables;
2. Health care providers will identify low income patients and address the importance of fruit and vegetable consumption to health.
3. Retailers will be incentivized to support increased purchases of produce by SNAP recipients.

Fruit and vegetable consumption is linked with weight status and health. According to Vermont’s Behavioral Risk Factor Surveillance System (BRFSS 2013), Vermonters who ate fewer than two fruits or three vegetables per day during the last month were significantly more likely to report being obese compared to those eating two or more fruits daily (29% vs. 19%), with rates highest among low income people.

Health care providers can play a critical role in helping people make lifestyle changes, such as improving diets, yet many providers are reluctant to suggest low income patients eat healthier without having supportive resources to offer.

Vermont will develop and implement a physician based “produce prescription program” in two counties. Patients who receive SNAP benefits will be given coupons by their physicians for local, fresh or frozen produce to be redeemed in specific retail location including 2 chain grocery stores, 1 independent grocery/co-op, and 1 year-round farmers market. Vermont will evaluate the success of integrating healthy eating conversations into health care visits, whether participants access to, and consumption of, produce increased, and the ability to develop and redeem state-specific coupons in a variety of retail establishments.

This file MUST be converted to PDF prior to attachment in the electronic application package.
1. Project Narrative

(a) The Community to be Involved in the Project and the Needs to be Addressed

Vermont is a small rural New England state, with a population of just over 650,000. While Vermont is often listed among the healthiest states in the nation, we are not immune to the health issues and concerns that face the nation. For example, Vermont’s rate of overweight and obese adults, according to the 2014 Vermont Behavioral Risk Factor Surveillance System (BRFSS), is over 60% (36% overweight, 25% obese) and nearly 30% of youth, according to the 2013 Vermont Youth Risk Behavior Survey (YRBS), are overweight (16%) or obese (13%), with rates highest among our lowest income residents. In addition, obesity rates are significantly higher among Vermonters with other chronic conditions. According to Vermont’s 2013 Behavioral Risk Factor Surveillance System (BRFSS) data, adults with diabetes were nearly three times as likely as those without diabetes to report being obese (62% vs. 23%). Those with hypertension were more than twice as likely as those without to report obesity (44% vs. 19%).

Adults in Vermont with less education and lower annual household income levels are more likely to be obese: adults in homes with incomes less than $75,000 are significantly more likely to be obese than those where the annual household income is $75,000 or more. Similarly, those with middle incomes are more likely to be obese than those with the highest incomes ($75,000 or more). Obesity decreases as education levels increase. Those with a college degree or higher were significantly less likely to be obese (15%) than those with some college education (29%) or a high school degree or less (32%) (2013 Vermont BRFSS Obesity Data Brief).

Fruit and vegetable consumption is linked with weight status. In 2013, Vermont adults who ate fewer than two fruits per day during the last month were significantly more likely to report being obese compared to those eating two or more daily (29% vs. 19%). This was also true when comparing vegetable consumption; those eating less than three vegetables were significantly more likely to report being obese compared to those eating at least three (28% vs. 15%). Among youth, only 23% of students ate fruits and vegetables five or more times per day during the past seven days. (2013 Vermont BRFSS Obesity Data Brief).

Obesity and healthy eating are very complex issues yet there are evidence based strategies identified by the Centers for Disease Control and Prevention to address obesity, from individual behavior change (counseling and education) to changing policies, systems and environments to support healthy choices. Vermont is implementing many of these in schools, worksites and communities. There is also evidence that health care providers can play a critical role in helping people make lifestyle changes. People will often make lifestyle changes if a physician advises them to do so.

Medical costs related to obesity are very costly. In order to impact this issue, we must actively coordinate the many efforts, resources, and sectors involved: healthcare, retail, and low-income residents - the vision of this proposal.

This award will allow Vermont to implement a fruit and vegetable “prescription/incentive” project for people receiving Supplemental Nutrition Assistance Program (SNAP) benefits in two Vermont counties: Chittenden and Rutland. These are two counties of high need and capacity for this type of project.
According to the UVM Medical Center Health Needs Assessment 2013, Chittenden County is home to
the largest population in Vermont, with more than 150,000 residents. Compared to the entire state,
Chittenden County residents have less unemployment, a higher median income, and higher levels of
education. However, Chittenden County residents are also more diverse, with almost 9% of residents
of a racial and/or ethnic minority and the percentage of children participating in the free and reduced
school lunch program in Chittenden County (51.5%) are notably higher than Vermont’s average (37.9%)
and the nation (42%). With obesity rates continuing to climb in this Health Service Area, access to
affordable and healthy food was cited by key leaders, focus group participants, and survey respondents
as an important need in the community. Obesity prevention and adequate nutrition for children were
also seen as high needs.

Rutland County is located in central Vermont and is composed of 933 square miles. The population
mostly resides in the 27 small towns and outlying rural areas. Rutland City is the largest population
center (estimated at 16,495 in 2010). Rutland County residents are older, living with lower income, and
achieve lower education levels than the average Vermonter, increasing their vulnerability. Rutland
County’s median household income for 2006-2010 ($47,027) in 2009 was lower than both the State of
Vermont ($51,841) and the United States ($51,914). From 1999 to 2009, the proportion of individuals
in Rutland County living below the poverty level increased from 10.9% to 13.6%.

According to the Rutland County Community Health Needs Assessment 2012-2015, Rutland is the one
County in Vermont that has statistically higher levels of obesity (38.7% of adults report being
overweight and 24% report being obese in Rutland County as compared to all other counties). Two of
the four priority issues identified in Rutland’s Community Health Needs Assessment were: “improve
chronic health care delivery and supports”, and “promote a culture to embrace exercise and healthy
eating”. That includes addressing fruit and vegetable consumption and obesity reduction.

Both Chittenden and Rutland counties have well established local food initiatives that are integrated
into the community and health systems in the area, as evidenced by successful Health Care Share
projects having been implemented in both locations over the past four years. The Health Care Share
provides low-income patients with a Community Supported Agriculture (CSA) share of local, farm fresh
food, nutrition education, healthy living coaching and youth job training in the agricultural economy.
To date 450 families, an estimated 1,800 people enrolled through their primary care providers and
have benefited from the program. The FINI pilot Fruit & Vegetable coupon program will offer Health
Care Share members additional support in building and sustaining healthy eating habits.

These two communities were chosen because of the high need for improved access to fruits and
vegetables by low income residents, and because of the extraordinary commitment and capacity of all
players: health care, retail, local food partners. Much of the groundwork has been laid. They will be
ready to go once funded.

Practically this project will enable low income Vermonters to purchase more fruits and vegetables but
it will do so much more that that. It will support health care providers with having a conversation with
this hard-to-reach population about healthy eating, and be able to offer them something of value –
coupons and education. Retailers will also be able to offer healthy and local food to low income people
who are often unable to purchase it. The local food economy will benefit by the investment of funds into fruits and vegetables and integrating local food into the educational materials and in-store offerings. This project will allow for year-round access to, and promotion of, healthy local food to a population who may otherwise not consider this an option. Ultimately, this project will help support families receiving SNAP benefits improve their health and wellbeing.

(b) The Organizations and Communities Involved in the Projects

The Vermont Department of Health (VDH) is the lead agency on this project. VDH’s Physical Activity and Nutrition Program is located in VDH Division of Health Promotion, Disease Prevention. This Division works closely with Vermont’s health care providers (HCPs) and health systems addressing prevention (tobacco, physical activity and nutrition) and chronic disease management. In addition, the VDH is the “Implementing Agency” for Vermont’s SNAP-Ed program, a multi-level nutrition education/obesity prevention initiative aimed at people who are eligible for, or participating in, SNAP benefits through a Memorandum of Understanding with the Department for Children and Families.

This FINI pilot will be integrated with, and complimentary to, the SNAP-Ed activities underway. These activities, being implemented in food shelves, schools, and early childcare centers in five counties, including Rutland, do not involve actively engaging health care or retail sectors. The program activities include a social marketing component, referred to as Healthy in a SNAP (www.HealthyinSNAPVT.org) that is based on results from four focus groups (2 had been conducted in Rutland County) of SNAP eligible women of children ages 2-12. From these focus groups we learned that this population has many misperceptions about healthy eating, feels very strongly about being good role models for their children and want to serve healthy food but think it is expensive, difficult to get, and goes to waste if not prepared or stored appropriately. Messages connected to the FINI project will use these findings, as well as on-going SNAP-Ed evaluation information to assure the target population’s concerns and needs are addressed, while ensuring integration and coordination of messaging among all sectors.

