



Federal COVID-19 Funding Checklist for Health Systems

Current as of **February 18, 2022, 8:30 a.m. EST**
UPDATED INFORMATION IN RED/GREEN

This document outlines the major financial opportunities related to COVID-19 contained in the Consolidated Appropriations Act (P.L. 116-260) and the American Rescue Plan (P.L. 117-2). Funding from the previous COVID-19 relief bills enacted in 2020 is identified on our prior versions of the Federal Regulatory, Statutory COVID-19 Checklist for Health Systems. For additional information contact any of the following Strategic Health Care senior staff: paul.lee@shcare.net; devon.seibert-bailey@shcare.net; diane.turpin@shcare.net; david.introcaso@shcare.net or 202-266-2600.

REMINDER – STATE AND LOCAL GOVERNMENTS RECEIVED FEDERAL FUNDS THAT MAY BE HELPFUL TO HEALTH CARE SYSTEMS. SEE THE STATE AND LOCAL GOVERNMENT INFO ON PAGES 3-4 FOR MORE INFORMATION.

OPEN APPLICATION PERIODS: more details in the chart below

HRSA has \$19.2 million in grants through the Teaching Health Center Graduate Medical Education (THCGME) Program to support and expand training of primary care residents in rural and underserved communities. Click [here](#) for the press release and [here](#) for grant information. Applications due March 31, 2022.

\$13 million in funding to increase access to behavioral health care services and address health inequities in rural America, including through evidence-based, trauma-informed treatment for substance use disorder. Awards of up to \$500,000 will be made through the Rural Communities Opioid Response Program (RCORP) – Behavioral Health Care Support. Click [here](#) for press release, [here](#) for grant information. Applications due April 19, 2022.

Approximately \$48 million in grants available for the Rural Public Health Workforce Training Network Program. Funding to establish networks to develop formal training/certification programs to help professionals in the following workforce training tracks: Track #1 - Community Health Support Track #2 - Health IT and/or Telehealth Technical Support Track #3 - Community Para-Medicine Track #4 - Case Management Staff and/or Respiratory Therapists. Click [here](#) for details and [here](#) for press release. Applications due March 18, 2022.

\$100 million available for state-run programs that support, recruit, and retain primary care clinicians who live and work in underserved communities. The program is open to all states and HRSA estimates that it will make up to 50 awards of up to \$1 million per year, over the program's four-year project period. States are to apply by April 8, 2022, with a project start date of September 1, 2022. Click [here](#) for the press release and [here](#) for eligibility and application requirements.

COVID-19 Coverage Assistance Fund (CAF) – Providers may apply for reimbursement for administering vaccines to patients enrolled in health plans that do not cover vaccines or cover them with patient cost sharing. Click [here](#) for more details and see chart below.

Eligible consumers (such as patients with telehealth needs) may apply for the Emergency Broadband Benefit program beginning on May 12, 2021. Click [here](#) for details, [here](#) for a fact sheet. The program ends when the fund runs out of money or six months after the PHE ends, whichever is sooner.

For the Consolidated Appropriations Act – click [here](#); click [here](#) for the SHC summary. This Act also extends the deadline to December 31, 2021 for state and local governments to spend funding from the Coronavirus Aid, Relief, and Economic Security (CARES) Act Coronavirus Relief Fund.

For the American Rescue Plan – click [here](#); click [here](#) for Title-by-Title summary; click [here](#) for the SHC summary on the new fund for rural providers.

\$700 billion of \$1 trillion in the American Rescue Plan disbursed by the Treasury Department in six months – click [here](#) for press release and [here](#) for Treasury's progress report. Click [here](#) for highlights of how some of the funds are being used.

In addition to the itemized health care funding in the chart below, state and local governments will receive the following amounts which may ultimately flow to providers:

- \$350 billion to help states, counties, cities and tribal governments cover increased expenditures, replenish lost revenue and mitigate economic harm from the COVID-19 pandemic;
 - Funds may be used to cover costs incurred by December 31, 2024;
 - Funds to be distributed in 2 tranches, with 50% to be delivered no later than 60 days from enactment (March 11, 2021), and the remainder no earlier than 1 year later;
 - States have to distribute funds to smaller towns within 30 days of receiving a payment from the department or pay back any undistributed funds;
- \$195.3 billion to states and the District of Columbia:
 - \$25.5 billion equally divided to provide each state a minimum of \$500 million;
 - \$169 billion allocated based on the states' share of unemployed workers over a 3-month period from October - December 2020.
- \$130.2 billion to local governments

