



STATE OF VERMONT
JOINT FISCAL OFFICE

MEMORANDUM

To: Joint Fiscal Committee members
From: Sorsha Anderson, Staff Associate
Date: September 17, 2020
Subject: Grant Requests – JFO #3020

Enclosed please find one (1) item, which the Joint Fiscal Office has received from the Administration.

JFO #3020 –\$27,171 from the University of Vermont and State Agricultural College to the Vermont Department of Health. Funds will be used for the Policy and Communication Evaluation (PACE) project. The PACE project objective is to understand the impact of state-level policies on substance abuse belief and behaviors among young Vermonters. This award will be used to study the perceptions and behaviors of youth and young adults around vaping. The award includes partial funding for two (2) existing Public Health Analysts. *This request does not stem from the state or federal response to the COVID-19 pandemic.*
[JFO received 09/16/20]

Please review the enclosed materials and notify the Joint Fiscal Office (Sorsha Anderson: sanderson@leg.state.vt.us) if you have questions or would like this item held for legislative review. Unless we hear from you to the contrary by October 15, 2020, we will assume that you agree to consider as final the Governor's acceptance of this request.



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

STATE OF VERMONT FINANCE & MANAGEMENT GRANT REVIEW FORM			
Grant Summary:	PACE-R21		
Date:	8/4/2020		
Department:	Agency of Human Services – Department of Health		
Legal Title of Grant:	PACE-R21: <i>Perceptions and Problems Associated with Vaping in Youth and Young Adults</i>		
Federal Catalog #:	NA		
Grant/Donor Name and Address:	University of Vermont & State Agricultural College 85 South Prospect St 340 Waterman Building Burlington, VT 05405-0160		
Grant Period:	From:	04/01/2020	To: 03/31/2021
Grant/Donation	\$27,171		
	SFY 21	SFY 22	Comments
Grant Amount	\$27,171	\$0	
Position Information	# Positions	Explanations/Comments	
	0	partially funds 2 existing Public Health Analysts	
Additional Comments	See attached grant abstract		

Department of Finance & Management	Adam Greshin <small>Digitally signed by Adam Greshin Date: 2020.08.04 14:42:29 -0400</small>	(Initial)
Secretary of Administration	Kristin Clouser <small>Digitally signed by Kristin Clouser Date: 2020.08.04 16:35:08 -0400</small>	(Initial)
Sent to Joint Fiscal Office	Ariel Murphy <small>Digitally signed by Ariel Murphy Date: 2020.09.16 12:50:51 -0400</small>	Date

Candace Elmquist

Digitally signed by Candace Elmquist
Date: 2020.09.16
12:50:51 -0400



MEMORANDUM

July 23, 2020

TO: Michael K. Smith, Secretary of Human Services

FR: Mark Levine, MD, Commissioner of Health

E-SIGNED by Mark Levine, MD
on 2020-07-22 17:47:05 EST

RE: Request for Grant Acceptance –
PACE-R21 – *Perceptions and Problems Associated with Vaping in Youth and Young Adults*

Please find enclosed a Request for Grant Acceptance (AA-1) for your review and approval.

The Vermont Department of Health (VDH) has received a grant from the University of Vermont & State Agricultural College (UVM) in the amount of \$27,171. VDH and UVM are partnering on the Policy and Communication Evaluation (PACE) project. The objective of the PACE project is to understand the impact of state-level policies and communication campaigns on substance use beliefs and behaviors in young Vermonters. Funding from this award will be used to study the perceptions and behaviors of youth and young adults around vaping.

The purpose of this grant award from UVM is to provide funds to VDH to support analytic capacity for the study. VDH analysts will conduct statistical analysis on PACE Survey data, prepare reports, presentations and manuscripts on the findings and collaborate with UVM on other analysis and reporting efforts. VDH will apply the results of this work to improve programs intended to reduce vaping among youth and young adults.

Thank you in advance for your favorable consideration of this request.