The VDH SNAP-Ed Program Coordinator, Suzanne Kelley, leads the Vermont Nutrition Education Committee (VNEC), coordinating statewide food access efforts among other state agencies and private non-profit organizations. In the past Ms. Kelley managed more than 20 “Healthy Community Design” grants to community coalitions throughout the state, including in Rutland and Chittenden Counties. The goal of these grants was to increase access to healthy food and physical activity within communities and included a Healthy Retailer component that she led. Ms. Kelley is an active participant in a number of Vermont Farm to Plate teams: Food Access, Independent Retailer, Consumer Education and Marketing, and a newly formed Health team. The proposed project brings together pieces of all of these areas into one integrated initiative.

Ms. Kelley and her colleagues at VDH have strong working partnerships with Farm to Plate, retailers, provider practices, and community members through coalition work and Offices of Local Health. VDH has 12 Offices of Local Health, one in each County. Staff in these offices work very closely with local hospitals, and Vermont Blueprint for Health “Community Health Teams” (CHT), participate in community assessments, and are the public health eyes, ears, and workers on the ground. Chronic Disease Designees from the Rutland and Chittenden offices will be partners in this project. Because of all of the activities and partnerships described above, VDH is the ideal agency to lead this project but it
cannot work without the help and active involvement of partners. The vision is to bring together three main sectors: health, retail, local food.

**Health Partners:**

Vermont’s health care is organized around the state’s “Blueprint for Health” that is described in state statute (18 VSA Chapter 13) as "a program for integrating a system of health care for patients, improving the health of the overall population, and improving control over health care cost by promoting health maintenance, prevention, and care coordination and management."

The Blueprint works with practices, hospitals, health centers, provider networks, insurers, and other stakeholders to implement a statewide health service model in Vermont. The model includes advanced primary care in the form of patient centered medical homes (PCMHs), multi-disciplinary support services in the form of community health teams (CHTs), a network of self-management support programs, comparative reporting from statewide data systems, and activities focused on continuous improvement (Learning Health System). The program aims for all citizens to have access to high quality primary care and preventive health services, and to establish a foundation for a high value health system in Vermont.

This pilot will use these established systems in Chittenden and Rutland counties for implementation.

The University of Vermont (UVM) Medical Center University Pediatrics will be the health care provider (HCP) in Chittenden County and the Chittenden County Community Health Team. The lead contacts for the Chittenden County pilot are: Dr. Stan Weinberger, Medical Director; Diane Imrie, UVM Medical Center Director of Nutrition Services; and Emily Piazza, Community Health Team Nutrition Supervisor.

The Community Health Center of Rutland Region (CHCRR) and Rutland Community Health Team will be the Rutland HCP partners. CHCRR operates Primary Care Medical Offices in Rutland, Brandon, Castleton, and West Pawlet. All of the offices participate with most area insurance companies including Medicare and Medicaid and offer sliding fee scales to patients who do not have medical insurance.

**Retail and Local Food Partners:**

**Vermont Retail and Grocers Association (VRGA)** is an association of merchants and trade partners united to promote the sustainable growth of the retail and grocers industry through the educational, economic and public policy needs of members representing approximately 800 Vermont retail stores and 250 suppliers to the industry, including members of the Vermont Specialty Food Association. Members include clothing stores, sports stores, supermarkets, food coops, beverage stores, convenience stores, general and country stores, as well as many other merchant stores. The VRGA has been a strong partner with Vermont Department of Health’s Healthy Retailer Initiative and on-going Farm to Plate efforts.

Having the VRGA as a partner is key to this project's success. They know the retail environment and have the relationships with the store owners and access to colleagues from other states that have implemented local coupon redemption programs. Those counterparts could be available for advice and technical assistance as the project is rolled out and if we are able to scale the project up to more stores and communities in the future.
The following grocery stores and farmers market have agreed to participate. All are SNAP authorized and were chosen for a number of reasons. All of the retailers are partners in Farm to Plate, offer a variety of fruits and vegetables, are located in areas the target population can access such as downtowns and on bus routes, and are in the communities of the participating health care providers. The stores are:

- Price Chopper, chain store, two in Rutland county that will be participating for the pilot
- Hannaford's, chain store, two in Chittenden county that will be participating for the pilot
- Vermont Farmers Food Center Winter Market, Vermont Farmers Market in Rutland
- City Market, independent grocer/co-op, located in downtown Burlington (Chittenden County)

Vermont has a unique local food initiative that was legislatively established in 2009 through the “Farm to Plate Investment Program” legislation. The Vermont Sustainable Jobs Fund was tasked with the creation of a ten year Vermont food system plan to increase economic development and jobs in Vermont’s food and farm sector and improve access to healthy local food for all Vermonters. The Farm to Plate Strategic Plan identifies 25 goals aimed at strengthening all components of Vermont’s food system. More than 350 Vermont organizations, encompassing all types and scales of agricultural-related production and processing businesses, government entities, educational institutions, distributors, retailers, industry leaders, and dozens of non-profits, from food equity to technical assistance providers, comprise the Farm to Plate Network.

The mission of the Vermont Farmers Food Center, (VFFC) of Rutland is to increase access and availability of locally produced food through the development of the infrastructure, educational programs and markets necessary for the growth of a vibrant and sustainable regional agricultural system. The goals are to build a system that has the capacity to feed its citizens regardless of economic status, increase the personal health of the population, and add to the economic wellbeing of the community. The VFFC was founded in 2012 when community members raised funds to purchase and renovate a 15,000 square foot blighted property in downtown Rutland and transformed it into a regional food hub facility. They now run and house the winter farmers market and established the Rutland Health Care Share in partnership with the Farm at Vermont Youth Conservation Corps in 2015.

Heidi Lynch, a Rutland native and alumna of The Farm at Vermont Youth Conservation Corps, is the Coordinator of the Rutland Health Care Share, bringing her experience and knowledge from implementing the Health Care Share since its inception in 2012, to expanding the program to Rutland County. Heidi works closely with partners in the Rutland County Nutrition Coalition; a community network focused on raising awareness around food insecurity and identified nutritional needs of Rutland County.

(c) Project Goals and Intended Outcomes

The purpose and priorities of USDA’s FINI funding is to: “promote healthy diet and physical activity behaviors and address nutrition and childhood obesity by strengthening established strategic partnerships and implementation practices to encourage healthy eating and physical activity at the individual and community levels, focusing on high-risk groups”; with a primary goal of funding and evaluating projects intended to “increase the purchase of fruits and vegetables by low-income
consumers participating in Supplemental Nutrition Assistance Program (SNAP) by providing incentives at the point of purchase”. This proposal directly addresses all of these goals.

Over the past several years, various individuals and groups in Vermont have been developing connections between health/health care, local food, and fruit and vegetable consumption. This is evidenced by successful Health Care Share Programs, thriving Health Care without Harm initiatives underway in the state (where hospital food service directors are committed to purchasing, preparing and serving high quality, local and healthy food), a successful Healthy Retailer Initiative (over 60 stores statewide participated when the initiative had funding) promoting healthy food sold in community stores (now being led by a Farm to Plate Independent Retail), and a newly formed Farm to Plate Health Team with over 30 people participating. Vermont is well poised to pilot a project connecting food access, health, retail and local food.

**Goal 1: Motivate and support SNAP recipients to purchase and consume more fruits and vegetables.**

We know actual and perceived cost of healthy food can be a barrier for low income people purchasing this food. In addition, focus groups conducted by VDH of SNAP eligible Vermonters, and BRFSS data consistently reveal misperceptions about people’s understanding of healthy food and their own and their children’s weight. Physician’s advice plus valuable incentives can be strong motivators for people to make lifestyle changes.

Outcomes for Goal 1, by the end of the one year project period:

- 680 SNAP recipients (270 in Rutland and 410 in Chittenden County, due to match provide by 2 Chittenden County serving organizations) will purchase $150.00 worth of fresh or frozen fruits and/or vegetables that they otherwise would not have thought to, or have been able to, purchase.
- 75% of participants will consume more fruits and/or vegetables because of the coupons.
- 25% of participants will consume local produce because of the coupons.
- 25% of recipients will increase their knowledge about fruit and vegetable purchasing, preparing, storing.

