AGENDA ITEM or FINAL CONTRACT REVIEW SUBMITTAL FORM

AgendaTitle:
Contract for Services; Hilltop Health Services Corporation; Provide Health Coverage Guide Services for the Connect for Health Assistance Network; 9/1/13 thru 8/31/14; $21,677

Action Requested: County Manager Signature

Parties to the Agreement: Hilltop Health Services & Gunnison County

Term Begins: 9/1/2013 **Term Ends:** 8/31/2014 **Grant Contract #:**

Summary:
Health Coverage Guide funding for .5 FTE (Kelsey)from the Hilltop Assistance Site agreement with Connect for Health Colorado

Fiscal Impact: $21,677 for 12 months; $32,516 for 18months; no county funds

Submitted by: R. Brown **Submitter's Email Address:** rbrown@gunnisoncounty.org

Finance Review: (●) Required ( ) Not Required

Comments:

Review complete, no concerns from Finance.

Reviewed by: Lnienhueser Discharge Date: 8/22/2013

County Attorney Review: (●) Required ( ) Not Required

Comments:

Reviewed by: ATrezise Discharge Date: 8/22/2013 Certificate of Insurance Required Yes ( ) No (●)

County Manager Review:

Comments:

Reviewed by: MBirnie Discharge Date: 8/26/2013

(●) Consent Agenda ( ) Regular Agenda ( ) Worksession Time Allotted:

Agenda Date: 9/3/2013 Follow Up Agenda Date: N/A

Revised April 2013

Contract for Services

This Agreement is made effective the 1st day of September, 2013, by and between the Board of County Commissioners of the County of Gunnison, Colorado, 200 East Virginia Avenue, Gunnison, CO 81230 ("Gunnison County"), and Hilltop Health Services Corporation, a Colorado Corporation, dba Hilltop Community Resources, Inc., 540 S. 1st Street, Montrose, CO 81401 ("Hilltop"), to provide Health Coverage Guide Services for the Connect for Health Assistance Network.

RECITALS

For the purpose of this contract, Gunnison County Health and Human Services, ("Subcontractor") will work in collaboration with Kaye Hotsenpiller, an employee of Hilltop. The Health Coverage Guide will be an employee of Gunnison County and subject to Gunnison County policies. The Guide will serve to assist clients in the navigation of the marketplace insurance program, currently Connect for Health Colorado as outlined in Attachment A. Hilltop is the Assistance Site and the guide is a satellite extension of the Assistance site services as referenced in Attachment B.

AGREEMENT

1. Scope of Services. The Subcontractor will perform 100% time tracking to reflect that the work conducted under this agreement targets only the work associated with the Connect for Health marketplace and does not include any enrollment functions for Medicaid eligible populations. The Subcontractor agrees to participate in any third-party evaluation of Connect for Health Colorado grants program, including assisting with any data collection and information gathering, such as participation in surveys, site visits, meetings, and interviews with evaluators. The Subcontractor agrees to provide monthly, quarterly and annual reports with quantitative data on characteristics of the target population and work performed. The Subcontractor agrees to produce all documents and reporting required for monitoring of federal grant sub-recipients. The Subcontractor shall comply with the Standard Terms and Conditions of the Connect for Health Assistance Network Grant.

   All Services shall be performed in a timely manner and in accordance with generally accepted standards for Hilltop's profession and all applicable federal, state and local laws and regulations affecting the Services or the subject matter thereof. Hilltop acknowledges that this is a non-exclusive Agreement, and Gunnison County may contract with additional or other providers able to furnish the same or similar services as it deems appropriate to do so.

2. TERM.

   The Term of this Contract is 12 Months. Upon written agreement, the Contract may be renewed for an additional 6 month period (18 months total), unless sooner terminated or replaced as provided herein.

3. STRATEGIC RESULT.

Execution of this Agreement will assist the County with its results strategy of 80% of area residents will have health insurance coverage, as outlined in the Gunnison County Strategic Plan.

4. COMPENSATION, BONUS AND EXPENSES.

(a) Reimbursement shall be made upon monthly invoicing from Gunnison County to Hilltop in accordance with the budget outlined in Attachment C. Hilltop shall reimburse Gunnison County within 3 weeks of receipt of the invoice.

(b) The costs shall compensate Hilltop for all charges, expenses, overhead, payroll costs, employee benefits, insurance subsistence, and profits, except as specifically set forth herein.