27,171 Grant from UVM to VDH
for statistical analysis in a study to
understand the impact on policies +
perceptions + behaviors - youth
around vaping



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

BASIC GRANT INFORMATION			
1. Agency:	Agency of Human Services		
2. Department:	Department of Health		
3. Program:	PACE-R21		
4. Legal Title of Grant:	PACE-R21: <i>Perceptions and Problems Associated with Vaping in Youth and Young Adults</i>		
5. Federal Catalog #:	NA		
6. Grant/Donor Name and Address:			
University of Vermont & State Agricultural College 85 South Prospect St 340 Waterman Building Burlington, VT 05405-0160			
7. Grant Period:	From:	04/01/2020	To: 03/31/2021
8. Purpose of Grant:			
The purpose of this grant is to provide funds to VDH for analysis and reporting for Policy and Communication Evaluation (PACE) project. The R-21 phase of the project will look at vaping in youth and young adults. The State will apply the results of this work to improve programs intended to reduce vaping among youth and young adults.			
9. Impact on existing program if grant is not Accepted: None			
10. BUDGET INFORMATION			
	SFY 21	SFY 22	Comments
Expenditures:			
Personal Services	\$27,171	\$0	
Operating Expenses	\$0	\$0	
Grants	\$0	\$0	
Total	\$27,171	\$0	
Revenues:			
Grant Funds	\$27,171	\$0	
(Direct Costs)	\$18,647	\$0	
(Statewide Indirect)	\$0	\$0	
(Departmental Indirect)	\$8,524	\$0	
Total	\$27,171	\$0	
Appropriation No:	3420010000	Amount:	\$8,524
	3420021000		\$18,647
		Total	\$27,171
Has current fiscal year budget detail been entered into Vantage? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

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: Mark Levine, MD Agreed by: _____ (initial)

12. Limited Service Position Information:	# Positions	Title
	0	
Total Positions	0	

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

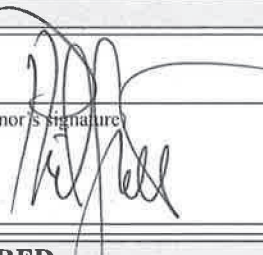
13. AUTHORIZATION AGENCY/DEPARTMENT

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:
	E-SIGNED by Mark Levine, MD on 2020-07-22 17:46:56 EST	July 22, 2020
	Title: Commissioner	
	Signature:	Date:
	E-SIGNED by Jenney Samuelson on 2020-07-31 19:59:52 GMT	
	Title: Deputy Secretary, Agency Of Human Services	

14. SECRETARY OF ADMINISTRATION

<input checked="" type="checkbox"/> Approved:	(Secretary or designee signature) Kristin Clouser	Digitally signed by Kristin Clouser Date: 2020.08.04 16:11:22 -04'00'	Date:
---	---	--	-------

15. ACTION BY GOVERNOR

<input checked="" type="checkbox"/> Accepted		Date: 9/15/20
<input type="checkbox"/> Rejected		

16. DOCUMENTATION REQUIRED

Required GRANT Documentation

<input checked="" type="checkbox"/> Request Memo	<input type="checkbox"/> Notice of Donation (if any)
<input type="checkbox"/> Dept. project approval (if applicable)	<input type="checkbox"/> Grant (Project) Timeline (if applicable)
<input checked="" type="checkbox"/> Notice of Award	<input type="checkbox"/> Request for Extension (if applicable)
<input type="checkbox"/> Grant Agreement	<input type="checkbox"/> Form AA-1PN attached (if applicable)
<input checked="" type="checkbox"/> Grant Budget	

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).

Funding Abstract

PACE-R21 – Project Summary

The Vermont Department of Health (VDH) has received a grant from the University of Vermont and State Agricultural College (UVM) in the amount of \$27,171. This subaward from UVM comes from a larger federal National Institutes of Health grant. VDH and UVM are partnering on the Policy and Communication Evaluation (PACE) project. The purpose of the PACE project is to understand the impact of state-level policies and communication campaigns on substance use beliefs and behaviors in young Vermonters. This specific R-21 phase of the study is dedicated to understanding the perceptions and behaviors of youth and young adults around vaping. VDH will use the subaward funding to support analytic capacity for the study. VDH analysts will conduct statistical analysis on PACE Survey data, prepare reports, presentations and manuscripts on the findings and collaborate with UVM on other analysis and reporting efforts. VDH will use the information gleaned from the statistical analysis and reporting for programmatic evaluation and data-driven program planning.

The budget for the grant award includes partial funding for two existing Public Health Analyst positions to work on the project.

