



STATE OF VERMONT
JOINT FISCAL OFFICE

MEMORANDUM

To: Joint Fiscal Committee Members
From: Nathan Lavery, Senior Fiscal Analyst
Date: October 3, 2014
Subject: Grant Request #2708

Enclosed please find one (1) item that the Joint Fiscal Office has received from the administration. One (1) limited service position is associated with this request.

JFO #2708 – \$900,000 grant from the U.S. Department of Health and Human Services to the Vermont Department of Health. These funds will be used to develop a State Plan and evidence-based strategies aimed at achieving a comprehensive, coordinated and integrated state and community system of services for children and youth with special health care needs. **One limited service position** is associated with this request.

[JFO received 10/02/14]

Please review the enclosed materials and notify the Joint Fiscal Office (Nathan Lavery at (802) 828-1488; nlavery@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 October 16 we will assume that you agree to consider as final the Governor's acceptance of these requests.

State of Vermont
 Department of Finance & Management
 109 State Street, Pavilion Building
 Montpelier, VT 05620-0401

[phone] 802-828-2376
 [fax] 802-828-2428

Agency of Administration

JFO 2708

**STATE OF VERMONT
 FINANCE & MANAGEMENT GRANT REVIEW FORM**

Grant Summary:		This is a federal grant to develop a State Plan and evidence-based strategies aimed at achieving a comprehensive, coordinated and integrated state and community system of services for Children and Youth with Special Health Needs..			
Date:		9/4/2014			
Department:		Department of Health			
Legal Title of Grant:		Integrated Community systems for Childen and Youth with Special Health Care Needs (CYSHCN).			
Federal Catalog #:		93.110			
Grant/Donor Name and Address:		US. Department of Health & Human Services, Health Resources & Services Administration. 5600 Fishers Ln. Rockville, MD 20852-1750			
Grant Period:		From: 9/1/2014		To: 8/31/2017	
Grant/Donation		\$5,000			
	SFY 1	SFY 2	SFY 3	Total	Comments
Grant Amount:	\$153,571	\$300,000	\$300,000	\$753,571	The remainder of the grant will be spent in FY 18(\$146,429)
Position Information:		# Positions	Explanation/Comments		
		1	The position is a three year limited service position required to manage the grant and program objectives over the next three years.		
Additional Comments: There will be three subrecipient agreements/MOU: 1) Vermont Child Health Improvement Program; 2) VDH Help Me Grow; 3) Vermont Family Network.					
Has Vantage budget detail been reviewed and reconciled? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Analyst Initial)					

RECEIVED
 OCT 02 2014
 JOINT FISCAL OFFICE

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

BASIC GRANT INFORMATION				
1. Agency:	Human Services			
2. Department:	Vermont Department of Health			
3. Program:	Maternal & Child Health			
4. Legal Title of Grant:	Integrated Community Systems for CSHCN			
5. Federal Catalog #:	93.110			
6. Grant/Donor Name and Address: US Dept of Health & Human Services, Health Resources & Services Administration				
7. Grant Period:	From:	9/1/2014	To:	8/31/2017
8. Purpose of Grant: See Attached Summary				
9. Impact on existing program if grant is not Accepted: None				
10. BUDGET INFORMATION				
	SFY 1	SFY 2	SFY 3	
Expenditures:	FY 15	FY 16	FY 17	Comments
Personal Services	\$53,311	\$106,620	\$106,620	
Operating Expenses	\$7,500	\$7,500	\$7,500	
Grants	\$92,940	\$185,880	\$185,880	
Total	\$153,751	\$300,000	\$300,000	
Revenues:				
State Funds:	\$	\$	\$	
Cash	\$	\$	\$	
In-Kind	\$	\$	\$	
Federal Funds:	\$	\$	\$	
(Direct Costs)	\$137,757	\$268,014	\$268,014	
(Statewide Indirect)	\$960	\$1,919	\$1,919	
(Departmental Indirect)	\$15,034	\$30,067	\$30,067	
Other Funds:	\$	\$	\$	
Grant (source)	\$	\$	\$	
Total	\$153,751	\$300,000	\$300,000	
Appropriation No:	3420010000	Amount:	\$7,997	
	3420021000		\$145,754	
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	
			Total	
			\$153,751	
Has current fiscal year budget detail been entered into Vantage? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				

SEP 22 2014

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

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: _____ Agreed by: _____ (initial)

12. Limited Service Position Information:	# Positions	Title
	1	Policy and Implementation Analyst
Total Positions	1	

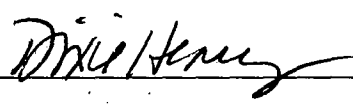
12a. Equipment and space for these positions: Is presently available. Can be obtained with available funds.

