Via Email

Dear Members of the House Committees on Health Care and Human Services:

We are writing to follow up on our testimony provided to the House Health Care Committee on June 3, 2020 regarding the urgent need to stabilize the health care system with federal Coronavirus Relief Funds (CRF).

We urge the House to approve a Vermont Provider Relief Fund to stabilize the health care and long-term care systems. We have provided draft legislative language that incorporates the restrictions of the US Department of Treasury on coronavirus relief funds.

We strongly recommend that the House consider the Vermont Provider Relief Fund as a single proposal that would apply to the entire coalition represented on this letter and other provider groups identified by the Agency of Human Services (AHS). Many providers on this coalition – such as designated agencies and home health and hospice agencies - provide services that fall under the jurisdiction of each of your committees or are otherwise uniquely situated in the health and long-term care systems such as nursing facilities. We need the relief program to apply to our organizations as a whole.

The proposal reflects the following policy recommendations:

- 1) Distribute these funds through a needs-based Provider Relief Fund authorized by the legislature and administered by the Agency of Human Services, according to US Department of Treasury guidance. This would build on the Phase 1 and Phase 2 work already implemented by AHS.
 - a. The CRF restrictions on authorized expenses do not lend themselves to sectorspecific appropriations. Each provider's situation must be considered on a caseby-case basis.
 - b. The future remains deeply uncertain and at this juncture, it is impossible for any of our members to precisely project their needs going forward.
 - c. Given the time restrictions of the fund, the Agency must have the authority to shift funds from one sector of the health care system to another.

- 2) Require an application with documentation of COVID-19 related expenses and fiscal impacts of business disruption for Medicaid, Medicare, commercial and private payers to ensure the program meets federal requirements.
- 3) Dedicate \$375 million to the fund, adjusted for the dollars spent by AHS on provider relief to date. We have not yet had a chance to consider among ourselves or with our respective members the Speaker's recommendation yesterday to hold back \$400 million of the total CRF.

Thank you for your continued support and hard work on behalf of the communities and Vermonters we all serve.

Sincerely,

Devon Green
VP, Government Relations
Vermont Association of Hospitals and Health Systems

Laura Pelosi, on behalf of Vermont Health Care Association Bayada Home Health and Hospice

Georgia J. Maheras
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Virginia Renfrew, on behalf of Vermont Association of Adult Day Services Vermont Association of Naturopathic Physicians Jill Mazza Olson Executive Director VNAs of Vermont

Julie Tessler Executive Director Vermont Care Partners: VT Council

Jessa Barnard Executive Director Vermont Medical Society

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