FDP Cost Reimbursement Subaward

Federal Awarding Agency: National Institutes of Health (NIH)	
Pass-Through Entity (PTE): University of Vermont and State Agricultural College	Subrecipient: Vermont Department of Health
PTE PI: Andrea Villanti, PhD., MPH	Sub PI: Maria Roemhildt, PhD.
PTE Federal Award No: 1R21DA051943-01	Subaward No: AWD00000014SUB00000001
Project Title: Perceptions and Problems Associated with Vaping in Youth and Young Adults	
Subaward Period of Performance (Budget Period):	
Start: 04/01/2020 End: 03/31/2021	Amount Funded This Action (USD): \$ 27,171.00
Estimated Project Period (if incrementally funded):	
Start: 04/01/2020 End: 03/31/2022	Incrementally Estimated Total (USD): \$

Terms and Conditions

1. PTE hereby awards a cost reimbursable subaward, (as determined by 2 CFR 200.330), to Subrecipient. The Statement of Work and budget for this Subaward are as shown in Attachment 5. In its performance of Subaward work, Subrecipient shall be an independent entity and not an employee or agent of PTE.
2. Subrecipient shall submit invoices not more often than monthly and not less frequently than quarterly for allowable costs incurred. Upon the receipt of proper invoices, the PTE agrees to process payments in accordance with this Subaward and 2 CFR 200.305. All invoices shall be submitted using Subrecipient's standard invoice, but at a minimum shall include current and cumulative costs (including cost sharing), breakdown by major cost category, Subaward number, and certification, as required in 2 CFR 200.415(a). Invoices that do not reference PTE Subaward number shall be returned to Subrecipient. Invoices and questions concerning invoice receipt or payments shall be directed to the party's Financial Contact, shown in Attachment 3A.
3. A final statement of cumulative costs incurred, including cost sharing, marked "FINAL" must be submitted to PTE's Financial Contact, as shown in Attachment 3A, not later than 60 days after the Project Period end date. The final statement of costs shall constitute Subrecipient's final financial report.
4. All payments shall be considered provisional and are subject to adjustment within the total estimated cost in the event such adjustment is necessary as a result of an adverse audit finding against the Subrecipient.
5. Matters concerning the technical performance of this Subaward shall be directed to the appropriate party's Principal Investigator as shown in Attachments 3A and 3B. Technical reports are required as shown in Attachment 4.
6. Matters concerning the request or negotiation of any changes in the terms, conditions, or amounts cited in this Subaward, and any changes requiring prior approval, shall be directed to the PTE's Administrative Contact and the Subrecipient's Administrative Contact shown in Attachments 3A and 3B. Any such change made to this Subaward requires the written approval of each party's Authorized Official as shown in Attachments 3A and 3B.
7. The PTE may issue non-substantive changes to the Period of Performance and budget Unilaterally. Unilateral modification shall be considered valid 14 days after receipt unless otherwise indicated by Subrecipient when sent to Subrecipient's Administrative Contact, as shown in Attachment 3B.
8. Each party shall be responsible for its negligent acts or omissions and the negligent acts or omissions of its employees, officers, or directors, to the extent allowed by law.
9. Either party may terminate this Subaward with 30 days written notice. PTE notice shall be directed to the Administrative Contact, and Subrecipient notice shall be directed to the Administrative Contact as shown in Attachments 3A and 3B. PTE shall pay Subrecipient for termination costs as allowable under Uniform Guidance, 2 CFR 200, or 45 CFR Part 75 Appendix IX, as applicable.
10. By signing this Subaward, including the attachments hereto which are hereby incorporated by reference, Subrecipient certifies that it will perform the Statement of Work in accordance with the terms and conditions of this Subaward and the applicable terms of the Federal Award, including the appropriate Research Terms and Conditions ("RTCs") of the Federal Awarding Agency, as referenced in Attachment 2. The parties further agree that they intend this subaward to comply with all applicable laws, regulations, and requirements.

By an Authorized Official of the PTE: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">Name: Emily Trantum</div> <div style="width: 45%;">Date: <input style="width: 100%;" type="text"/></div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 45%;">Title: Team Lead, Award Acceptance</div> <div style="width: 45%;"></div> </div>	By an Authorized Official of the Subrecipient: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">Name: <input style="width: 100%;" type="text"/></div> <div style="width: 45%;">Date: <input style="width: 100%;" type="text"/></div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 45%;">Title: <input style="width: 100%;" type="text"/></div> <div style="width: 45%;"></div> </div>
---	--

BUDGET JUSTIFICATION

PERSONNEL

Fringe Benefits

The fringe benefit rate at the Vermont Department of Health is calculated at 40.0%.