**Goal 2: Health care providers will develop procedures that enable them to identify low income patients and address the importance of fruit and vegetable consumption to health.** We know health care providers advising patients to make healthy lifestyle choices can be a powerful motivator, however, with all of the priorities health care providers have during each patient contact, working in messages about healthy eating can be difficult; and more so if the patient is lower income and does not have the ability (i.e. funds, access, resources) to follow through on that advice. A goal of this pilot is to help health care providers identify high risk patients who are motivated to make dietary changes, offer resources to enable them to make those changes, and develop a system using community supports to encourage successful follow-through.

Outcomes for Goal 2, by the end of the one year project period:

- 680 SNAP recipients will have two conversations with a health care provider about the importance of eating fruits and vegetables to their overall health.
• Two health care provider practices (1 in each County) will establish methods for having a healthcare provider advise SNAP recipients about fruit and vegetable consumption, and offer education and incentives (coupons) to support their following through on that advice.
• Two health service area will develop procedures to facilitate follow-up by health care providers (through provider offices or “Community Health Teams”, CHT) in order to assure use of the coupons and integrated health services.

**Goal 3: Retailers will be incentivized to support increased fruit and vegetable purchasing by SNAP recipients.** In order for low income people to purchase healthy food, it has to be available where they shop, and be affordable, while not jeopardizing retailer profits. For this pilot, we are investing as much of the total budget as possible into the coupons in order to benefit a high number of SNAP recipients, and also to provide enough potential spending in participating stores to make it attractive to retailers to participate.

**Outcomes for Goal 3:**
• A Vermont-specific “produce coupon” will be created and used seamlessly in 4 retail stores.
• Four retailers will be reimbursed dollar for dollar for all coupons redeemed.

(d) **Activities to Achieve the Goals**

The goals and intended outcomes for this project will be achieved as follows:

Upon notice of award, VDH will facilitate a planning meeting that will consist of a team of partners representing health care, retail, and local food who have been involved in the development of the grant application. The overall goals and objectives of the project will be reviewed and tasks assigned by category (knowing there will be overlap): overall project planning and oversight; health care; retail; evaluation.

A health care subcommittee will meet to review and develop tasks and procedures for implementing their part. Each provider office will work with the Vermont’s Department for Children and Families (Vermont’s state agency responsible for the administration of SNAP) to develop a process for contacting potential recipients. DCF has offered to send letters to SNAP recipients in the health care provider service areas informing them that they may be eligible for up to $150.00 worth of fruits and vegetables if they are patients of those offices, and be asked to contact the participating health care provider office for more information.

Upon contacting the office, an appointment will be scheduled (a check-up for the adult or “well child visit” for the children). They will be asked to bring the letter showing proof of SNAP participation. During their appointment, the provider will discuss the benefits and importance of fruit and vegetable consumption for all family members; culturally appropriate and relevant resources will be shared, including Vermont’s SNAP-Ed Healthy in a SNAP and the Department of Agriculture’s Buy Local information, and will be given a book of 75 $1.00 coupons to be redeemed at participating stores for fruits and vegetables (local, fresh or frozen). Patients will be informed that someone will contact them to follow-up on using the coupons and to schedule a second appointment at which time, if they have redeemed the first $75.00, they can receive a second book of $75.00 worth of coupons. A code on the
initial book will be noted in their file and their information will be forwarded to the provider practice or CHT who is doing follow-up, who will contact the recipients for a second appointment within 3-6 months. Two or more contacts with participants will allow for better oversite of coupon redemption, on-going engagement with patients, and reinforcement of nutrition education messages over several months.

The Retail subcommittee will provide input into the design of the coupons, discuss steps for redemption, rules (such as: eligible foods; how cashiers will identify it; if orders will need to be separated or not; if VRGA will need receipts and how to do that; how cashiers can verify the coupons are ours), create guidance; discuss payment from VRGA. As coupons are redeemed, the VRGA will provide VDH reports with amount of money sent to retailers and the actual coupons that will be noted in a data base to track who is or is not redeeming them. VDH will share this with the provider to follow-up (VDH will not be able to follow up due to confidentiality concerns and will not know who the recipients are).

At follow-up, the patient will complete a survey and get their second coupon book and cycle begins again – coupons are redeemed, retailers are paid, VDH receives report; CHT staff follow up if coupons are not redeemed.

Overall this is not a very “high tech” project yet there are systematic processes that need to be established in order for it to be successful, while being sensitive to the capabilities of already busy physicians and retailers. Those include:

**Health side:**
- Identifying patients eligible for the “intervention” (education and coupons) when they come in, to be developed
- Physician office noting the coupon book code for each patient in order to track redemption, to be developed
- Process for follow-up by physician office or CHT, to be developed

**Retail side:**
- Developing a Vermont specific produce coupon that will work in retail stores
- Staff being trained on what the coupons are, what they can be used for, and that they can not be exchanged for cash, to be developed
- Process of stores sending the redeemed coupons to VRGA for reimbursement, to be developed
- VRGA sending coupons to VDH for tracking, to be developed

There will be several levels of “checks and balances” to ensure compliance with the rules and regulations of SNAP. The original letter sent to potential recipients from the health care provider will clearly explain how the program works, what the coupons may be used for and where they can be redeemed. In-person training and written documentation will be provided to retailers and their staff describing exactly how the coupons are to be used, coupons will have a bar code that will only allow them to be used for specific approved products, and each coupon will clearly state what they can be used for (fresh or frozen fruits and vegetables only) and that they can not be exchanged for cash or change.
# Implementation Details for Proposed Activities

<table>
<thead>
<tr>
<th>Activities</th>
<th>Planning</th>
<th>Implementing</th>
<th>Evaluating</th>
<th>Dates</th>
<th># of participants involved</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>General Project Planning and Oversite</strong></td>
<td></td>
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<tr>
<td>Planning team meets</td>
<td>Review grant goals, objectives, deliverables and progress; problems solve as necessary</td>
<td>Team meets 4 times per year</td>
<td>4 meetings happen; minutes taken;</td>
<td>Quarters 1-4</td>
<td>&quot;Health team&quot; (7 participants) and &quot;retail team&quot; (8 participants)</td>
</tr>
<tr>
<td><strong>Coupon book development</strong></td>
<td>Design, assign bar code and tracking codes, print coupons</td>
<td>Distribute coupons to healthcare providers</td>
<td>680 coupon books created</td>
<td>Quarter 1</td>
<td>&quot;Retail team&quot;: 4 grocery/retail store contacts, VT Retail and Grocers Association; Farm to Plate (FTP) Consultant, Dept. of Ag; Project Coordinator (8 participants)</td>
</tr>
<tr>
<td><strong>Health care providers (HCP) training/TA</strong></td>
<td>Review eligibility criteria and how eligible patients will be identified in the office; set up procedures for patient encounters, including nutrition education and coupon distribution; determine procedures to track patients and staff time for match; determine process for follow-up by provider or Community Health Team (CHT).</td>
<td>Target population contacted via letter from provider; patients contact office to set up appointment; patient provides proof of SNAP participation; patient receives nutrition education information, $75.00 worth of coupons. Follow-up by HCP or CHT established; second $75.00 in coupons provided to patients</td>
<td>Number of letters sent to all potential patients and appointment made</td>
<td>Quarters 2-4</td>
<td>Dept. for Children and Families (DCF) &quot;Health team&quot;: Project Coordinator; staff from each office and each CHT (2); Local Community Coordinators (2) (7 participants) Patients (680)</td>
</tr>
<tr>
<td><strong>Retailer training/TA</strong></td>
<td>Clarify procedures for accepting coupons at registers; how to train staff; how to get coupons redeemed by VRGA (monthly, quarterly, etc.)</td>
<td>Write up procedures; train staff in all retail locations; include pictures of coupons; approved items; how to handle “change”; how to track time for match</td>
<td>Number of staff trained</td>
<td>Quarter 1</td>
<td>&quot;Retail team&quot; (8)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Process of redeeming coupons in the store and of retailers being reimbursed</td>
<td>Quarters 2-4</td>
<td>Cashiers (30)</td>
</tr>
<tr>
<td>Grants and contracts written</td>
<td>Discuss and agree on administrative needs from provider practices</td>
<td>Write grant agreements for stipends for provider practices to manage the administration of the project; write contract for the VRGA to administer and reimburse Retailers</td>
<td>Grant agreements executed</td>
<td>Contract executed</td>
<td>Quarter 1</td>
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<tr>
<td>Evaluation</td>
<td>Determine needs, procedures, and tools needed to evaluate the project</td>
<td>Write evaluation plan; create tools; distribute to providers and/or CHT (survey for patients); final report with findings and recommendations created and shared with planning team</td>
<td></td>
<td></td>
<td>Quarters 1-4</td>
</tr>
</tbody>
</table>

