COVID-19 Response & Relief Agency of Human Services

January 14th, 2021



Agency of Human Services – CRF Legislative Appropriations

Act/Section	Dollar Amount/Description	Status
Act 120/Sec. A.49(9)	\$300,000 direct to Legal Aid • For increased costs of providing access to justice services. Up to 50% can be used to cover the cost of per use electronic judicial filing fees through 12/30/2020	 ✓ Grant Executed ✓ Paid out and encumbered \$300,000 thru 12/30/20 ✓ Amending to add \$75,000 for electronic filing fees thru 3/31/21
Act 137/Sec. 11	\$550,000 direct to Legal Aid • Provide legal and counseling services for those who are, or at risk of, experiencing homelessness	✓ Grant Executed✓ Paid out and encumbered \$550,000 thru 12/30/20
Act 154/Sec. B.1101.2 (7)	\$250,000 direct to Legal Aid Information technology costs necessitated by the COVID-19 pandemic, including cybersecurity and case management needs	✓ Grant Executed✓ Paid out and encumbered \$250,000 thru 12/30/20
Act 136/Sec. 15 JFC – 12/21/20	\$2,000,000 + \$1,300,000 to AHS for distribution "among populations made vulnerable by COVID-19 public health emergency" Includes those below 300% FPL, Reach Up, Older Vermonters, individuals with a disability	 ✓ DCF - \$2.6M – Stipend for Families receiving Reach Up, \$432.50 to 3,005 families, stipends were issued twice ✓ DAIL - \$700K – DS Family Support Stipend
Act 136/Sec. 16	\$700,000 to AHS for equal amounts to go to: • Association of Africans Living in Vermont • US Committee on Refugees and Immigrants' Vermont Refugee Resettlement Program	 ✓ Grants executed ✓ Paid out and encumbered thru 12/30/20 ✓ AALV - \$350,000 ✓ USCRI - \$350,000



Agency of Human Services – CRF Legislative Appropriations

Act/Section	Dollar Amount/Description	Status
Act 109/Sec. 36 as amended by Act 120/Sec. A.52	 \$3,000,000 to EMS Providers \$400,000 for training (shall be transferred to VDH for disbursement) \$500,000 for paramedic training (shall be transferred to VDH for disbursement) \$100,000 for AHS in coordination with DFR to hire a consultant to assist Vermont EMS with applications \$2,000,000 for EFR and provider stabilization grants 	Total Spent and Encumbered = \$2,873,172 as of 12/30/20 Training: Transferred \$900k to VDH for disbursement VDH completed application processes Paramedic: Issued awards for \$462,500 to New England EMS Institute and Vermont Technical College EMT & AEMT: Issued awards to 16 EMS providers for training for \$412,169 Stabilization: Executed contract with McSoley & McCoy for technical assistance - \$100,000 Issued 48 grants to providers for \$1,898,503 based on reduced call volume Reallocated \$100,000 by JFC on 12/9/20 Legislative report will be issued on 1/15/2021
Act 154/Sec. B.1121 7 (d) (1)	\$2,000,000 to EMS Providers for Workforce Stabilization	 ✓ Issued 73 grants to providers for \$1,997,015 ✓ Legislative report will be issued on 1/15/2021



Agency of Human Services – CRF Legislative Appropriations

Act/Section	Dollar Amount/Description	Status
Act 136/Sec. 6 Act 154 Act 168 JFC - 12/7/20	 \$60,600,000 to AHS for the administration and payment of Hazard Pay Grants Prescriptive language about who is eligible and how much they can receive through this program Providers eligible for employees who were substantially dedicated to mitigating or responding to the public health emergency or were providing essential services Current and former employees are eligible 	 ✓ Developed a salesforce application ✓ AHS administered the first round of the program – Employer application period: 8/4/20 to 9/29/20 ✓ DFR administered the second round with support from AHS – Employer application period: 10/28/20 to 11/18/20 ✓ 1,192 employer organizations received grants ✓ To date, ~3,240 former employees received payments ✓ Program is in the process of finalizing – estimates subject to change

Total Program Spending and Grant Awardee Unused Funds

Category	Amount
Covered Employers	\$54,722,800
Former employees	\$5,282,800 (estimated)
Administrative Costs	\$335,413 (estimated)
Returned Unused Grant Funds	(\$2,812,000) (estimated)
Total	\$57,529,013



