CERTIFICATION AND ASSURANCE STATEMENT

I certify that <u>State of Vermont, Agency of Human Services</u>: (Name of State/Agency)

Under Section 1905 of the Public Health Service Act:

A. Agrees to use the funds allocated only as described under Section 1904(a)(1)(A) - (F).

B. Agrees to submit a State Plan as described under Section 1905(b)(1)-6(B).

C. Certifies that the Chief Health Officer of the state will conduct public hearings on the plan in a manner that facilitates comment from public and private entities.

D. Agrees that any revisions made to the state plan will be presented in public hearings and will submit a description of the revisions to the Secretary (CDC).

E. Agrees that an advisory committee will be established to develop a plan authorizing activities to be carried out with payments made to the state under Section 1903. This committee will be comprised of members representing the general public and local health services.

F. Agrees to collect and report data in accordance with Section 1906 to measure the extent of progress being made toward improving the health status for each population through the use of applicable uniform data sets and data items developed by the Secretary.

G. Agrees to maintain state expenditures for such activities at a level not less than the average level of such state expenditures for the 2-year period preceding the fiscal year for which the state is applying to receive payments under Section 1903.

H. Agrees to establish reasonable criteria to evaluate effective performance of entities receiving funds, and agrees to develop procedures for procedural and substantial independent state review of the failure by the state, to provide funds to any such entity receiving funds from the Preventive Health and Health Services Block Grant.

I. Agrees to permit and cooperate with federal investigations undertaken in accordance with Section 1907.

J. Agrees to have in effect a system to protect from inappropriate disclosures of patient and sex offense victim records maintained by the state in connection with an activity funded under this part or by any entity receiving payments from the allotment of the state under this part.

K. Agrees to provide participation and review opportunity by the officer of state government responsible for administration of the state highway safety program in the development of any state plan relating to emergency medical services as such plan relates to highway safety.

L. Certifications Regarding: Drug Free Workplace, Lobbying, and Environmental Tobacco Smoke are incorporated by reference into this Statement from CDC Form 0.1246(E).

Signature:

(Governor)

Jenney Samuelson, Deputy Secretary (Print signature)

Signature by the Governor will be evidence that the State will abide by the terms and conditions of the Certifications and Assurances for the duration of the elected term of service of the Governor.

All other signatures of Cabinet level officials who are designated by the Governor must be signed each year.