### Health Care Providers

<table>
<thead>
<tr>
<th>Eligible patients identified</th>
<th>Planning for all activities below is completed in oversite section above</th>
<th>Letter sent by DCF to all eligible patients describing the project and how to access the benefit</th>
<th>Letters sent</th>
<th>Quarter 2</th>
<th>DCF staff; Hundreds of patients who receive the letter</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st appointment with HCP</td>
<td>Patient schedules appointment; patient arrives at office with proof they are VT SNAP recipients; patient sees physician who provides nutrition education and 1st coupon book; coupon book code is noted in file; patient is told they will be contacted by the CHT for a 3 month follow-up and another $75.00 coupon book.</td>
<td>Evaluation of the office process - were patients properly identified, advised, given the nutrition ed. and coupon books</td>
<td></td>
<td>Quarter 2</td>
<td>680 patients plus health care providers (15)</td>
</tr>
<tr>
<td>Schedule for follow-up calls and appointment</td>
<td>HCP decides follow-up plan (CHT or in-house) for calls if</td>
<td>Process evaluation: did this happen</td>
<td></td>
<td>Quarter 2-4</td>
<td>680 patients plus staff</td>
</tr>
<tr>
<td>Established</td>
<td>Coupons not redeemed and for second visit; Program Coordinator informs HCP status of coupons being redeemed (as determined from redeemed coupons sent to VDH from VRGA).</td>
<td>smoothly, how were issues resolved?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| 2nd follow-up with patient – appointment and final follow-up with patient, as needed | Second actual appointment; patient asked to complete a questionnaire/evaluation; nutrition ed check-in, second coupon book provided; Triggered by communication from Program Coordinator that coupons are not being redeemed (as determined from redeemed coupons sent to VDH from VRGA). | Quarters 2-4 | Quarters 3-4 | 680 patients plus staff  
| Retailer |  
| Train cashiers about the project | | Quarter 2 | Cashiers (30)  
| Coupons used at stores and redeemed | Retailer sends redeemed coupons to VRGA; VRGA pays Retailers and sends report of coupons redeemed to VDH; VDH gives reports to HCP for follow-up | Quarter 2-4 | Quarter 3-4 | 680 people, cashiers  
| Evaluation |  
| Key Informant Interviews with representatives from health and retail | | Quarter 3-4 | 4 health care reps from each County (2 from each practice, 2 from each CHT); 10 retailers (cashiers, administrators)  
| Report of findings and recommendations | | Quarter 4 | “Health team” (7 participants) and “retail team” (8 participants)
Regarding effective and efficient technologies being developed for benefit redemption systems that may be replicated and scaled in other states and communities in the future: as noted above, this is a relatively low-tech initiative. The most complicated aspects are: a) communication within healthcare provider offices – being able to identify a subset of patients, who are eligible for the benefit, and making sure they use it, and b) creating a system for local, small scale coupon redemption work.

As noted in part (b): organizations and communities involved in the project, UVM Medical Center already pilots new initiatives. Part of the evaluation will include garnering their subjective and objective opinions, perceptions and ideas on what works, what is needed and what could be improved within health care offices to effectively identify and address healthy eating with high need populations.

Similarly, the evaluation will gather subjective and objective opinions, perceptions and ideas on what works, what is needed, and what could be improved from the Retailer perspective, from stocking appropriate food to meet the demand from this target population to how the local coupon process works or could be improved.

All of the information and recommendations will be described and shared as required or upon request from others considering implementing a similar type of project.

(e) Relationship to Program Objectives

This project, being led by the VDH Physical Activity and Nutrition Program, under the state’s SNAP-Ed Program Coordinator, assures the project will directly address FINIs program objectives, as both FINI and VDHs objectives are identical, to: “promote healthy diet and physical activity behaviors and address nutrition and childhood obesity by strengthening established strategic partnerships and implementation practices to encourage healthy eating and physical activity at the individual and community levels, focusing on high-risk groups”.

At various times, VDH has partnered with the different groups identified in this application — health care, local food, retail. Each has a related interest: fruit and vegetables sales, healthy eating, obesity prevention, improving access to local food, and helping improve the lives of Vermont’s most vulnerable populations. Yet each of these groups have not worked together on one project that has the potential to directly benefit and impact each of our priorities while meeting FINI’s objectives as well.

In order to maximize the share of funds used for direct incentives, Vermont is proposing putting 80% of the award into the incentives, with most of the work being in-kind time. FINI prohibits sub-awarding over 50% of the award out; a letter requesting this be waived has been submitted. There is very strong commitment of the people involved in piloting this type of project in Vermont.

This project is testing innovative or promising strategies that would contribute to our understanding of how best to increase the purchase of fruits and vegetables by SNAP participants, to inform future efforts. Although we know healthcare provider advice to make
behavior changes, incentives, and follow up to see if people are reaching goals all contribute to successfully making health behavior changes, there is little evidence that combining these in a targeted, planned manner will matter or work. This project is an opportunity to test all of those things. If the pilot project is successful, Vermont will seek long term funding and monitor health outcomes for participants. Many health care providers, and food access and public health professionals will be interested in the results of this project.

The Vermont-specific produce coupons and redemption process is one way the project will develop an innovative benefit redemption systems that could be replicated or scaled. A few states have a process of developing and redeeming state specific or local coupons.

This project will not be using direct-to-consumer sales marketing but all participants will be given educational information about produce: how to purchase, prepare and store it; local food — where, how and when to purchase it; and information about the participating retailers.

Vermont has a proven history of designing and implementing successful nutrition incentive programs connecting low-income consumers and agricultural producers. The Health Care Share project described above is one example as well as our previously funded Healthy Retailers project that engaged over 60 retailers in low income communities throughout the state to stock and/or promote healthy and local food. Vermont also has the most farmers markets per capita of any state, most of which accept EBT. We also offer Farm to Family and “Crop Cash” coupons to be redeemed at farmers markets. Vermont has very strong partnerships among the Department of Agriculture, food access organizations, and our Farm to Plate initiative that will continue to develop and implement nutrition incentive programs connecting low-income consumers and agricultural producers. This is a high priority for our state, as evidenced by our many successful programs.

All of this project’s participating retailers have a strong commitment to local food and products. These will be promoted to all participants though the education materials they receive and follow-up conversations. Often, there is a perception that local means expensive. These coupons will allow people to be able to purchase local produce whereas previously they may have thought them to be out of reach.

The communities and health centers were selected because they have the capacity to implement this kind of program and also because they are located in and serve underserved communities, as described in Section 1. a. The Community to be Involved in the Project and Needs to be Addressed.

(f) Evaluation

This project will be evaluated with the assistance and guidance of Linda Berlin, PhD, Extension Associate Professor, and Director of the University of Vermont’s Center for Sustainable Agriculture, whose time will be donated as match for the project. Dr. Berlin has extensive experience evaluating food access and consumption projects with low income Vermonter and SNAP recipients. She is currently the evaluator for a different Vermont FINI coupon pilot project that was awarded in federal FY15 so is well qualified to lead the evaluation on this project.
The evaluation will look at the overall process, challenges and success of implementation and operations involved from three perspectives: 1. healthcare provider, 2. retailer, and 3. target population. We anticipate gathering the following types of information:

1. Health care process: identifying patients, getting educational information and coupons to them, follow up with CHT – what worked, what was challenging, what could be improved?

2. Retail side: ease of redemption and reimbursement; tracking redemption; local food – did retailers think the project made a difference in sales, what worked, what was challenging, what could be improved?

3. Benefit to the target population: before getting the second coupon book, they will be asked to complete a survey about the projects with questions such as: did their fruit and vegetable consumption increase as a result of the provider conversation and the coupons? In what ways was the educational information useful, or not (this may help inform Vermont’s SNAP-Ed, Buy Local, or other nutrition campaigns as well)? Were the coupons easy to use? What were the barriers? What could be improved?

Dr. Berlin will be in contact with the Program Coordinator on a monthly basis and the planning team quarterly to discuss needs she has to conduct the assessment and progress on the evaluation.

Findings will be presented to stakeholders at the end of the year, and used to plan for how to improve the project in order to continue if other funding and resources can be secured. If funded, Vermont will work with the FINI evaluator to ensure our evaluation is consistent with FINI requirements from the start of the project.