Awarded Applicants by Self-Reported Covered Employer Type, Duplicated

# of Awardees Award An	# of Awardees	Self-Reported Covered Employer Type
(Payments for Current Emplo	70	a bild and facility and disast in 22 V.C. & . 2534 Abot and ideal abild and applied a positive and ideal according to the control of the cont
	/3	A child care facility as defined in 33 V.S.A _ 3511 that provided child care services to essential service providers pursuant to Directive 2 of Executive Order 01-20
18 \$55	18	A cleaning or janitorial service that provided cleaning or janitorial services to an eligible covered employer during the eligible period in locations that are open to the general public or regularly used by residents or patients of that covered employer
15 \$12	15	A dentist's office or a dental facility
14 \$1,13	14	A federally qualified health center, rural health clinic, or clinic for the uninsured
1 \$29	1	A food service provider that prepared and provided meals for residents or patients of an eligible covered employer during the eligible period
19 \$13	19	A funeral establishment or crematory establishment as defined in 26 V.S.A 1211
183 \$12,42	183	A grocery store
136 \$10,16	136	A health care facility as defined in 18 V.S.A9432 or a physician's office
14 \$1,71	14	A home health agency as defined in 33 V.S.A6302
38 \$54	38	A homeless shelter, including a lodging establishment as defined in 18 V.S.A _ 4301, that, during the eligible period, provided temporary housing to homeless individuals pursuant to an agreement with the Department for Children and Families
3 \$5	3	An agency licensed pursuant to 26 V.S.A _ 3172 that provides security services, as defined in 26 V.S.A 3151, to another covered employer
39 \$83	39	An ambulance service or first responder service as defined in 24 V.S.A2651
22 \$1,75	22	An assisted living residence as defined in 33 V.S.A7102
3 \$1	3	An operator of a privately owned water pollution abatement and control facility
41 \$6,21	41	A nursing home as defined in 33 V.S.A7102
24 \$5,66	24	A pharmacy
11 \$64	11	A program licensed by the Department for Children and Families as a residential treatment program
115 \$4,75	115	A provider of necessities and services to vulnerable or disadvantaged populations
65 \$3,04	65	A residential care home as defined in 33 V.S.A7102
312 \$13,30	312	A retailer identified as essential in Sec. 6, paragraphs f and h of Addendum 6 to Executive Order 01-20 (hardware stores and retail serving basic human needs such as grocery stores, pharmacies, and other retail that sells food, beverage, animal feed and essential supplies).
12 \$33	12	A therapeutic community residence as defined in 33 V.S.A7102
55 \$1,23	55	A trash collection, waste management, or septic service
4 \$22	4	A traveling nurse agency or other business whose employees provide temporary or contract nursing services to or on behalf of an eligible covered employer during the eligible period
1 \$	1	A vocational rehabilitation service provider
85 \$2,69	85	A wholesale distributor making deliveries to a grocery store, pharmacy or eligible essential retailer
1 \$4,42	1	Fiscal agent for the employers of the independent direct support providers
4 14	4	Therapy Provider contracted by a home health agency (as defined in 33 V.S.A 6302) or a nursing home (as defined in 33 V.S.A 7102) during the eligible period



Agency of Human Services – CRF Legislative Appropriations, cont.

Act/Section	Dollar Amount/Description	Status
Act 136/Sec. 7 Act 154/ Sec. B.1121 JFC 11/5/2020	\$275,000,000 originally appropriated to AHS for establishing the Health Care Provider Stabilization Grant Program. \$156,427,182 is available for awards. See next slide for appropriation adjustments. • Lists out eligible providers • Requirement for outreach and notice to providers	 ✓ Developed a salesforce application ✓ Administered in two rounds, third round specific to DAs/SSAS in process ✓ Program is in the process of finalizing – estimates subject to change

- Vermont has a goal of health care system financial stability
- The priority is to preserve Vermonters' access to health care services during and after the COVID-19 emergency
 - Buffering providers from financial instability as a result of COVID-19
 - Identifying and assisting providers in financial distress
- A broad array of health care and human service providers are eligible for the program spanning self-employed practitioners to peer services providers to hospitals.