- \$65.1 billion for counties
- \$45.6 billion for metropolitan cities
- \$19.5 billion for towns with fewer than 50,000 people
- \$3 billion released for investment in communities, with 6 funding opportunities; click [here](#) for press release; click [here](#) for fact sheet (7/22/)
- \$4.5 billion to US territories
- \$20 billion to tribal governments
- \$10 billion for a Coronavirus Capital Projects Fund to carry out projects to support work, education and health monitoring, including remote options, in response to the PHE. Click [here](#) for more details. Treasury will issue more guidance before the application period opens this summer.
- The Treasury Department portal for state and local governments to request funding is now open. Click [here](#) for the website, [here](#) for the Fact Sheet and click [here](#) for FAQs updated 7/19. Click [here](#) for the final allocations for state, [here](#) for counties and [here](#) for metropolitan cities. Click [here](#) to see if your state receives the funding in one or two tranches. Click [here](#) for the Interim Final Rule – public health uses are discussed on page 10. The non-inclusive list of permissible uses includes COVID-19 mitigation and prevention; medical expenses, behavioral health care, public health and safety staff, improvements to design and execution of health and public health programs and addressing disparities in public health outcomes. In addition to responding to the public health emergency and its negative economic impacts funds may be used to provide premium pay to essential workers; to provide government services to the extent of eligible governments’ revenue losses; and to make necessary water, sewer and broadband infrastructure investments. Click [here](#) for a quick reference guide on the allowable uses of the funds. **NOTE THAT STATES MAY USE THESE FUNDS IN A VARIETY OF WAYS THAT COULD BENEFIT HEALTH SYSTEMS INCLUDING PREMIUM PAY FOR ESSENTIAL WORKERS, COVID-19 MITIGATION EFFORTS, MEDICAL EXPENSES, BEHAVIORAL HEALTH CARE, AND CERTAIN PUBLIC HEALTH AND SAFETY STAFF. CONTACT YOUR STATE GOVERNMENT FOR DETAILS.**
- States are eligible for a temporary 10 percentage point increase to the FMAP for certain Medicaid home and community-based services (HCBS) from April 1, 2021 through March 31, 2022. States must meet certain program eligibility requirements defined in the guidance. Click [here](#) for the press release and [here](#) for the guidance.
- \$20 million in funding to support State-based health care marketplaces – states can apply for funds by July 20 to help modernize or update their systems, programs, or technology to comply with federal Marketplace requirements. Click [here](#) for the press release.
- The Treasury Department issued a final rule regarding the use of the \$350 billion appropriated for state, local and tribal governments. Treasury distributed \$245 billion in 2021, with the remainder to be distributed after March 11, 2022. Click [here](#) to see if your state funds are in two tranches. The final rule gives more flexibility in how the money can be spent. It expands support for public-sector hiring and makes it easier for localities to provide premium pay for essential workers and allows certain capital expenditures to support public health. Click [here](#) for the Final Rule (Executive Summary, page 6); details re capital expenditures, pages 60, 190), [here](#) for Treasury’s Overview and [here](#) for the Press Release. Pages 14-15 of the Overview give examples of how the funds may be used to respond to the public health emergency, including COVID-19 mitigation and prevention, medical expenses, and behavioral health care. The rule is effective April 1, 2022, although recipients may take advantage of the flexibilities now. Click [here](#) for a slide presentation on the Final Rule. Click [here](#) for the Compliance Statement. Click [here](#) for the analysis cited by Treasury on how states have used the funds so far. It is striking that 8 percent of the money has

gone to health care; 30 states spent these funds on public health interventions, mental health services, support for health care organizations and other health care.

- FEMA updates resources available for healthcare facilities: click [here](#) for details on accessing healthcare facility expansion assistance, [here](#) for a FEMA Advisory on federal support for surge staffing, expanding hospital capacity, vaccinations and testing. Regional FEMA and HHS offices will work with state and local governments to support healthcare facilities. Click [here](#) for the White House Fact Sheet and [here](#) for memorandum on additional resources which include deploying FEMA personnel to Michigan, Indiana, Wisconsin, Arizona, New Hampshire and Vermont, activating additional FEMA response teams to increase hospital capacity and mobilizing military personnel to hospitals as needed in January and February.
- Federal agencies have obligated close to 90% of the COVID-19 funds, with payments to recipients lagging a bit behind, according to the Treasury Department. Click [here](#) for a compilation of federal COVID-19 spending – total spending by budget category and award spending by recipient in each state.
- Click [here](#) for a new resource – the Local Government ARP Investment tracker – developed by Brookings Metro, the National Association of Counties and the National League of Cities. The tracker offers insight into how various cities are utilizing ARP funds.