13. AUTHORIZATION AGENCY/DEPARTMENT

I/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):

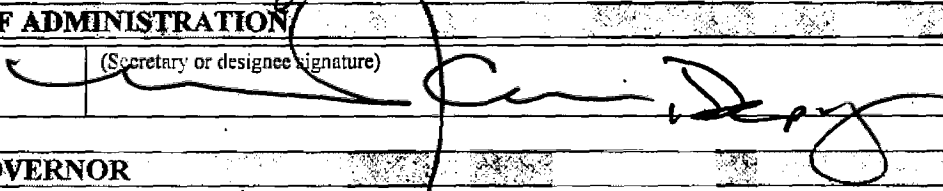
Signature:  Date: **AUG 27 2014**

Title: Commissioner of Health

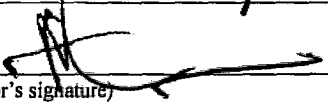
Signature:  Date: **9/12/14**

Title: Deputy Secretary, Arts

14. SECRETARY OF ADMINISTRATION

Approved:  (Secretary or designee signature) Date: **9/24/14**

15. ACTION BY GOVERNOR

Check One Box:
 Accepted  (Governor's signature) Date: **9/30/14**

Rejected

16. DOCUMENTATION REQUIRED

Required GRANT Documentation

- | | |
|---|--|
| <input type="checkbox"/> Request Memo
<input type="checkbox"/> Dept. project approval (if applicable)
<input type="checkbox"/> Notice of Award
<input type="checkbox"/> Grant Agreement
<input type="checkbox"/> Grant Budget | <input type="checkbox"/> Notice of Donation (if any)
<input type="checkbox"/> Grant (Project) Timeline (if applicable)
<input type="checkbox"/> Request for Extension (if applicable)
<input type="checkbox"/> 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).

**STATE OF VERMONT
Joint Fiscal Committee Review
Limited Service - Grant Funded
Position Request Form**

This form is to be used by agencies and departments when additional grant funded positions are being requested. Review and approval by the Department of Human Resources must be obtained prior to review by the Department of Finance and Management. The Department of Finance will forward requests to the Joint Fiscal Office for JFC review. A Request for Classification Review Form (RFR) and an updated organizational chart showing to whom the new position(s) would report must be attached to this form. Please attach additional pages as necessary to provide enough detail.

Agency/Department: Agency of Human Services, Vermont Department of Health Date: 08/21/14

Name and Phone (of the person completing this request): Ilisa Stalberg, 802-951-4026

Request is for:

- Positions funded and attached to a new grant.
 Positions funded and attached to an existing grant approved by JFO # _____

1. Name of Granting Agency, Title of Grant, Grant Funding Detail (attach grant documents):

US Dept of Health & Human Services, Health Resources & Services Administration
 Integrated Community Systems for CSHCN

2. List below titles, number of positions in each title, program area, and limited service end date (information should be based on grant award and should match information provided on the RFR) position(s) will be established only after JFC final approval:


<u>Title* of Position(s) Requested</u>	<u># of Positions</u>	<u>Division/Program</u>	<u>Grant Funding Period/Anticipated End Date</u>
Policy and Implementation Analyst	1	MCH/CSHN	09/01/14 to 08/31/17

*Final determination of title and pay grade to be made by the Department of Human Resources Classification Division upon submission and review of Request for Classification Review.

3. Justification for this request as an essential grant program need:

This position will accomplish the program objectives for the Integrated Community Systems for CSHCN grant as described in the budget justification submitted as part of the federal application and approved by the granting agency.

I certify that this information is correct and that necessary funding, space and equipment for the above position(s) are available (required by 32 VSA Sec. 5(b)).