Appropriation History – total for HC Stabilization = \$156.4M

\$	275,000,000	Act 136		
\$	(27,500,000)	Adjusted by Act 154		
\$	247,500,000	Act 154 Balance		
\$	(3,000,000)	testing		
\$	(2,000,000)	ems workforce stabilization		
\$	(3,000,000)	DAs/SSAs - Round 3		
\$	(750,000)	VDH Disparities (including AOA Equity Dashboard)		
\$	238,750,000			
\$	(78,142,818)	JFC reallocation - 11/5/20		
\$	(3,500,000)	Testing - JFC - 11/5/2020		
\$	(680,000)	Administrative Costs (JFC - 10/22/20)		
Ś	156 /127 182	adjusted available for HCP Stabilization		



Process

- Online application via Salesforce, similar to other programs across state government
- Needs-based assessment
 - Fiscal impacts of business disruption for Medicaid, Medicare, commercial and private payers – lost revenue
 - Increased expenses
 - Mitigating actions to control costs
 - Previous state and federal funding awards and future federal allocations will be considered
 - Designed to prevent funding duplication
- FEMA Funding for Eligible Providers
- Labor intensive review process requires careful review, validation and quality control
- Outreach webinars, online form, 2nd cycle call center
- Program details https://dvha.vermont.gov/health-care-provider-stabilization-grant-program.
- Grant funds will be expended by December 30, 2020.
- Grants are subject to the requirements of Single Audit found at 2 CFR §200 Subpart F.



AHS Administered Two Application Cycles

Cycle I:

Application opened on July 17 and deadline was August 15 - for the time period March 1, 2020 – June 15, 2020

351 applications received, 78% of these had not received prior relief

\$87,007,181.66 in awards

\$85,118,535.21 issued by AHS via Salesforce application and VISION to 190 providers

\$1,888,646.51 issued by ACCD through the Economic Recovery program and reimbursed by AHS

Based upon North American Industry Classification System (NAICS) codes

Legislative Report on Cycle 1 - https://legislature.vermont.gov/assets/Legislative-Reports/H.965 | Health-Care-Provider-Stabilization-Grant-Program Progress-Report-20-October-2020 FINAL.pdf

Cycle II:

Application opened on October 19 and deadline was November 6, 2020 - for the time period March 1, 2020 – September 15, 2020, was reopened from 11/17/20 to 11/24 to finalize applications in process

Eligibility period aligns with FEMA deadlines

272 applications received

\$58,695,286 in awards

\$57,898,345 issued by AHS via Salesforce application and VISION to 128 providers

\$796,940.00 issued by ACCD through the Economic Recovery program and paid by AHS

Legislative Report on Cycle 1 and Cycle 2 will be submitted on January 15, 2021

"Cycle III" – per Act 154, specific to Designated & Specialized Service Agencies - in process

Emerging issue - extraordinary financial relief needed for active COVID outbreaks



Health Care Provider Stabilization Award Amounts by Provider Type

Sum of Award Amount	Cyc	le 1 - Sum of	Сус	cle 2 - Sum of	Total
Provider Type	Α	ward Amount	Α	ward Amount	Awards
Transfers/Payments to ACCD	\$	1,888,647	\$	796,940	\$ 2,685,587
Acupuncturists	\$	248,212	\$	98,633	\$ 346,845
Alcohol and Drug Abuse Counselors	\$	526,945			\$ 526,945
Allied Mental Health			\$	7,272	\$ 7,272
Ambulance providers	\$	92,601	\$	6,810	\$ 99,411
Ambulatory Surgical Centers	\$	755,051	\$	420,107	\$ 1,175,158
Applied Behavior Analysis	\$	6,770	\$	1,232,675	\$ 1,239,445
Chiropractic	\$	452,447	\$	382,630	\$ 835,077
Dentist	\$	8,693,873	\$	3,924,643	\$ 12,618,516
Designated and Specialized Service Agencies	\$	332,978	\$	5,533,365	\$ 5,866,343
Dieticians	\$	9,515			\$ 9,515
Hospitals	\$	66,901,947	\$	38,417,348	\$ 105,319,295
Naturopathic physicians,	\$	26,036			\$ 26,036
Nursing Homes	\$	1,563,594	\$	4,870,740	\$ 6,434,334
Occupational Therapy	\$	899			\$ 899
Optometry	\$	609,035	\$	467,337	\$ 1,076,372
Osteopathic Physicians			\$	259,067	\$ 259,067
Other	\$	891,861	\$	1,250,910	\$ 2,142,771
Peer Support Services	\$	31,164	\$	24,425	\$ 55,589
Physical Therapists	\$	1,088,858	\$	284,958	\$ 1,373,816
Physicians	\$	2,373,256	\$	75,902	\$ 2,449,158
Primary Care Practices	\$	80,717	\$	208,792	\$ 289,509
Private non-medical institutions	\$	310,495	\$	215,216	\$ 525,711
Psychological Examiners	\$	87,616	\$	20,061	\$ 107,678
Rural Health Clinics	\$	34,666			\$ 34,666
Social Workers			\$	27,443	\$ 27,443
Speech-Language Pathologist			\$	19,658	\$ 19,658
Substance Use Disorder Treatment Providers			\$	150,352	\$ 150,352
Grand Total	\$	87,007,182	\$	58,695,286	\$ 145,702,467