(c) This Agreement is subject to Gunnison County making an annual budget appropriation in an amount sufficient to fund this Agreement. If Gunnison County fails or refuses to make such an appropriation, Gunnison County reserves the right to terminate this Agreement without penalty to Hilltop pursuant to paragraph 13 of this Agreement.

5. INSURANCE.

Hilltop agrees that at all times during the Term of this Agreement that Hilltop shall carry and maintain, in full force and effect and at its sole cost and expense, the following insurance policies. Within thirty (30) days of the execution of this Agreement, Hilltop will provide insurance certificates to Gunnison County, listing Gunnison County as an additional insured, for the coverage's required herein which shall state that such policies shall not be materially changed or cancelled without thirty (30) days prior notice to Gunnison County.

(a) Worker's Compensation Insurance in accordance with Colorado and Federal law which adequately protects all labor employed by Hilltop during the term of this Agreement.

(b) Comprehensive General Liability Insurance or the equivalent for any injury to one person in any single occurrence, Three Hundred Ninety Thousand and No/100 U.S. Dollars ($350,000.00); and For an injury to two or more persons in any single occurrence, the sum of Nine Hundred Fifty Thousand and No/100 U.S. Dollars ($990,000.00).

(c) Comprehensive automobile liability insurance on all vehicles used in the Services, in an amount no less than $150,000 for any injury to one person in any single occurrence and in an amount no less than $600,000 for any injury to two or more persons in any single occurrence.

6. INDEPENDENT CONTRACTOR.

In carrying out its obligations and activities under this Agreement, Hilltop is acting as an independent contractor and not as an agent, partner, joint venture or employee of

Gunnison County. Hilltop does not have any authority to bind Gunnison County in any manner whatsoever.

Hilltop acknowledges and agrees that Hilltop is not entitled to: (i) unemployment insurance benefits; or (ii) Workers Compensation coverage, from Gunnison County. Further, Hilltop is obligated to pay federal and state income tax on any moneys paid it related to the services.

7. INDEMNIFICATION.

Hilltop agrees to indemnify, defend and hold harmless Gunnison County, its Commissioners, agents and employees of and from any and all liability, claims, liens, demands, actions and causes of action whatsoever (including reasonable attorney's and expert's fees and costs) arising out of or related to any loss, cost, damage or injury, including death, of any person or damage to property of any kind caused by the misconduct or negligent acts, errors or omissions of Hilltop or its employees, subcontractors or agents in connection with this Agreement.

This provision shall survive any termination or expiration of this Agreement with respect to any liability, injury or damage occurring prior to such termination.

8. DISCRIMINATION.

Hilltop agrees not to discriminate against any person or class of persons by reason of age, race, color, sex, creed, religion, disability, national origin, sexual orientation or political affiliation in providing any services or in the use of any facilities provided for the public in any manner prohibited by Part 21 of the Regulations of the Office of the Secretary of Transportation. Hilltop shall further comply with the letter and spirit of the Colorado Anti-Discrimination Act of 1957, as amended, and any other laws and regulations respecting discrimination in unfair employment practices. Additionally, Hilltop shall comply with such enforcement procedures as any governmental authority might demand that Gunnison County take for the purpose of complying with any such laws and regulations.

9. IMMIGRATION COMPLIANCE CERTIFICATION.

(a) Hilltop certifies that Hilltop does not and will not knowingly contract with or employ illegal aliens to work under this Agreement.

(b) Hilltop certifies that Hilltop has required its subcontractors to certify that they do not knowingly contract with or employ illegal aliens to work under this Agreement.

(c) Hilltop certifies that it has attempted to verify the eligibility of its employees and subcontractors to work through the Basic Pilot Employment Verification Program administered by the Social Security Administration and Department of Homeland Security.

(d) Hilltop agrees to comply with all reasonable requests made in the course of an investigation under C.R.S. 8-17.5-102 by the Colorado Department of Labor and Employment.

(e) Hilltop agrees to comply with the provisions of C.R.S. 8-17.5-101 et seq.

10. ADA COMPLIANCE.

Hilltop assures Gunnison County that at all times during the performance of this Agreement no qualified individual with a disability shall, by reason of such disability, be exclude from participation in, or denied benefits of the service, programs, or activities performed by the Hilltop, or be subjected to any discrimination by the Hilltop upon which assurance Gunnison County relies.