(g) Specific Program and Incentive Information

- **Type of SNAP retailers involved:** 2 retail chain; 1 retail independent; 1 farmers market.
- **Number of months and days that the project, if funded, will operate:** 12 months: months 1-3: planning, training, recruitment of patients; months 4-6: first appointments and coupon redemption, month 6-9: follow-ups and second coupon redemption; months 10-12: data analysis evaluation, final payments to retailers.
- **Trigger for EARNING the incentive:** Appointments with healthcare providers.
- **Type of trigger for and the amount of the incentive at different types of retailers:** Local, fresh, frozen fruits and vegetables.
- **Incentive level:** $150.00 per person.
- **Financial instrument used for incentive delivery:** Coupons books; $1.00 increments.
- **Indicate if the proposal is a new SNAP incentive program or a continuation, expansion, or modification of an existing program:** New.
- **If nutrition education or other interventions will be combined with the incentive:** Nutrition education will be provided such as Vermont SNAP-Ed materials and resources and other relevant partner materials such as the Department of Agriculture’s Buy Local materials.
• List where the project and sub-grantee projects will operate: Chittenden and Rutland Counties, Vermont.
• Special waivers will be requested and what the waivers will include: VDH is requesting to be allowed to contract out over 50% of the funds received.
• If there any identified retailer participants that still need to be authorized for SNAP, include the store/firm names and locations (or provide the page number(s) in the proposal where these are found): All participating retailers are SNAP authorized.
• If the project anticipates new retailers that are not currently SNAP authorized, where known, include the store/firm names and locations: N/A.
• Approximate number of retailers, and if specific retailer names, locations, and FNS numbers are known, please provide this information: 4 retailers: Hannaford’s, Williston (FNS #: 2224739) and Burlington (5201403); Price Chopper, Rutland (FNS #: 7263198) and West Rutland (FNS #: 7270763); City Market, Burlington (FNS #: 0934429); Rutland Farmers Market (FNS #: 0233466), all stores are in Vermont.
• If the project anticipates making any technical enhancements to the retailers, EBT, or other systems. Provide a high-level description of any such proposed technical enhancements and page number(s) in the proposal indicating where a detailed description of technical enhancements is found: No technical enhancements to the retailers, EBT, or other systems will be made, see page 7.
• Implementation plan for rollout of incentives across the retailer types that includes anticipated start dates and a plan for communicating changes in implementation schedule to USDA’s Food and Nutrition Service and the independent evaluation contractor: Incentive roll out will begin in the 2nd quarter of the project and continue through the 4th quarter; communicating change will occur as, and if, needed.

(h) Sustainability

All of the organizations included on this project have an incredibly strong commitment to addressing health and food access for all Vermonters, particularly those who are most vulnerable, and to supporting Vermont’s local food economy. As described throughout this application, each organization has worked on parts of this type of project – through a Healthy Retailer, health care shares, food insecurity screenings, SNAP-Ed social marketing, Farm to Plate. All of the groups have talked about piloting a fruit and vegetable prescription program at one time or another. This pilot would allow Vermont to test this concept and give us information we need to appeal to local health systems - many of whom have nutrition, obesity, or food access as priorities in their Community Health Needs Assessments - about investing community benefit dollars or other health prevention funds into this type of project.

Regardless of whether a specific “fruit and vegetable prescription program” is sustained, the work of all of these partners will continue. Efforts addressing food insecurity and health are a priority in this state and we will all continue to work toward improving them for all Vermonters.

(i) Non-supplantation

All funds for this project will be used to fund new activities.
July 20, 2015

Mr. Hal Cohen
Secretary
State of Vermont
Agency of Human Services
208 Hurricane Lane, Suite 103
Williston, Vermont 05495-2069

Dear Mr. Cohen:

This is to advise you of the approval of the amendment to the Vermont Agency of Human Services (AHS) Cost Allocation Plan (CAP), which was submitted under letter dated June 27, 2014. The revisions include changes within the Agency of Human Services to the Central Office, Department of Children & Families, Department of Disabilities, Aging and Independent Living, Department of Vermont Health Access, Vermont Department of Health, and the Department of Mental Health. These revisions, which were submitted in accordance with 45 CFR 95, Subpart E, are effective April 1, 2014.

This approval shall remain in effect until such time as the basis and methods for allocating costs in the plan becomes outdated due to organizational changes, changes in Federal law or regulations, or there is a significant change in program composition that would affect the validity of approved cost allocation procedures.

The plan is approved and costs claimed in conformance with the plan are subject to the following conditions:

1. The approval is based on information provided by the State and is void if the information is later found to be materially incomplete or inaccurate.

2. The costs claimed for Federal financial participation must be allowable under the law, the cost principles contained in OMB Circular A-87 and program regulation.

3. Based on CMS letter to Vermont dated May 29, 2007,
   - All current and future PACAP revisions for each AHS Department should comply with Federal regulations regardless of the status of the Global Commitment to Health waiver. The Office of Vermont Health Access administrative expenses and allocation methodologies should comply with Federal regulations at 45 CFR 95.507
(a) and (b) and 42 CFR 433.15.

- A general reference to the Global Commitment to Health waiver at the beginning of each AHS Department’s allocation methodology should be indicated by an asterisk attached to each Plan Department number and allocation methodology that is affected by the waiver.

Nothing contained herein should be construed as approving activities not otherwise authorized by approved program plans, or Federal legislation or regulations.

The implementation of the cost allocation plan approved by this document may from time to time be revised by authorized Federal staff. The disclosure of inequities during such reviews may necessitate changes to the plan.

Sincerely,

Darryl W. Mayes
Deputy Director
Cost Allocation Services

cc: Barnwell, G., ACF
Johnson, W., CMS
Lubing, L., USDA/FNS
Dear Dr. Chen,

I am writing in strong support of the Vermont Department of Health’s (VDH) USDA FINI pilot project proposal: *Connecting health and food: an incentive program to increase fruit and vegetable consumption among SNAP participants through health care and retail stores.*

This project is exciting because it pulls together multiple sectors that are working toward increasing fruit and vegetable consumption for low income Vermonters and improving health outcomes by providing support through health care providers, and incentives through coupons, for this vulnerable population. In addition, the project engages retailers who play an essential role in making access to healthy food possible.

VDH is Vermont’s lead public health agency and administrator of the state’s SNAP-Ed program; as such, they are the logical organization to manage this project. VDH has a proven track record of gathering partners and successfully implementing health and obesity prevention programs, including a statewide Healthy Retailer Initiative, promoting healthy (and local) food in retail stores.

I am happy to offer my time and expertise to evaluate the project, if funded. I am a faculty member at the University of Vermont and hold a Ph.D. in Nutrition from Tufts University. I have evaluated numerous projects over many years, including the the FINI project currently underway in Newport, VT under the auspices of Green Mountain Farm to School.

The value of 5% of my time, plus benefits, is $7,692.00. This amount may be used as match for the project.

Sincerely yours,

Linda Berlin, Director
UVM Center for Sustainable Agriculture
December 15, 2015

Dr. Harry Chen, Commissioner
Vermont Department of Health
PO Box 70, 108 Cherry St.
Burlington, VT 05402

Dear Dr. Chen,

I am writing in strong support of the Vermont Department of Health’s (VDH) USDA FINI pilot project proposal: Connecting health and food: an incentive program to increase fruit and vegetable consumption among SNAP participants through health care and retail stores.

This project is exciting because it pulls together multiple sectors that are working toward increasing fruit and vegetable consumption for low income Vermonters and improving health outcomes by providing support through health care providers, and incentives through coupons, for this vulnerable population. In addition, the project engages retailers who play an essential role in making access to healthy food possible. It is a win-win for Vermont individuals and retailers, and ultimately the health of our state.

VDH is Vermont’s lead public health agency and administrator of the state’s SNAP-Ed program; as such, they are the logical organization to manage this project. VDH has a proven track record of gathering partners and successfully implementing health and obesity prevention programs, including a statewide Healthy Retailer Initiative, promoting healthy (and local) food in retail stores.

Both of the University of the Vermont Medical Center’s Pediatric Primary Care offices, in Burlington and Williston, are pleased to be the Chittenden County pilot sites for this project. Our providers regularly discuss food security with patients and we plan to add a 2-question screening tool, as recommended by Hunger Free Vermont, to standardize our approach. We are very excited and thankful to be able to offer our patients something tangible to help address their food insecurity issues. In addition, we plan to refer patients to the Community Health Team for additional nutrition counseling or social work support as needed to continue to address barriers to healthy eating and engage in behavior change.