Health Care Provider Stabilization Cycle 1 Award Counts by Provider Type

Count of Award Amount	Cycle 1	Cycle 2	Total
Provider Type	Award Count	Award Count	Awards
Acupuncturists	15	6	21
Alcohol and Drug Abuse Counselors	1	-	1
Allied Mental Health	-	2	2
Ambulance providers	4	2	6
Ambulatory Surgical Centers	2	1	3
Applied Behavior Analysis	1	1	2
Chiropractic	18	10	28
Dentist	54	45	99
Designated and Specialized Service Agencies	1	8	9
Dieticians	1	-	1
Hospitals	7	2	9
Naturopathic physicians,	4	-	4
Nursing Homes	7	11	18
Occupational Therapy	1	-	1
Optometry	9	5	14
Osteopathic Physicians	-	2	2
Other	11	10	21
Peer Support Services	1	1	2
Physical Therapists	20	7	27
Physicians	23	5	28
Primary Care Practices	3	2	5
Private non-medical institutions	1	2	3
Psychological Examiners	5	2	7
Rural Health Clinics	1	-	1
Social Workers	_	2	2
Speech-Language Pathologist	-	1	1
Substance Use Disorder Treatment Providers	-	1	1
Grand Total	190	128	318



Health Care Provider Stabilization Hospital Awards

	Cycle One	Cycle Two
Hospital	AHS Payout	AHS Payout
PORTER HOSPITAL INC	\$ 1,277,904.00	\$ -
UNIVERSITY OF VERMONT MEDICAL CTR	\$ 31,999,014.48	\$ 37,365,716.74
GIFFORD MEMORIAL HOSPITAL INC	\$ 855,939.41	\$ -
Brattleboro Memorial Hospital	\$ -	\$ 1,051,631.42
SOUTHWESTERN VERMONT MEDICAL CENTER	\$ 6,457,919.57	\$ -
NORTHWESTERN MEDICAL CENTER INC	\$ 5,229,322.18	\$ -
CENTRAL VERMONT MEDICAL CENTER INC	\$ 7,990,772.37	\$ -
The Rutland Hospital, Inc.	\$ 13,091,074.59	\$ -
Totals	\$ 66,901,946.60	\$ 38,417,348.16



Audit by State Auditor's Office

- Entrance conference on January 14, 2021;
- Preliminary Objectives:
 - To assess whether and how the Agency of Human Services ensured that only those providers meeting state and federal requirements received payments under the HCS Grant Program; and
 - To determine whether selected payments made to providers under the HCS Grant Program were supported and did not duplicate payments made under other government COVID-19 programs.



Department of Corrections – CRF Legislative Appropriations

Act/Section	Dollar Amount/Description	Status
Act 109/Sec. 36(8) JFC – 11/20/20	\$600,000 for changes in community supervision and programming	✓ \$410,000 reverted because of timeline issues
Act 120/Sec. A.49(10) JFC – 11/20/20 JFC – 12/7/20	\$2,500,000 – including: • \$760,000 for temperature scanners, PPE, etc. • \$700,000 for technology upgrades due to COVID (WiFi in facilities, Community HS of Vermont) • \$363,000 to CJCs • \$350,000 for rental housing and supporting program capacity • \$327,000 to Vermont Network Against Domestic Violence	 \$788,000 was reverted due to timing issues: VT Network Against Domestic Violence CJCs Technology upgrades Purchased x-ray body scanners, funding for CJCs and domestic violence prevention, and rental housing support.