11. MISCELLANEOUS.

(a) SEVERABILITY. If any clause or provision of this Agreement shall be held to be invalid in whole or in part, then the remaining clauses and provisions, or portions thereof, shall nevertheless be and remain in full force and effect.

(b) AMENDMENT. No amendment, alteration, modification of or addition to this Agreement shall be valid or binding unless expressed in writing and signed by the parties to be bound thereby.

(c) NO WAIVER OF GOVERNMENTAL IMMUNITY. Nothing in this Agreement is, or shall be construed to be, a waiver, in whole or part, by Gunnison County of governmental immunity provided by the Colorado Governmental Immunity Act or otherwise.

12. DELEGATION AND ASSIGNMENT.

This is a personal services contract with Hilltop and, therefore, Hilltop shall not delegate or assign its duties under this Agreement without the prior written consent of Gunnison County which consent Gunnison County may withhold in its discretion. Subject to the foregoing, the terms, covenants and conditions of this Agreement shall be binding on the successors and assigns of either party.

13. TERMINATION.

This contract may be terminated under one of the following circumstances:

- Contract term ends without a written renewal
- 90 day written notice of termination by either party any time within the contract period.
- Funding failure
    - If third parties fail to make expected funds available (including funds which may be received from the federal government) for the continued performance for any fiscal period of COHBE operations, this Agreement shall be canceled automatically as of the beginning of the fiscal year for which funds were not appropriated or otherwise made available; provided,

however, that this will not affect either Connect for Health Colorado's rights, Hilltop's rights or the Subcontractor's rights under any termination clause in this Agreement. The effect of termination of the Agreement hereunder will be to discharge both the Grantee and Connect for Health Colorado from future performance of the Agreement, but not from their rights and obligations existing at the time of termination. Hilltop shall notify the Subcontractor as soon as it has knowledge that funds may not be available for the continuation of this Agreement for each succeeding fiscal period beyond the first.

14. NOTICES.

Any notice, demand or communication which either party may desire or be required to give to the other party shall be in writing and shall be deemed sufficiently given or rendered if delivered personally or sent by certified first class US mail, postage prepaid, addressed as follows:

Gunnison County: County Manager
Gunnison County
200 E. Virginia
Gunnison, Colorado 81230
Phone: 970-641-0248

With a copy to: Board of County Commissioners
of the County of Gunnison, Colorado
200 E. Virginia
Gunnison, Colorado 81230

Hilltop: Kaye Hotsenpiller
Hilltop Regional Office
540 S. 1st Street
Montrose, CO 81401
(970-252-7445

Either party has the right to designate in writing, served as provided above, a different address to which any notice, demand or communication is to be mailed.

15. GOVERNING LAW.

This Agreement shall be governed by and interpreted in accordance with the laws of the State of Colorado. Exclusive jurisdiction and venue for any legal proceedings related to this Agreement shall be in the state District Court governing Gunnison, Colorado.

16. ATTORNEYS FEES.

If any party hereto shall bring any suit or action against another for relief, declaratory or otherwise, arising out of this Agreement, the prevailing party shall have and recover

against the other party, in addition to all court costs and disbursements, such sum as the court may adjudge to be reasonable attorney's fees and expert witness fees.

17. COUNTERPARTS: FACSIMILE TRANSMISSION.

This Agreement may be executed by facsimile and/or in any number of counterparts, any or all of which my contain the signatures of less than all the parties, and all of which shall be construed together as but a single instrument and shall be binding on the parties as though originally executed on one originally executed document. All facsimile counterparts shall be promptly followed with delivery of original executed counterparts.

18. ENTIRE AGREEMENT.

This Agreement contains the entire agreement between the parties hereto with respect to the subject matter hereof, and supersedes any and all prior agreements, proposals, negotiations and representations pertaining to the obligations to be performed hereunder.

IN WITNESS WHEREOF, the parties have executed this Agreement as of the date set forth above.

BOARD OF COUNTY COMMISSIONERS
OF THE COUNTY OF GUNNISON, COLORADO

By: _____
Matthew Birnie, County Manager

ATTEST:

_____
Deputy Clerk

HILLTOP HEALTH SERVICES CORPORATION, A COLORADO CORPORATION
DBA HILLTOP COMMUNITY RESOURCES, INC.

By: _____
J. Michael Stahl, Chief Executive Officer

BUSINESS ASSOCIATE AGREEMENT
Hilltop Health Services Corporation
dba Hilltop Community Resources, Inc.