Key Personnel:

Maria Roemhildt, Ph.D., Co-Investigator: 5% effort for 12 months in Year 1 (0.6 calendar months). Dr. Roemhildt is an epidemiologist at the Vermont Department of Health. As a Public Health Analyst she has expertise in population-based survey and experimental research including the impact of chronic disease, risk behaviors and protective factors, tobacco use in Vermont, and impact of tobacco advertising and tobacco control messaging. Dr. Roemhildt's expertise and experiences in this area position her to contribute uniquely as a co-investigator to the multi-disciplinary team assembled to support the proposed project. Dr. Roemhildt will assist with the development of the project protocol and procedures, implementation, and fidelity of annual cohort recruitment, quarterly survey assessments, and study analyses. As Co-Investigator, she will supervise the Public Health Analyst at the Vermont Department of Health working on PACE Vermont Study analyses and oversee reports produced for the Department of Health from PACE Vermont data. Dr. Roemhildt will participate in interpretation of findings and in timely dissemination of study findings, as well as guiding methodological inquiries into the generalizability of study findings to the broader population of Vermont youth and young adults based on her work with other surveillance efforts in the state.

Public Health Analyst – To Be Named: 15% effort for 12 months in Year 1 (1.8 calendar months). In this study, the Public Health Analyst will communicate regularly with VDH staff regarding data collection and study reports. The analyst will be responsible for preparing analyses and reporting on vaping from the PACE data for program assessment, strategic planning, surveillance and/or evaluation. The Analyst will also assist with manuscript preparation and other dissemination activities throughout the study.

RESEARCH & RELATED BUDGET - Budget Period 1

OMB Number: 4040-0001
Expiration Date: 10/31/2019

ORGANIZATIONAL DUNS: Enter name of Organization:

Budget Type: Project Subaward/Consortium Budget Period: 1 Start Date: End Date:

A. Senior/Key Person

Prefix	First	Middle	Last	Suffix	Base Salary (\$)	Months			Requested Salary (\$)	Fringe Benefits (\$)	Funds Requested (\$)
						Cal.	Acad.	Sum.			
	Maria		Roemhildt		79,997.00	0.60			4,000.00	1,600.00	5,600.00
Project Role: <input type="text" value="Co-Investigator"/>											

Additional Senior Key Persons: Total Funds requested for all Senior Key Persons in the attached file:
Total Senior/Key Person:

B. Other Personnel

Number of Personnel	Project Role	Months			Requested Salary (\$)	Fringe Benefits (\$)	Funds Requested (\$)
		Cal.	Acad.	Sum.			
<input type="text"/>	Post Doctoral Associates	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	Graduate Students	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	Undergraduate Students	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	Secretarial/Clerical	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
1	Public Health Analyst	2.00			9,319.00	3,728.00	13,047.00
<input type="text" value="1"/>	Total Number Other Personnel						<input type="text" value="13,047.00"/>
							Total Other Personnel <input type="text" value="13,047.00"/>
							Total Salary, Wages and Fringe Benefits (A+B) <input type="text" value="18,647.00"/>

C. Equipment Description

List items and dollar amount for each item exceeding \$5,000

Equipment item	Funds Requested (\$)
None	0.00

Additional Equipment:

Total funds requested for all equipment listed in the attached file	<input type="text"/>
Total Equipment	0.00

D. Travel

	Funds Requested (\$)
1. Domestic Travel Costs (Incl. Canada, Mexico and U.S. Possessions)	<input type="text"/>
2. Foreign Travel Costs	<input type="text"/>
Total Travel Cost	<input type="text"/>

E. Participant/Trainee Support Costs

	Funds Requested (\$)
1. Tuition/Fees/Health Insurance	0.00
2. Stipends	0.00
3. Travel	0.00
4. Subsistence	0.00
5. Other <input type="text"/>	<input type="text"/>
<input type="text"/> Number of Participants/Trainees	
Total Participant/Trainee Support Costs	0.00

F. Other Direct Costs

Funds Requested (\$)

1. Materials and Supplies	0.00
2. Publication Costs	
3. Consultant Services	
4. ADP/Computer Services	
5. Subawards/Consortium/Contractual Costs	
6. Equipment or Facility Rental/User Fees	
7. Alterations and Renovations	
8.	
9.	
10.	
Total Other Direct Costs	0.00

G. Direct Costs

Funds Requested (\$)

Total Direct Costs (A thru F) 18,647.00

H. Indirect Costs

Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	Funds Requested (\$)
Public Assistance Cost Allocation Plan	0.64	13,319.00	8,524.00

Total Indirect Costs 8,524.00

Cognizant Federal Agency
(Agency Name, POC Name, and
POC Phone Number)

I. Total Direct and Indirect Costs

Funds Requested (\$)

Total Direct and Indirect Institutional Costs (G + H) 27,171.00

J. Fee

Funds Requested (\$)

K. Total Costs and Fee

Funds Requested (\$)