Department for Children & Families – CRF Legislative Appropriations

Act/Section	Dollar Amount/Description	Status
Act 120/Sec. A.49(13) JFC 11/5/2020	\$1,400,000 to the Office of Economic Opportunity to grant to the Community Action Agencies + \$1,000,000 approved by JFC on 11/5/2020 • To be used for the Economic Micro Business Recovery Assistance for COVID-19 Epidemic (EMBRACE) to assist the most disadvantaged Vermont microbusiness owners impacted by closures	 ✓ Grant executed with BROC Community Action – on behalf of 5 Community Action Agencies ✓ BROC administered – micro-business applicants applied thru BROC ✓ \$2.1M for grants, \$300K for counseling support ✓ Issued roughly 550 grants ✓ First come, first served ✓ \$2,500 to \$5,000 awards
Act 136/Sec. 11	\$4,700,000 for distribution to the Vermont Foodbank • Purpose of addressing food insecurity throughout Vermont, including purchasing more food and necessities (such as diapers)	 ✓ Grant executed ✓ VT Foodbank will grant funds to Network Partner Food shelves and meal sites, along with other partners ✓ Paid out and encumbered \$4.6M thru 12/30/20 ✓ Paid out and encumbered \$4.7M thru 12/30/20
Act 136/Sec. 14 JFC 11/5/2020	\$12,000,000 + \$6,946,000 to DCF to provide: • Additional restart grants to child care, summer camps, and afterschool programs • Support to PCCs for costs incurred • CIS telehealth training	 Application process for child care programs, Parent Child Centers, and CIS Fiscal Agents for Operational Relief Grant Program in August 2020. Expended \$16.78M in total for the appropriation to date Workforce Stabilization program spent \$3.98M of the appropriation.



Department for Children & Families – CRF Legislative Appropriations

Act/Section	Dollar Amount/Description	Status
Act 137/Sec. 12	\$16,000,000 to DCF for programs and services that support safe, stabling housing opportunities for those experiencing homelessness as a result of COVID-19	 Program underway Motel vouchers as bridge Expand VT rental subsidy Expanded essential services to rehouse Paid out and encumbered \$10.2M thru 12/30/20 Anticipate using \$5.8M to continue non-congregate FEMA program using thru 6/30/21 – including support services



Department of Disabilities, Aging and Independent Living – CRF Legislative Appropriations

Act/Section	Dollar Amount/Description	Status
Act 120/Sec. A.49(14)	\$100,000 to be granted to Vermont Association for the Blind and Visually Impaired • For technology training program for older Vermonters	✓ Grant executed✓ Paid out and encumbered\$100,000 thru 12/30/20
Act 120/Sec. A.49(15) Act 154/Sec. B.1101.2 (5)	\$2,450,000 + \$2,000,000 - Adult Day Providers • First distribution of funds shall be distributed by July 20, 2020 to each program • Second distribution of funds shall be distributed by October 10, 2020 • Legislation requires that funds are used prior to 12/20/20	Grants executed Payments issued Reconciliation of expenditures due in mid-January
Act 154/Sec. B.1101.2 (6) JFC – 8/11/20	\$565,000 + \$600,000 – Meals on Wheels • Support the program and maintain reimbursement rates	✓ Grant executed✓ Paid out and encumbered\$1,165,000 thru 12/30/20



Department of Mental Health – CRF Legislative Appropriations

Act/Section	Dollar Amount/Description	Status
Act 136/Sec. 9 JFC – 7/29/2020	Intent language for DMH to utilize funds for suicide prevention initiatives to the greatest extent possible if they do not receive the SAMHSA grant	 ✓ July 29th JFC approved \$500K of CRF. ✓ Ongoing
Act 136/Sec. 10	\$200,000 for purposes of granting to Pathways to operate its peer warm line 24 hours/day until Dec. 30, 2020	 ✓ Grant executed ✓ Paid out and encumbered \$200,000 thru 12/30/20