This Agreement is entered into by and between **Hilltop Health Services Corporation dba Hilltop Health Services Corporation,** hereafter referred to as **Hilltop** and Board of County Commissioners of the County of Gunnison hereafter referred to as **Business Associate** to set forth the terms and conditions under which "protected health information" (PHI), as defined by the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and Regulations enacted hereunder, created or received by ("Business Associate") on behalf of **Hilltop** may be used or disclosed.

This Agreement shall commence on **September 1, 2013** and the obligations herein shall continue in effect so long as **Business Associate** uses, discloses, creates or otherwise possesses any protected health information created or received on behalf of **Hilltop** and until all protected health information created or received by **Business Associate** on behalf of **Hilltop** is destroyed or returned to **Hilltop** pursuant to Paragraph 15 herein.

1) **Hilltop** and **Business Associate** hereby agree that **Business Associate** shall be permitted to use and/or disclose protected health information created or received on behalf of **Hilltop** for the following purposes:

a) Completing and submitting health care claims to health plans, Clearinghouses, and other third party payers.

b) Collection of fees for **Hilltop**.

c) Establishing and maintaining Business Management Programs for **Hilltop.**

d) Introducing, maintaining, and programming Electronic Medical Record Systems for **Hilltop.**

e) Introducing, maintaining, and programming compatible Dictation Systems for **Hilltop.**

It is to be understood by all parties that the permitted uses and disclosures must be within the scope of and necessary to achieve, the obligations and responsibilities of **Business Associate** in performing on behalf of, or providing services to, the Health Care Provider.

2) **Business Associate** may use and disclose protected health information created or received by **Business Associate** on behalf of **Hilltop** if necessary for the proper management and administration of **Business Associate** or to carry out. legal responsibilities, provided that any disclosure is:

a) Required by law, or

b) **Business Associate** obtains reasonable assurances from the person to whom the protected health information is disclosed that (i) the protected health information will be held confidentially and used or further disclosed only as required by law or for the purpose for which it was disclosed to the person; and (ii) **Business Associate** will be notified of any instances of which the person is aware in which the confidentiality of the information is breached.

3) **Business Associate** hereby agrees to maintain the security and privacy of all protected health information in a manner consistent with Colorado State and Federal laws and regulations, including the Health insurance Portability and Accountability Act of 1996 ("HIPAA") and regulations hereunder, and all other applicable law.

4) **Business Associate** further agrees not to use or disclose protected health information except as expressly permitted by this Agreement, applicable law, or for the purpose of managing Business Associate own internal business processes consistent with Paragraph 2 herein.

5) Business Associate shall not disclose protected health information to any member of its workforce unless **Business Associate** has advised such person (employee) of **Business Associate** privacy and security obligations and policies under this Agreement, including the consequences for violation of such obligations. Business Associate shall take appropriate disciplinary action against any member of its workforce who uses or discloses protected health information in violations of this Agreement and applicable law.

6) Business Associate shall not disclose protected health information created or received by Business Associate on behalf of **Hilltop** to a person, including any agent or subcontractor of **Business Associate** but not including a member of (**Health Care Provider's)** own workforce, until such person agrees in writing to be bound by the provisions of the Agreement and applicable Colorado State or Federal law.

7) Business Associate agrees to use appropriate safeguards to prevent use or disclosure of protected health information not permitted by this Agreement or applicable law.

8) Business Associate agrees to maintain a record of all disclosures of protected health information, including disclosures not made for the purposes of this Agreement. Such record shall include the date of the disclosure, the name and, if known, the address of the recipient of the protected health information, the name of the individual who is the subject of the protected health information, a brief description of the protected health information disclosed, and the purpose of the disclosure. **Business Associate** shall make such record available to an individual who is the subject of such information or **Hilltop** within five (5) working days of a request and shall include disclosures made on or after the date which is six (6) years prior to the request or April 14, 2003, whichever date is later.

9) **Business Associate** agrees to report to **Hilltop** any unauthorized use or disclosure of protected health information by Business Associate or its workforce or subcontractors and the remedial action taken or proposed to be taken with respect to such use or disclosure.

10) Business Associate agrees to make its internal practices, books, and records relating to the use and disclosure of protected health information received from **Hilltop** or created or received by **Business Associate** on behalf of **Hilltop**, available to the Secretary of the United States Department of Health and Human Services, for purposes of determining the Covered Entity's compliance with HIPAA.