 _____ Date: AUG 27 2014

Molly Paul _____ Date: 9.18.14

[Signature] _____ Date: 9/24/14

[Signature] _____ Date: 09/29/14

Comments:

SEP 22 2014



Rec'd
9/5/14

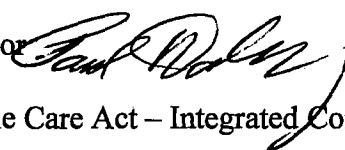
**Department of Health
Business Office**
108 Cherry Street – PO Box 70
Burlington, VT 05402-0070
HealthVermont.gov

[phone] 802-863-7736

Agency of Human Services

MEMORANDUM

To: Jim Giffin, AHS CFO

From: Paul Daley, VDH Financial Director 

Re: Grant Acceptance of the Affordable Care Act – Integrated Community Systems for CSHCN grant

Date: 08/21/14

The Department of Health has received a grant from the United States Department of Health & Human Services, Health Resources & Services Administration, providing \$900,000 over three years to provide the Department with the resources needed to develop a State Plan and evidence-based strategies aimed at achieving a comprehensive, coordinated and integrated state and community system of services for Children and Youth with Special Health Needs.

We are requesting approval to receive these funds and approval for a limited service position and are enclosing: the Grant Acceptance Request (AA1), narrative summary, budget summaries, a copy of the grant award document, a copy of the grant application, RFR, an org chart, and a Position Request Form for a Policy and Implementation Analyst.

It is our understanding, based on the advice of Molly Paulger at the Department of Human Resources (DHR) that this AA-1 packet, once approved by the Secretary of Human Services, should be forwarded in its entirety to DHR. DHR will retain the original RFR for classification action upon receipt of approval by all parties, while transmitting a copy of the RFR and all remaining documents to Finance and Management.

We appreciate your support in moving this request forward. Please let me know if you have questions or need additional information. Thank you.



Request for Grant Acceptance
Integrated Community Systems for CSHCN
Summary 08/19/14

The Department of Health has received a grant from the Department of Health & Human Services, Health Resources and Services Administration, providing \$900,000 over three years to provide the Department with needed resources to develop a State Plan and evidence-based strategies aimed at achieving a comprehensive, coordinated and integrated state and community system of services and supports for Children and Youth with Special Health Care Needs (CYSHCN).

This funding will strengthen the Department's capacity to increase the proportion of CYSHCN who receive integrated care through a patient/family-centered medical/health home approach by 20% over 2009/2010 levels.

Goals include: (1) comprehensive needs assessment of strengths and gaps in the existing system; (2) participation in quality improvement and collaborative innovation through a cross-state learning community; and (3) Vermont-specific activities aimed at improving cross-system care coordination and family leadership.

The funds will be used to establish a Policy and Implementation Analyst position to administer all aspects of the grant, including the needs assessment, state planning process and implementation of the cross-state quality improvement/collaborative innovation learning community. Funding will also be used for subrecipient grants and MOUs to Vermont Child Health Improvement Program (VCHIP), Vermont Department of Health/Help Me Grow, and the Vermont Family Network.

The Health Department is hereby seeking approval to receive \$153,751 in new Federal funds in State Fiscal Year 2015 and the establishment of a limited service position. The remainder of the Federal funding will be included in the Department's future budget requests. We have attached the grant award document and a copy of the grant application as well as the Position Request Form.

VERMONT DEPARTMENT OF HEALTH

SFY15 SIG - CYSHCN Budget

<u>VISION Account</u>	<u>Admin & Support</u> (3420010000)	<u>Public Health</u> (3420021000)	<u>VDH Total</u>
Employee Salaries	\$0	\$26,655	\$26,655
Fringe Benefits	\$0	\$10,662	\$10,662
3rd Party Contracts	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
Total Personal Services	\$0	\$37,317	\$37,317
Equipment	\$0	\$0	\$0
Supplies	\$0	\$0	\$0
Other	\$0	\$0	\$0
Travel	<u>\$0</u>	<u>\$7,500</u>	<u>\$7,500</u>
Total Operating Expenses	\$0	\$7,500	\$7,500
Subgrants	\$0	\$92,940	\$92,940
Total Direct Costs	\$0	\$137,757	\$137,757
Total Indirect Costs	<u>\$7,997</u>	<u>\$7,997</u>	<u>\$15,994</u>
Total SFY12 Grant Costs	\$7,997	\$145,754	\$153,751