Department of Health – CRF Legislative Appropriations

Act/Section	Dollar Amount/Description	Status
Act 136/Sec. 8 Act 154/Sec. B.1121 7 (d) (4)	\$500,000 +\$650,000 for Addressing COVID-19 Related Health Disparities • VDH must provide monies to community organizations to assist in meeting essential needs for food, shelter, health care, and emotional support – items not covered by the ELC grant • \$100K to AOA for Equity Dashboard	 ✓ VDH established Health Equity and Community Engagement Team to consider needs of vulnerable Vermonters ✓ VDH has issued awards to a variety of providers ✓ https://legislature.vermont.gov/assets/Legislative-Reports/COVID-Health-Disparities-Report 082020.pdf
Act 137/Sec. 17	\$800,000 to go directly to the Vermont Program for Quality in Health Care • Purpose is to support equitable access to telehealth services by providing outreach and educational opportunities	✓ Grant executed✓ Paid out and encumbered\$800,000 thru 12/30/20
Act 154/Sec. B.1101.2 (8)	\$60,000 to go directly to the Vermont Recovery Network • Divide equally and grant directly to each of the 12 recovery centers for reimbursement of expenditures incurred due to COVID-19 pandemic	 ✓ Grants executed ✓ Paid out and encumbered \$60,000 thru 12/30/20



COVID-19 Response & Relief DMH/DAIL

January 14th, 2021



Topics

- Overview: Purpose of Relief Efforts
- Overview of CRF for Designated Agency/Specialized Service Agency Providers
 - Early Relief
 - Healthcare Stabilization
 - Round 1
 - Round 2
 - Round 3 (DA/SSA only)
- Other CRF initiatives DMH
- Other Networks CRF and Supports DAIL
- Impacts & Opportunities



Overview –

Why it Matters – System of Care Needs and Impact

- As Vermont healthcare providers have responded to COVID-19 across Vermont it has been critical to ensure the fiscal stability of essential providers across the state of Vermont and to ensure that critical services for vulnerable Vermonter's continue.
- The Department of Mental Health (DMH) and the Department of Aging and Independent Living (DAIL) have prioritized and worked diligently to ensure that Vermont's safety net for vulnerable Vermonter's remain intact during COVID19 by having a strong and stable:
 - Mental health and Developmental Disability services system
 - Long term services and supports system
 - Older Vermonter service system
- This network of services and staff is essential to keeping our community based human service system intact, without a focus on stability throughout the pandemic, these systems would have been at risk of collapse and would have placed direct pressure on emergency departments, hospitals and public safety



Overview – Early Financial Relief DA/SSA

- Phase One: Implement fiscal assistance and strategies within available resources Completed March 2020
 - Under the current MH Case Rate Model DA's/SSA/s are paid monthly for rate services using prospective payments monthly
 - Prospective MH Case Rate reconciliation can be adjusted to reflect practice/services deliver changes due to COVID19
 - Telephonic services approved for Medicaid billing in both DMH and DAIL
 - Payment for EMR implementation expedited
 - DAIL implemented flexibility within billing, enabling agencies to bill a consistent daily rate, monthly, in order to create stability for providers



Overview – Early Financial Relief DA/SSA

- Phase Two: Evaluate additions fiscal and programmatic pressure for the DA/SSA network related to COVI19 and provide financial relief – Completed June 2020
 - \$7.6M provided specifically for Hazard Pay/Incentive Pay

 This included Family Difficulty of Care Stipends and Stipends for Shared Living Providers
 - \$3.2M provided for additional COVID19 relief

Total Early Relief = \$10.8M

- Funds provided to cover prevention supplies, IT/Telehealth expenses, Hazard pay, other COVID-19
 expenditures and revenue loss
- DAIL enabled conversion of underutilized respite dollars for individuals, families and Shared Living Providers