11) Within thirty (30) days of a written request by **Hilltop**, **Business Associate** shall allow a person who is the subject of protected health information, such person's legal representative, or **Hilltop** to have access to and to copy such person's protected health information in the

format requested by such person, legal representative, or practitioner unless it is not readily producible in such format, in which case it shall be produced in standard hard copy format.

12) Business Associate agrees to amend, pursuant to a request by **Hilltop**, protected health information maintained and created or received by **Business Associate**, on behalf of the Practitioner. **Business Associate** further agrees to complete such amendment within thirty (30) days of a written request by **Hilltop,** and to make such amendment as directed by **Hilltop**.

13) In the event **Business Associate** fails to perform the obligations under this Agreement, Hilltop may, at its option:

a) Require **Business Associate** to submit to a plan of compliance, including monitoring by **Hilltop** and reporting by Business Associate, as **Hilltop,** in its sole discretion, determines necessary to maintain compliance with this Agreement and applicable law. Such plan shall be incorporated into this Agreement by amendment hereto: and
b) Require **Business Associate** to mitigate any loss occasioned by the unauthorized disclosure or use of protected health information.
c) Immediately discontinue providing protected health information to **Business Associate** with or without written notice to **Business Associate**

14) **Hilltop** may immediately terminate this Agreement and related agreements if **Hilltop** determines that **Business Associate** has breached a material term of this Agreement. Alternatively, **Hilltop** may choose to (i) provide **Business Associate** with ten (10) days written notice of the existence of an alleged material breach; and (ii) afford **Business Associate** an opportunity to cure said alleged material breach to the satisfaction of **Hilltop** within (10) days. **Business Associate's** failure to cure shall be grounds for immediate termination of this agreement. **Hilltop's** remedies under this Agreement are cumulative, and the exercise of any remedy shall not preclude the exercise of any other.
15) Upon termination of this Agreement, Prime Clinical Systems shall return or destroy all protected health information received from **Hilltop**, or created or received by **Business Associate** on behalf of **Hilltop** and that **Business Associate** maintains in any form, and shall retain no copies of such information. If the parties mutually agree that return or destruction of protected health information is not feasible, **Business Associate** shall continue to maintain the security and privacy of such protected health information in a manner consistent with the obligations of this Agreement and as required by applicable law, and shall limit further use of the information to those purposes that make the return or destruction of the information infeasible. The duties hereunder to maintain the security and privacy of protected health information shall survive the discontinuance of this Agreement.

16) **Hilltop** may amend this Agreement by providing ten (10) days prior written notice to **Business Associate** in order to maintain compliance with Colorado State or Federal law. Such amendment shall be binding upon Business Associate at the end of the ten (10) day period and shall not require the consent of **Business Associate Business Associate** may elect to discontinue the Agreement within the ten (10) day period, but **Business Associate** duties hereunder to

maintain the security and privacy of PROTECTED HEALTH INFORMATION shall survive such discontinuance. **Hilltop** and **Business Associate** may otherwise amend this Agreement by mutual written agreement.

17) Business Associate shall, to the fullest extent permitted by law, protect, defend, indemnify and hold harmless **Hilltop** and his/her respective employees, directors, and agents ("Indemnities") from and against any and all losses, costs, claims, penalties, fines, demands, liabilities, legal actions, judgments, and expenses of every kind (including reasonable attorneys fees, including at trial and on appeal) asserted or imposed against any Indemnities arising out of the acts or omissions of **Business Associate** or any of **Business Associate's** employees, directors, or agents related to the performance or nonperformance of this Agreement. Insert here.

Attachment A

Health Coverage Guides: Roles, Responsibilities and Duties

The role of the Health Coverage Guide will be to provide Connect for Health Colorado customers with fair and impartial information and services that help guide them through the application process. Health Coverage Guides will provide education about all the health coverage options available to customers and the qualified health plans available on the Exchange, as well as information about tax credits and cost sharing subsidies. They will assist customers in completing the application for health coverage and some will assist employers set up plan options for their employees. Health Coverage Guides will provide guidance to customers about their health plan options, and to help them prioritize, filter and sort these options. Health Coverage Guides will also assist customers with making changes to their account in the event of income fluctuations or changes in household, and renewing coverage during the appropriate renewal periods. In the event a customer has a grievance, complaint, or question, Health Coverage Guides will provide referrals to appropriate consumer assistance offices at the State or health insurance carrier. Health Coverage Guides will connect customers to the Customer Service Center, COHBE website, or certified and licensed brokers if additional support or support beyond the scope of the Health Coverage Guide's role is needed.