Each contact with patients related to the project will be coded as ones that will not be billed and may be used as match for the grant. We estimate this will equal a match of $10,250.00 ($25.00 per x 410). In addition, the follow-up calls and second contact s by the Community Health Team may be valued at $25.00 for
each call and $45.00 for each appointments (never billed to insurance) for an additional $28,575.00 in match.

Sincerely,

Emily Piazza, MS, RD, CD
Community Health Team Nutrition Supervisor
University of Vermont Medical Center

CC: Dr. Weinberger, Medical Director of Pediatric Primary Care
Dr. Harry Chen, Commissioner Vermont Department of Health  
PO Box 70, 108 Cherry St.  
Burlington, VT 05402

Dear Dr. Chen,

I am writing in strong support of the Vermont Department of Health's (VDH) USDA FINI pilot project proposal: Connecting health and food: an incentive program to increase fruit and vegetable consumption among SNAP participants through health care and retail stores.

This project is exciting because it pulls together multiple sectors that are working toward increasing fruit and vegetable consumption for low income Vermonters and improving health outcomes by providing support through health care providers, and incentives through coupons, for this vulnerable population. In addition, the project engages retailers who play an essential role in making access to healthy food possible.

VDH is Vermont's lead public health agency and administrator of the state's SNAP-Ed program; as such, they are the logical organization to manage this project. VDH has a proven track record of gathering partners and successfully implementing health and obesity prevention programs, including a statewide Healthy Retailer Initiative, promoting healthy (and local) food in retail stores.

City Market is uniquely poised to partner on this project. We are a Member-owned food cooperative, and the only full scale grocery store in downtown Burlington. We offer a wide variety of organic, local and conventional produce to meet all nutrition and budgetary needs and we have a very strong mission to support access to healthy food for our community. For example, our Food for All Program (FFA) offers a 10% discount on groceries to community members who participate in 3Squares VT, WIC or SSDI/SSI. We currently have over 1,000 Members participating in this program. Just last fiscal year alone through this program we offered discounts that amounted to almost $180,000 in extra purchasing power for these Members.

City Market agrees to take the coupons generated from this program and to provide a cash match of $15,000 to be able to increase the number of coupons given out from the Burlington health care provider's office. In addition, our partnership would include staff time to create the coupons and the coupon booklets for both Chittenden County and the Rutland area.

City Market is extremely interested in this pilot project and we're excited to be a partner in making it a success! Please let me know if you need additional information and many thanks for your consideration.

Sincerely,

Allison Weinhagen, Director of Community Engagement  
aweinhagen@citymarket.coop  
802-861-9750
Dear Dr. Chen,

I am writing in strong support of the Vermont Department of Health's (VDH) USDA FINI pilot-project proposal: Connecting health and food: an incentive program to increase fruit and vegetable consumption among SNAP participants through health care and retail stores.

This project is exciting because it pulls together multiple sectors that are working toward increasing fruit and vegetable consumption for low income Vermonters and improving health outcomes by providing support through health care providers, and incentives through coupons, for this vulnerable population. In addition, the project engages retailers who play an essential role in making access to healthy food possible.

VDH is Vermont's lead public health agency and administrator of the state's SNAP-Ed program; as such, they are the logical organization to manage this project. VDH has a proven track record of gathering partners and successfully implementing health and obesity prevention programs, including a statewide Healthy Retailer Initiative, promoting healthy (and local) food in retail stores. With VDH as the lead, our organization will:

On behalf of the Community Health Centers of Rutland Region, we commit to enrollment of up to 125 SNAP eligible patients to participate in the FINI pilot project by way of the established Health Care Share program application process. Enrollment will take place from March 31st-July 5th, 2016. Initial contact made during office visit for each patient will total a match of $3,125 in provider services. Followup for coupon book renewal and tracking will be accomplished through Health Care Share and Community Health Team coordinated services resulting in an additional $3,125 match for a total contribution of $6,250.

As a provider practicing plant based diet medicine coaching for patients, I am in support of this project as complimentary to the Health Care Share objectives in providing patients access and nutrition information to the benefits of eating "Fresh" fruits and vegetables, meaning just picked from a tree or garden - not canned, dried, frozen, processed or cooked in any way. We will encourage patients to support farmers in our community and use the coupons to buy fruits and vegetables grown in Vermont.

As a provider in Rutland community, I am very interested in this pilot and pleased to be a partner in making it a success.

Sincerely,

Matthew Kingsbauer, D.O.

Community Health Centers of the Rutland Region
November 23, 2015

Dr. Harry Chen, Commissioner
Vermont Department of Health
PO Box 70, 108 Cherry St.
Burlington, VT 05402

Dear Dr. Chen,

I am writing in strong support of the Vermont Department of Health’s (VDH) USDA FINI pilot project proposal: Connecting health and food: an incentive program to increase fruit and vegetable consumption among SNAP participants through health care and retail stores.

This project is exciting because it pulls together multiple sectors that are working toward increasing fruit and vegetable consumption for low income Vermonters and improving health outcomes by providing support through health care providers, and incentives through coupons, for this vulnerable population. In addition, the project engages retailers who play an essential role in making access to healthy food possible.

VDH is Vermont’s lead public health agency and administrator of the state’s SNAP-Ed program; as such, they are the logical organization to manage this project. VDH has a proven track record of gathering partners and successfully implementing health and obesity prevention programs, including a statewide Healthy Retailer Initiative, promoting healthy (and local) food in retail stores. With VDH as the lead, our organization will:

The Vermont Retail & Grocers Associations, which comprises most of the state’s food stores, will help solicit participating stores. In addition, VRGA is willing to help process the food coupons with the food retailers as envisioned in the grant application.

The Vermont Retail & Grocers Association is very interested in this pilot and pleased to be a partner in making it a success.

Sincerely,

Jim Harrison, President

148 State Street, Montpelier, VT 05602
www.vtgrn.org
December 11, 2015

Dr. Harry Chen, Commissioner
Vermont Department of Health
PO Box 70, 108 Cherry St.
Burlington, VT 05402

Dear Dr. Chen,

I am writing in strong support of the Vermont Department of Health's (VDH) USDA FINI pilot project proposal: Connecting Health and Food: An Incentive Program to Increase Fruit and Vegetable Consumption Among SNAP Participants Through Health Care and Retail Stores.

This project is exciting because it pulls together multiple sectors that are working toward increasing fruit and vegetable consumption for low income Vermonters and improving health outcomes by providing support through health care providers, and incentives through coupons, for this vulnerable population. In addition, the project engages retailers who play an essential role in making access to healthy food possible.

VDH is Vermont's lead public health agency and administrator of the state’s SNAP-Ed program; as such, they are the logical organization to manage this project. VDH has a proven track record of gathering partners and successfully implementing health and obesity prevention programs, including a statewide Healthy Retailer Initiative, promoting healthy (and local) food in retail stores.

Price Chopper is very interested in this pilot and pleased to be a partner in making it a success. We are a full service food retailer with a strong commitment to our communities. We offer a wide variety of high quality local (in season) fresh, frozen and canned produce that can all be part of improving produce intake for EBT recipients.

Administrative costs to cover training, processing, data analysis and accounting will be approximately $3,000, and will be Price Chopper’s match for the grant proposal. Thank you.

Sincerely,

Ellie Wilson, MS, RDN
Senior Nutritionist
Price Chopper Supermarkets

A Golub Corporation Company
461 Nott Street, Schenectady, New York 12308
12/11/2015

Dr. Harry Chen, Commissioner
Vermont Department of Health
PO Box 70, 108 Cherry Street
Burlington, VT 05402

Dear Dr. Chen,

I am writing this letter of commitment and support for the Vermont Department of Health USDA FINI pilot project, “Connecting Health and Food”. This is an incentive program to increase fruit and vegetable consumption among SNAP participants through health care providers and retail stores.

The Rutland Community Health Team commits to helping to identify and plan for the most effective way to distribute coupons to the target population. As an example, CHCRR Pediatrics is the largest pediatric provider in the county and serves a large population of young families who either receive SNAP or are eligible for SNAP. The CHT Pediatric Social Worker would be able to assist the primary care providers and staff in the identification and planning for distribution.

The Rutland CHT worked very closely with the very successful Health Care Share Program last year and will again this year. We made numerous referrals to this program and the feedback from participants was excellent. We hope to plan with this program and VDH for a seamless method for distribution.