Overview – Healthcare Stabilization DA/SSA

- Healthcare Stabilization Round 1 & 2
 - Time Period
 - Cycle 1: March 1st June 15th
 - Cycle 2: March 1st September 15th
 - Funds provided to cover prevention supplies, IT/Telehealth expenses, Hazard pay, other COVID-19 expenditures and revenue loss
 - Round 1 &2 estimated award to DA/SSA = \$5.8M
- Healthcare Stabilization Round 3 (DA & SSA only)
 - The Designated Agencies / Specialized Service Agencies were authorized by the Legislature for \$3M of CRF to cover COVID-19-related revenue losses and expenses for Sept 15, 2020 through December 31st, 2020.
 - The \$3M has the same fund source (CRF) and has the same requirements for authorized use of funds
 - Funds provided to cover prevention supplies, IT/Telehealth expenses, Hazard pay, other COVID-19 expenditures and revenue loss
 - Status: In process, final application due January 22nd
- Second round of Family Difficulty of Care Stipends (DAIL)



Overview – Total CRF DA/SSA

Early Relief	\$10.8M
Healthcare Stabilization Round 1 & 2	Estimated \$5.8M
Healthcare Stabilization Round 3	Estimated \$3M
Total	\$19.7M



Other CRF Initiatives - DMH

Suicide Prevention – Total \$500K

• Strategy 1: Expand ZERO SUICIDE statewide in Vermont \$300,000

• Strategy 2: Expand Vermont's National Suicide Prevention Lifeline \$70,000

• Strategy 3: Develop of targeted suicide prevention resources that are culturally informed to reach identified

at-risk target groups during COVID \$30,000

• Strategy 4: Expand Mental Health First Aid Training \$50,000

• Strategy 5: Expand Elder Care Clinician programs \$50,000

Pathways Warmline - \$200K



Network Supports- DAIL

Adult Day Programs:

- Health Care Stabilization: \$769,451: April- June, by application
- CRF: \$2,500,000 July-September
- CRF: \$2,000,000 October-December

Funding was designed to cover operating expenses, as identified by the providers, to enable them to remain viable while they were unable to operate.

Area Agencies on Aging:

In order to supplement additional funding through Title IIIC, OAA:

- CRF: \$600,000 (April- June -through AAAs, to Senior Ctrs and Meal Sites to address the increased costs to prepare meals beyond enhanced rates)
- CRF: \$565,000 (Sept-Dec -through AAAs to enable them to continue with enhanced rates for meal prep- Sept-December) VER

Network Supports- DAIL

Skilled Nursing Facilities and Long Term Care Facilities

- CRF: \$1,447,547 (SNF-April- June Emergency Financial Relief- Increased costs, PPE, staffing, loss of revenue)
- Health Care Stabilization: by application

Home Health Agencies

Health Care Stabilization: by application

LTC Facilities Outbreak Response

• CRF: \$332,000 (5 residential care homes costs for supplemental staff, PPE, supplies, meals, hazard pay)

AND Emergency Staffing Pool support to facilities in outbreak



Mental Health COVID19 Impacts

- Social distancing/quarantine
- Remote learning
- Access gaps
- Co-occurring
- Overall well-being and wellness
- Workforce
- Service delivery and quality



Mental Health Opportunities

Systems Opportunities

- Telehealth
- Continued flexibility through MH Payment Reform

Current Federal Funding/Grants

- FEMA Crisis Counseling Grant CovidSupportVT
- SAMHSA Grant \$1M
 - Expansion of Emergency Services & Peer Services
- CDC 5 Year Comprehensive Suicide Prevention Grants
 - DMH/VDH received 5-year \$3.9M Comprehensive Suicide Prevention Grant

Anticipated Federal Funding/Grants

- Federal Relief Mental health services will receive funds from recent Congressional action on COVID relief
 - Increases to Mental Health Services Block Grant
 - Increases for Suicide Prevention Programs
 - Increases for Project AWARE



DAIL COVID19 Impacts

 Isolation- physical and emotional risks for both Older Vermonters and Vermonters with Disabilities

Access to necessary services

Limited access to community

Impact to employment: current jobs and new opportunities

Impact to system flow in relation to levels of care



DAIL COVID19 Opportunities

System Opportunities:

Telehealth

Billing Flexibilities

On-line access and activities

Communication Enhancement/Stakeholder Engagement

Federal Funding Opportunities:

Additional Funding through Title 3C for nutrition programs- TBD

Increased Money Follows the Person funding for transitions in CFC- TBD

Anticipated Funding for Adult Protective Services - TBD



Questions