Total Costs and Fee (I + J) 27,171.00

L. Budget Justification

--	--	--	--

RESEARCH & RELATED BUDGET - Budget Period 2

OMB Number: 4040-0001
Expiration Date: 10/31/2019

ORGANIZATIONAL DUNS: **Enter name of Organization:**

Budget Type: Project Subaward/Consortium **Budget Period: 2** **Start Date:** **End Date:**

A. Senior/Key Person

Prefix	First	Middle	Last	Suffix	Base Salary (\$)	Months			Requested Salary (\$)	Fringe Benefits (\$)	Funds Requested (\$)
						Cal.	Acad.	Sum.			
	Maria		Reemhildt		79,997.00	0.60			0.00	0.00	0.00
Project Role: <input type="text" value="Co-Investigator"/>											

Additional Senior Key Persons: **Total Funds requested for all Senior Key Persons in the attached file**
Total Senior/Key Person

B. Other Personnel

Number of Personnel	Project Role	Months			Requested Salary (\$)	Fringe Benefits (\$)	Funds Requested (\$)
		Cal.	Acad.	Sum.			
<input type="text"/>	Post Doctoral Associates	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	Graduate Students	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	Undergraduate Students	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	Secretarial/Clerical	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
1	Public Health Analyst	0.60			0.00	0.00	0.00

Total Number Other Personnel **Total Other Personnel**
Total Salary, Wages and Fringe Benefits (A+B)

C. Equipment Description

List items and dollar amount for each item exceeding \$5,000

Equipment item	Funds Requested (\$)
None	0.00

Additional Equipment:

Total funds requested for all equipment listed in the attached file	
Total Equipment	0.00

D. Travel

	Funds Requested (\$)
1. Domestic Travel Costs (Incl. Canada, Mexico and U.S. Possessions)	0.00
2. Foreign Travel Costs	
Total Travel Cost	0.00

E. Participant/Trainee Support Costs

	Funds Requested (\$)
1. Tuition/Fees/Health Insurance	0.00
2. Stipends	0.00
3. Travel	0.00
4. Subsistence	0.00
5. Other <input type="text"/>	
<input type="text"/> Number of Participants/Trainees	Total Participant/Trainee Support Costs
	0.00

F. Other Direct Costs

Funds Requested (\$)

1. Materials and Supplies	0.00
2. Publication Costs	
3. Consultant Services	
4. ADP/Computer Services	
5. Subawards/Consortium/Contractual Costs	
6. Equipment or Facility Rental/User Fees	
7. Alterations and Renovations	
8.	
9.	
10.	
Total Other Direct Costs	0.00

G. Direct Costs

Funds Requested (\$)

Total Direct Costs (A thru F)

0.00

H. Indirect Costs

Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	Funds Requested (\$)
Public Assistance Cost Allocation Plan	0.64	0.00	0.00
Total Indirect Costs			0.00

Cognizant Federal Agency
(Agency Name, POC Name, and
POC Phone Number)

I. Total Direct and Indirect Costs

Funds Requested (\$)

Total Direct and Indirect Institutional Costs (G + H)

0.00

J. Fee

Funds Requested (\$)

K. Total Costs and Fee

Funds Requested (\$)

Total Costs and Fee (I + J)

0.00

L. Budget Justification

(Only attach one file.)

Add Attachment

Delete Attachment

View Attachment

RESEARCH & RELATED BUDGET - Cumulative Budget

	Totals (\$)	
Section A, Senior/Key Person		5,600.00
Section B, Other Personnel		13,047.00
Total Number Other Personnel	2	
Total Salary, Wages and Fringe Benefits (A+B)		18,647.00
Section C, Equipment		0.00
Section D, Travel		0.00
1. Domestic	0.00	
2. Foreign		
Section E, Participant/Trainee Support Costs		0.00
1. Tuition/Fees/Health Insurance	0.00	
2. Stipends	0.00	
3. Travel	0.00	
4. Subsistence	0.00	
5. Other		
6. Number of Participants/Trainees		
Section F, Other Direct Costs		0.00
1. Materials and Supplies	0.00	
2. Publication Costs		
3. Consultant Services		
4. ADP/Computer Services		
5. Subawards/Consortium/Contractual Costs		
6. Equipment or Facility Rental/User Fees		
7. Alterations and Renovations		
8. Other 1		
9. Other 2		
10. Other 3		
Section G, Direct Costs (A thru F)		18,647.00
Section H, Indirect Costs		8,524.00
Section I, Total Direct and Indirect Costs (G + H)		27,171.00
Section J, Fee		
Section K, Total Costs and Fee (I + J)		27,171.00