Appropriation Summary

Total Personal Services	\$7,997	\$45,314	\$53,311
Total Operating Expenses	\$0	\$7,500	\$7,500
Total Subgrants	<u>\$0</u>	<u>\$92,940</u>	<u>\$92,940</u>
	\$7,997	\$145,754	\$153,751

VERMONT DEPARTMENT OF HEALTH

SFY16 SIG - CYSHCN Budget

<u>VISION Account</u>	<u>Admin & Support</u> (3420010000)	<u>Public Health</u> (3420021000)	<u>VDH Total</u>
Employee Salaries	\$0	\$53,310	\$53,310
Fringe Benefits	\$0	\$21,324	\$21,324
3rd Party Contracts	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
Total Personal Services	\$0	\$74,634	\$74,634
Equipment	\$0	\$0	\$0
Supplies	\$0	\$0	\$0
Other	\$0	\$0	\$0
Travel	<u>\$0</u>	<u>\$7,500</u>	\$7,500
Total Operating Expenses	\$0	\$7,500	\$7,500
Subgrants	\$0	\$185,880	\$185,880
Total Direct Costs	\$0	\$268,014	\$268,014
Total Indirect Costs	<u>\$15,993</u>	<u>\$15,993</u>	<u>\$31,986</u>
Total SFY11 Grant Costs	<u>\$15,993</u>	<u>\$284,007</u>	<u>\$300,000</u>

Appropriation Summary

Total Personal Services	\$15,993	\$90,627	\$106,620
Total Operating Expenses	\$0	\$7,500	\$7,500
Total Subgrants	<u>\$0</u>	<u>\$185,880</u>	<u>\$185,880</u>
	\$15,993	\$284,007	\$300,000

A. INTRODUCTION

Vermont is a small rural state with a population of slightly more than 600,000, with proportionally small state government agencies. Committed staff across children and family-serving state agencies work closely with each other and family organizations to address the needs of Vermont children and families. Vermont has many strengths and is at the leading edge of significant innovation and advancement in health care delivery and financing for Vermont's children, including those with special health care needs. While Vermont's initiatives are well aligned in theory, the risk is in practice, they may be siloed. The funds which would be made available through this grant would allow Vermont to make a significant statewide impact on improving services for children with special health care needs and their families, while also aligning with MCH 3.0 transformation. The grant would provide needed resources to develop a State Plan and evidence-based strategies aimed at achieving a **comprehensive, coordinated and integrated state and community system of services and supports for CYSHCN.**

The critical role of the medical home and the critical importance of care coordination are underscored in the recent AAP policy statement, *Patient- and Family-Centered Care Coordination: A Framework for Integrating Care for Children and Youth Across Multiple Systems*: "Care coordination is an essential element of a transformed American health care delivery system that emphasizes optimal quality and cost outcomes, addresses family-centered care, and calls for partnership across various settings and communities...From its inception, the medical home has had care coordination as a core element. In general, optimal outcomes for children and youth, especially those with special health care needs, require interfacing among multiple care systems and individuals... Coordination of care across settings permits an integration of services that is centered on the comprehensive needs of the patient and family, leading to decreased health care costs, reduction in fragmented care, and improvement in the patient/family experience of care." (Pediatrics Vol. 133 No. 5 May 1, 2014)

The funds which would be made available through this grant would support Vermont's achievement of this vision outlined above. This grant would allow Vermont to make a significant statewide impact on improving services for children with special health care needs and their families, while also aligning with MCH 3.0 transformation. Vermont proposes to develop and implement the first-ever State Plan aimed at integrating services for CYSHCN, to guide and sustain collaborative work into the future. Vermont will also develop statewide strategies, such as the expansion of a Care Coordination Learning Collaborative, the promotion of family-professional partnerships, and the development of a shared resource, all expressly aimed at achieving a comprehensive, coordinated and integrated state and community system of services and supports for CYSHCN.

Please note the following terminology throughout the proposal:

CSHN refers to the Vermont Department of Health's Children with Special Health Needs program. CYSHCN refers to the population of children and youth with special health care needs.