The data supports that there is a high number of families at risk in our hospital service area and the Community Health Team works with many of those with the highest needs. It makes sense that we would include referral and applications for both of these programs in the care coordination that we provide.

We commit to provide in-kind support valued at $4,300 for this program. This would include staff time for our embedded social work staff at CHCRR Pediatrics and outreach mailings in support of the program. The value for this in-kind support would be 10 hours at $40/hour or $4000 and postage for mailings or $300 for a total of $4,300.

We are very excited to participate and are pleased to be a partner with VDH and Health Care Share and providers in improving the nutrition of families in our region.

Sincerely,

Mary Lou Bolt
CHT Manager

www.RRMIC.org
Dr. Harry Chen, Commissioner  
Vermont Department of Health  
PO Box 70, 108 Cherry St.  
Burlington, VT 05402  

December 9th, 2015  

Dear Dr. Chen,  

I am writing in strong support of the Vermont Department of Health’s (VDH) USDA FINI pilot project proposal: Connecting health and food: an incentive program to increase fruit and vegetable consumption among SNAP participants through health care and retail stores.  

This project is exciting because it pulls together multiple sectors that are working toward increasing fruit and vegetable consumption for low income Vermonters and improving health outcomes by providing support through health care providers, and incentives through coupons, for this vulnerable population. In addition, the project engages retailers who play an essential role in making access to healthy food possible.  

VDH is Vermont’s lead public health agency and administrator of the state’s SNAP-Ed program. They are the logical organization to manage this project. VDH has a proven track record of gathering partners and successfully implementing health and obesity prevention programs, including a statewide Healthy Retailer Initiative, promoting healthy (and local) food in retail stores.  

The University of Vermont Medical Center is very interested in this pilot, and pleased to be a partner in making it a success. As such, the UVM Medical Center will contribute up to a $15,000.00 cash match upon notice of award to support it.  

Best of luck with the grant.  

Sincerely,  

Julie Cole  
Sr. Community Benefit Strategist  
The University of Vermont Medical Center  
128 Lakeside Ave, Suite 106  
Burlington, VT 05401
December 9, 2014

Dr. Harry Chen, Commissioner
Vermont Department of Health
PO Box 70, 108 Cherry Street
Burlington, VT 05402

RE: Food Insecurity Nutrition Incentive Program Proposal, Letter of Support

Dear Dr. Chen,

The Vermont Sustainable Jobs Fund strongly supports the Vermont Department of Health’s (VDH) USDA FINI pilot project proposal: Connecting health and food: an incentive program to increase fruit and vegetable consumption among SNAP participants through health care and retail stores.

In January 2011, at the request of the Vermont Legislature, the Vermont Sustainable Jobs Fund (VSJF) released the Farm to Plate Strategic Plan (F2P), a ten year plan that includes 25 goals and dozens of strategies to strengthen Vermont’s food system. These goals include increasing production and consumption of local food, increasing access to local healthy food for all Vermonters, and improving diet-related health outcomes. VSJF coordinates the Farm to Plate Network, consisting of over 350 organizations collaborating within 25 self-governed groups to implement the strategic plan.

This project is critical because it pulls together multiple sectors focused on increasing fruit and vegetable consumption for low income Vermonters and improving health outcomes by providing support through health care providers, and incentives through coupons, for this vulnerable population. In addition, the project engages retailers who play an essential role in making access to healthy food possible. The Farm to Plate Network has identified this project as a high-leverage strategy that will help achieve many goals. Several Farm to Plate Network groups have worked to increase the amount of local food being offered at grocery stores, where the majority of Vermonter’s shop. We’ve completed two phases of research with grocers, and are systematically building relationships between producers, distributors and food hubs, and retailers to increase the amount of local foods in these markets. The nutrition incentive programs have the ability to draw new SNAP customers to retailers and grow revenue for local and regional farmers.

VDH is Vermont’s lead public health agency and administrator of the state’s SNAP-Ed program; as such, they are the logical organization to manage this project. VDH staff members, particularly Suzanne Kelley, have been very intentional about linking food system and health care objectives within the Farm to Plate Network. VDH has a proven track record of gathering partners and successfully implementing health and obesity prevention programs, including a statewide Healthy Retailer Initiative, promoting healthy (and local) food in retail stores.

With VDH as the lead, VSJF will commit $2,010 of in-kind resources to help ensure strong linkages with the Farm to Plate Network. Our staff members will serve on the advisory teams for the project. VSJF is very interested in this pilot and pleased to be a partner in making it a success.

Sincerely,

Erica Campbell, Farm to Plate Network Director, Vermont Sustainable Jobs Fund
12-8-15

Dr. Harry Chen, Commissioner
Vermont Department of Health
PO Box 70, 108 Cherry St.
Burlington, VT 05402

Dear Dr. Chen,

I am writing in strong support of the Vermont Department of Health’s (VDH) USDA FINI pilot project proposal: Connecting health and food: an incentive program to increase fruit and vegetable consumption among SNAP participants through health care and retail stores.

This project is exciting because it pulls together multiple sectors that are working toward increasing fruit and vegetable consumption for low income Vermonters and improving health outcomes by providing support through health care providers, and incentives through coupons, for this vulnerable population. In addition, the project engages retailers who play an essential role in making access to healthy food possible.

VDH is Vermont’s lead public health agency and administrator of the state’s SNAP-Ed program; as such, they are the logical organization to manage this project. VDH has a proven track record of gathering partners and successfully implementing health and obesity prevention programs, including a statewide Healthy Retailer Initiative, promoting healthy (and local) food in retail stores. With VDH as the lead, our organization, Vermont Farmers Market will:

Manage accepting and processing FINI fruit and vegetable Coupons at the Rutland Farmers Market for the pilot year of the program. A total of 60 hours, $1,200, will be made as in kind match contribution for market manager staff time spent processing and handling coupons during the pilot year of the program. The Vermont Farmers Market is one of the largest and most diverse markets in Vermont and the first to operate 52 weeks out of the year. We bring more than 60 vendors to our weekly summer and winter markets. We work in close partnership with the Vermont Farmers Food Center, host of both the Rutland winter market and the Rutland Health Care Share program. Both the winter market and the Health Care Share have been successful in increasing marketing and sales opportunities for farmers in our region. We are in support of the FINI coupon project as it will increase revenue for farmers and support SNAP eligible citizens in purchasing and eating more fresh, local foods available year round at our farmers market.

We the Vermont Farmers Market are very interested in this pilot and pleased to be a partner in making it a success.

Sincerely,

[Signature]

Paul Hertel, President Vermont Farmers Market
December 8, 2015

Dear Dr. Chen,

I am writing in strong support of the Vermont Department of Health’s (VDH) United States Department of Agriculture Food Insecurity Nutrition Incentive pilot project proposal: Connecting health and food: an incentive program to increase fruit and vegetable consumption among SNAP participants through health care and retail stores.

This project is exciting because it pulls together multiple sectors that are working toward increasing fruit and vegetable consumption for low income Vermonters and improving health outcomes by providing support through health care providers, and incentives through coupons, for this vulnerable population. In addition, the project engages retailers who play an essential role in making access to healthy food possible.

VDH is Vermont’s lead public health agency and administrator of the state’s SNAP-Ed program; as such, they are the logical organization to manage this project. VDH has a proven track record of gathering partners and successfully implementing health and obesity prevention programs, including a statewide Healthy Retailer Initiative, promoting healthy (and local) food in retail stores. With VDH as the lead, Economic Services Division (ESD) will assist with mailing by providing address information to enter into your letter and envelopes.

ESD is pleased to be a partner in making the FINI pilot project a success.

Sincerely,

Sean P. Brown, Deputy Commissioner
Department for Children and Families
Economic Services Division
December 16, 2015

Dr. Harry Chen, Commissioner
Vermont Department of Health
PO Box 70
108 Cherry Street
Burlington, VT 05402

Dear Dr. Chen,

I am writing in support of the Vermont Department of Health’s (VDH) USDA FINI pilot project proposal: *Connecting health and food: an incentive program to increase fruit and vegetable consumption among SNAP participants through health care and retail stores.*

This project is exciting because it pulls together multiple sectors that are working toward increasing fruit and vegetable consumption for low income Vermonters and improving health outcomes by providing support through health care providers, and incentives through coupons, for this vulnerable population. In addition, the project further engages retailers who play an essential role in making access to healthy food possible.