Health Coverage Guides are distinct from brokers because Health Coverage Guides are not licensed by the Division of Insurance to sell insurance. Health Coverage Guides will not provide advice on plan selection and will not perform functions on behalf of their customers. The Connect for Health Colorado training program will cover the distinction between facilitating plan selection and advising on plan selection. Brokers receive commission for the sale of a health plan, whereas Health Coverage Guides are grant-funded (or unfunded in the case of volunteers).

Health Coverage Guides must be prepared to deliver assistance and services to Coloradans seeking health coverage **no later than October 1, 2013.**

Specific functions of the Health Coverage Guide include:

- Provide in-person assistance to customers (by appointment, walk-in or otherwise as defined by the applicant entity). In-person assistance includes but is not limited to:
    - Providing education about insurance terms and the full range of health coverage options and help completing the application for health coverage
    - Provide appropriate referrals and facilitate appropriate connections with other members of Connect for Health Colorado customer service system.
    - Provide phone assistance to customers and phone access for setting appointments, answering questions, resolving problems with a maximum call response time of 1 business day.
    - Respond to internet or email inquiries within 1 business day.

Attachment B

Assistance Site Responsibilities (Hilltop):

• Commitment to supporting Connect for Health Colorado's mission to increase access, affordability, and choice for individuals and small employers purchasing health insurance in Colorado.

• Conduct outreach and public education that helps inform Colorado communities about new opportunities for accessing health care coverage, and assistance paying for health coverage.

• Recruit, employ, manage, and monitor individual Health Coverage Guides.

• Ensure Health Coverage Guides complete Connect for Health Colorado training and certification. Training will occur over the summer and early fall 2013. Certification criteria for Health Coverage Guides are attached as Appendix 2

• Ensure staff interacting with Health Coverage Guide clients or accessing the personal information of clients have completed a criminal background check and are free of conviction of financial crimes, crimes against children or vulnerable adults, and violent offenses.

• Sign Privacy and Security Statement and Conflict of Interest Statement (forthcoming) and obtaining the same from any organization providing support for Health Coverage Guide services and from all Health Coverage Guides under their supervision.

• Provide the infrastructure that allows Health Coverage Guides to conduct their business. Infrastructure requirements include ADA accessible space, telephone and fax, high speed internet access, computer, scanner, and printer.

• Provide monthly, quarterly, and annual reporting in the format requested by COHBE. Reporting will include information about outreach activities, number of people served, amount of time spent, type of contact made, etc.

• Submit to third-party evaluation.

• Provide administrative support services related to Assistance Site and Health Coverage Guide duties such as scheduling, supervision, and budget management.

• Be prepared to assist with pre-enrollment activities, such as information, education, responding to questions by August 2013.

• Be prepared to deliver services when open enrollment begins in October, 2013.

• Provide in-person assistance to customers (by appointment, walk-in or otherwise as defined by the applicant entity). In-person assistance includes but is not limited to:

- Providing education about insurance terms and the full range of health coverage options and help completing the application for health coverage
- Provide appropriate referrals and facilitate appropriate connections with other members of Connect for Health Colorado customer service system.
- Provide phone assistance to customers and phone access for setting appointments, answering questions, resolving problems with a maximum call response time of 1 business day.
- Respond to internet or email inquiries within 1 business day.

Attachment C

Financial Terms

The Health Coverage Guide will do direct time reporting to reflect only that work conducted under this agreement pertaining to non-Medicaid eligible populations.

Personnel: $28,333

Detail: 20 hours a week for 12 months, September 1, 2013 to August 31, 2014 and a subsequent 6 month period based on continuation of this agreement totaling 18 month. $18.16 per hour labor rate includes salary and benefits for 1560 hours = **$28,333**

Operating: $3,329

Detail: Office Rent = $109 per month x 18 months = **$1,962**

Supplies = **$500**

Internet and phone = Phone @ $14 month = $252; Internet @ 17.50 month = 315; IT support @ $200 per year = $300 Totaling **$867**

Travel and Training: $854

Detail: Two trips to Grand Junction (480 mi) mileage (.56 mile) = $269; Hotel 4 nights = $400; Meals $37 day x 5 days = $185 Totaling **$854**

TOTAL CONTRACT BUDGET FOR 18 MONTHS = $32,516