VERMONT DEPARTMENT OF HEALTH
State Implementation Grants for Enhancing the System of Services for Children and Youth with Special Health Care Needs through Systems Integration

BUDGET AND BUDGET NARRATIVE

A.	Personnel.....	\$53,310
B.	Fringe benefits.....	\$21,324
C.	Travel.....	\$7,500
D.	Equipment.....	0
E.	Supplies	0
F.	Contractual.....	\$185,880
G.	Construction.....	0
H.	Other	0
I.	TOTAL DIRECT.....	\$268,014
J.	Indirect	\$31,986
K.	TOTAL.....	\$300,000

JUSTIFICATION

A. PERSONNEL \$53,310

	% of Effort	# Months	Total
Policy and Implementation Analyst	1.00 FTE	12	\$53,310

The Policy and Implementation Analyst (vacant) will administer all aspects of the SIG grant, including leadership of the steering committee (convening of partners), the needs assessment, and state planning process, as well as implementation of the cross-state quality improvement/collaborative innovation learning community and state-specific strategies. The Policy and Implementation Analyst will also oversee federal reporting, management of subrecipient agreements (grants and/or contracts), and attend all required meetings and conferences.

Salaries of the Co-Project Directors: Breena Holmes, MCH Director and Ilisa Stalberg, MCH Deputy Director are coded to the Indirect line.

B. FRINGE BENEFITS \$21,324

The Vermont Department of Health will charge the RPE Program the actual cost of fringe benefits (not a fringe benefit rate) provided to employees. The actual cost of fringe benefits varies from employee to employee based on salary, employee choice of health care plan, and employee election of certain benefits. The usual components of these fringe benefits are FICA, retirement, dental, medical and life insurance coverage, and the employee assistance program. The cost of each employee's fringe benefits will be allocated to the SIG grant program based on hours worked in the Program relative to all hours worked by the employee. Based on the current cost of a typical employee's fringe benefits, it is estimated that the cost of these fringe benefits at 40% of salary.

C. TRAVEL \$7,500

Costs associated with Program and Implementation Analyst to attend annual national meeting; as well as funding to support a team of 3-5 people to participate in a statewide Learning Collaborative.

D. EQUIPMENT \$0

E. SUPPLIES \$0

F. CONTRACTUAL \$185,880

Three (3) subrecipient grant agreements/MOUs:

1. Vermont Child Health Improvement Program

a. Care Coordination Learning Collaborative \$80,000

Grant to VCHIP to support expansion of Pediatric Care Coordination Learning Collaborative. The goal of this strategy is to plan, implement and evaluate the impact, sustainability and financial implications of effective care coordination among Vermont's network of children's primary and specialty health care professionals, with meaningful engagement of patients, families, and representatives from appropriate community-based, child-serving agencies and organizations

b. Evaluation \$65,880

The evaluation will be led by the VCHIP. VCHIP has extensive local and national expertise in program evaluation and practice-based quality improvement. VCHIP will foster our ability to coordinate and implement a comprehensive evaluation plan that meets the objectives of the initiatives we are putting forth in this proposal.

2. Vermont Department of Health/Help Me Grow \$20,000

Vermont plans to expand cross-state systems integration and leverage strategic partnerships with the innovative *Help Me Grow* shared resource model. HMG utilizes a

shared resource single portal of entry, effective care coordination, and cross-sector collaboration for an integrated process of early detection.

The Help Me Grow grant agreement will also include accessibility for all families including the provision of interpretation and translation services, as well as the development of culturally competent materials, as needed.

3. Vermont Family Network \$20,000

Subrecipient grant to VFN to support family participation in quality improvement achieving effective care coordination and model patient and family centered medical homes across Vermont, development of trainings on family involvement and parent-professional partnerships and shared decision-making/shared care planning; measurement of the impact of the care coordination learning collaborative through follow-up surveys and interviews six months post participation in the collaborative; increase capacity for Patient/Family Advisory structures to support quality improvement/effective shared care implementation and evaluation.

4. Access Accommodations \$0

Under separate contract, the Vermont Department of Health pays for the provision of interpreter and translations services.

G. CONSTRUCTION \$0

H. OTHER \$0

I. TOTAL DIRECT \$268,014

J. DIRECT \$31,986

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 original approval and a copy of the most recent approval letter are 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. TOTAL \$300,000