VDH is Vermont’s lead public health agency and administrator of the state’s SNAP-Ed program; as such, they are the logical organization to manage this project. VDH has a proven track record of gathering partners and successfully implementing health and obesity prevention programs, including a statewide Healthy Retailer Initiative, promoting healthy (and local) food in retail stores.

Hannaford is willing to partner on this project. There are 188 Hannaford Supermarkets throughout Maine, New Hampshire, Massachusetts, New York and Vermont and we are proud to play an active role in improving the quality of life in the communities we serve. Our stores offer a wide variety of produce to meet all nutrition needs. We carry 3,500+ organic and natural products, and over 220 farmers provide local produce to our stores.

Sincerely,

[Signature]

Judy M. Knapp
Government Relations Manager
Delhaize America Shared Services, LLC
December 16, 2015

Dr. Harry Chen, Commissioner  
Vermont Department of Health  
PO Box 70  
108 Cherry St.  
Burlington, VT 05402

Dear Dr. Chen,

I am writing in strong support of the Vermont Department of Health’s (VDH) USDA FINI pilot project proposal: Connecting health and food: an incentive program to increase fruit and vegetable consumption among SNAP participants through health care and retail stores.

This project is exciting because it pulls together multiple sectors that are working toward increasing fruit and vegetable consumption for low income Vermonters and improving health outcomes. This will be done by providing support through health care providers, and incentives through coupons, for this vulnerable population. In addition, the project engages retailers who play an essential role in making access to healthy food possible.

VDH is Vermont’s lead public health agency and administrator of the state’s SNAP-Ed program; as such, they are the logical organization to manage this project. VDH has a proven track record of gathering partners and successfully implementing health and obesity prevention programs, including a statewide Healthy Retailer Initiative, promoting healthy (and local) food in retail stores.

As I know you are aware, University of Vermont Medical Center has a strong commitment to not only buying and serving healthy food, but to role model for other organizations how innovative approaches can be used to improve the health of our community. As director of Nutrition Services, I have led other initiatives like this, including the Health Care Share program which included offering 100 families a farm share, distributed at three primary care sites. As health care reform shifts our models of payment, so too does it shift the delivery of our care model — and the Veggie Rx program is a wonderful example of how we can lead by example.

I am committed to the success of this pilot program and hope that we have the opportunity to bring this to our patients.

Sincerely,

Diane Imrie  
Director  
Nutrition Services  
University of Vermont Medical Center
November 23, 2015

Dr. Harry Chen, Commissioner
Vermont Department of Health
PO Box 70, 108 Cherry St.
Burlington, VT 05402

Dear Dr. Chen,

I am writing in strong support of the Vermont Department of Health’s (VDH) USDA FINI pilot project proposal: Connecting health and food: an incentive program to increase fruit and vegetable consumption among SNAP participants through health care and retail stores.

This project pulls together multiple sectors that are working to increase fruit and vegetable consumption for low income Vermonters and improve health outcomes by providing support through health care providers, and incentives through coupons, for this vulnerable population. In addition, the project engages retailers who play an essential role in making access to healthy food possible in our communities.

VDH is Vermont’s lead public health agency and administrator of the state’s SNAP-Ed program; as such, they are the logical organization to manage this integrated project approach. VDH has a proven track record of gathering partners and successfully implementing health and obesity prevention programs, including a statewide Healthy Retailer Initiative, promoting healthy (and local) food in retail stores.

In addition to the food access and health aspects of this project, The Vermont Agency of Agriculture, Food and Markets is interested in the project’s ability to increase market access for our Vermont producers, by increasing demand of fresh produce, which can complement efforts to increase local product purchasing. Our agency believes that increased consumption of fruits and vegetables can lead to very positive market responses for Vermont’s food system. We will be able to provide a critical supportive role, advising VDH on the market and production end of the project.

The Vermont Agency of Agriculture, Food and Markets is very supportive of this pilot project proposal and pleased to be a partner in making it a successful model to replicate across the state.

Sincerely,

Chuck Ross
Secretary of Agriculture, Food and Markets

The State of Vermont is an Equal Opportunity / Affirmative Action Employer and Provider
Dear Dr. Chen,

I am writing in strong support of the Vermont Department of Health's (VDH) USDA FINI pilot project proposal: *Connecting health and food: an incentive program to increase fruit and vegetable consumption among SNAP participants through health care and retail stores.*

This project is exciting because it pulls together multiple sectors that are working toward increasing fruit and vegetable consumption for low income Vermonters and improving health outcomes by providing support through health care providers, and incentives through coupons, for this vulnerable population. In addition, the project engages retailers who play an essential role in making access to healthy food possible.

VDH is Vermont’s lead public health agency and administrator of the state’s SNAP-Ed program; as such, they are the logical organization to manage this project. VDH has a proven track record of gathering partners and successfully implementing health and obesity prevention programs, including a statewide Healthy Retailer Initiative, promoting healthy (and local) food in retail stores. With VDH as the lead, our organization will:

Serve as a market retail outlet accepting FINI fruit and vegetable Coupons for the pilot year of the program. Here at the Vermont Farmers Food Center we have taken the lead in Rutland County in connecting low income Vermonters with greater access to fresh, local fruits and vegetables through our Farm to Patient Collaborative project the Health Care Share. In 2015 we served 75 low income, at-risk health families with 12 weeks of free farm shares. Members were enrolled in the program through their primary health care providers and food for shares was aggregated through a cooperative CSA comprised of new and beginning farmers in Rutland County. In 2016 we will serve 125 member families and as the program expands each year the FINI coupon project will compliment Health Care Shares by offering participants support in continuing healthy eating habits centered around fresh, local foods viable year round at our farmers market.

*Vermont Farmers Food Center* is very interested in this pilot and pleased to be a partner in making it a success.

Sincerely,

[Signature]

VFFC Board President
Logic Model for Vermont Fruit and Vegetable Incentive Program

**Situation:** There is strong support in to increase access to fruits and vegetables by low income Vermonters. Physicians understand the relationship between diet and health but lack resources to advise low income patients to eat healthier. This project provides an opportunity to incentivize low income Vermonters accessing produce; it helps health care providers have a valuable resource to offer patients; and supports retailers who will be reimbursed dollar for dollar for produce purchased.

**Inputs**
- VDH Staff
- Health Care Practices (HCP)
- Community Health Teams (CHT)
- Funding for coupons
- Vermont Retail and Grocers Association (VRGA)
- Retailers
- Farm to Plate Network

**Outputs**

<table>
<thead>
<tr>
<th>Activities</th>
<th>Participation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generate promotional/recruitment material for program</td>
<td>100% of eligible SNAP participants get promotional items</td>
</tr>
<tr>
<td>Develop coupon and nutrition education distribution and tracking process in health care provider offices</td>
<td>Create and print 680 coupon books for $150.00 worth of local, fresh and frozen produce</td>
</tr>
<tr>
<td>Implement coupon redemption process</td>
<td>3 HCPs receive coupon books and nutrition education materials to distribute to 680 patients who are SNAP recipients</td>
</tr>
<tr>
<td>Evaluate effect of program implementation</td>
<td>Develop produce coupon redemption procedures</td>
</tr>
</tbody>
</table>

**Outcomes – Impact**

<table>
<thead>
<tr>
<th>Short</th>
<th>Medium</th>
<th>Long</th>
</tr>
</thead>
<tbody>
<tr>
<td>HCP will report increased willingness to talk about fruit and vegetable consumption with low income patients</td>
<td>HCP talk to low SES about fruit and vegetable intake</td>
<td>Rates of overweight and obesity decline among low income Vermonters</td>
</tr>
<tr>
<td>Low income patients will show an increased awareness of where to purchase produce and how to store and prepare it</td>
<td>Produce sales in 4 retail locations increase during coupon redemption period.</td>
<td>Rates of fruit and vegetable consumption increase by low income Vermonters</td>
</tr>
</tbody>
</table>

**Program Stakeholders**

| Program stakeholders will identify successes and barriers to Vermont produce coupon redemption program |

**Assumptions:**
Poor nutrition contributes to chronic conditions and poor health. Low income people are disproportionately affected; physician advice is a powerful motivator to change yet physicians lack resources to offer so often do not advise. This project provides resources (coupons, stress, educational materials) to support physicians to advise patients.

**External Factors**

Factors to consider that we are unable to control for include: transportation availability to participating health care providers or retailers. Loss of coupons by participants. Produce will be purchased but whether or not it is consumed is a factor we are unable to control.