For general overviews of COVID-19 funding by government agency:

HHS – For a great visual of all the funding by each appropriations bill through 2020, total amounts awarded to each state and beneficiaries in each state - click [here](#)

CDC - Financial Resources Webpage - click [here](#)

COVID-19 State, Tribal, Local and Territorial Funding Update – click [here](#)

COVID-19 General Funding and Grants FAQs – click [here](#)

Federal Office of Rural Health Policy - Overview of COVID-19 Funding - click [here](#)

Targeted Health Care Funding for Providers

Funding, Grants, and Loans				
What is it?	What does it do?	Key Points	Entities Effected	Status
	Additional grants for hospital and health care providers to be reimbursed for health care related expenses or lost	In the American Rescue Plan – Sec. 9911	Rural hospital and health care providers.	Click here for press release

<p>\$8.5 billion in grants for rural health care providers; roughly \$1 billion remaining</p>	<p>revenue incurred in 2020 directly attributable to the COVID-19 PHE.</p> <p>On 5/3 HRSA announced a new program, the Coverage Assistance Fund, to cover costs of administering vaccines to patients enrolled in health plans that do not cover vaccines or cover them with patient cost sharing. Providers are to apply through a portal to be reimbursed at Medicare rates. CAF, funded through the Provider Relief Fund, will accept claims dated on or after December 14, 2020. Click here for the press release and here for more details, including the portal, fact sheet and FAQs.</p>	<p>Uses same definitions of health care related expenses/lost revenue as the Provider Relief Fund.</p> <p>Requires providers to apply for reimbursement through a portal.</p> <p>To be administered separately from the Provider Relief Fund.</p>	<p>Click here for detailed memo from SHC.</p>	<p>8/13/21 stating information will be available soon.</p> <p>Application portal opened on 9/29/21, closes on 10/26/21. Click here for application details, provider eligibility and payment calculation methodology. Click here for 9/10/21 press release. Click here for FAQs (updated 10/26/21) Distribution began 11/23/21. Click here for press</p>
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				release, <u>here</u> for state breakdown and <u>here</u> for public dataset by providers. \$1 billion is expected to be released in early 2022.
\$3 billion in additional grants for hospital and health care providers	Reimbursements for health care-related expenses or lost revenue directly attributable to the PHE.	In the Consolidated Appropriations Act - Division M Title III	Acute Care Facilities Post-Acute Physicians	Part of the Provider Relief Fund distribution via HRSA

<p>Roughly \$6 billion remaining in Provider Relief Fund</p>	<p>Estimate of funds awaiting distribution for health care-related or lost revenue directly attributable to the PHE. Includes uninsured relief fund payment. Click here for press release regarding payment of over 5 million claims to health care providers for administering COVID-19 vaccines to uninsured individuals.</p> <p>\$4.8 billion of the remaining funds to be allocated for COVID-19 testing of the uninsured.</p> <p>CMS will pay for Pfizer booster shots – click here for press release and here for additional info (9/24/21)</p>	<p>Initially established in the CARES Act</p> <p>Click here for revised FAQs (6/11/21) Click here for the revised post-payment reporting requirements (6/11/21) Click here for the PRF Reporting Portal (7/1/21) Additional resources can be found on PRF Reporting Webpage, PRF Reporting Portal User Guide, Stakeholder One-pager, and Stakeholder Toolkit Click here for FAQs (7/15/21) Click here for PRF distributions Click here for PRF distributions by state; and Click here for complete database of recipients Click here for HRSA uninsured program Click here for the 5/25 press release.</p> <p>Note that the PRF has been moved from the HHS website to HRSA. Click here for the new PRF site. Click here for a fact sheet on using the PRF for personnel expenses; here for a guide on lost revenues; here for a reporting resource guide; and here for a portal user guide. (8/21)</p> <p>Click here for FAQs (updated 8/31/21) Click here for FAQs prepared by CRS (9/15/21)</p> <p>Click here for FAQs (updated 9/29/21) Click here for portal FAQs (updated 9/17/21)</p> <p>60-day grace period for Reporting Period 1 runs from 10/1/21 through 11/30/21– click here (9/10/21)</p> <p>Click here for reporting and auditing requirements (9/10/21)</p>	<p>Acute Care Facilities Post-Acute Physicians SNFs Nursing Homes RHCs Tribal hospitals, clinics, and urban health centers</p>	<p>Part of the Provider Relief Fund distribution via HRSA</p> <p>Application portal for \$17 billion in PRF opened on 9/29/21 and will close on 10/26/21 (the portal will also be used to apply for the \$8.5 billion in rural funding for a total of \$25.5 billion to be released). Click here for application details. Click here for 9/10/21 press release. Click here for FAQs</p>
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		<p>Click here for the payment calculation methodology used for Phase 3 distributions (9/10/21) This information will be helpful once HRSA releases information on the reconsideration process. Note that HRSA established an email address - PRFReconsiderations@hrsa.gov.</p> <p>Click here for new payment reconsideration process for Phase 3 distributions and here for FAQs.(9/29/21) Requests for reconsideration must be submitted by 11/12/21.</p> <p>Click here for the FAQs updated 12/9/21.</p> <p>Unused funds from Reporting Period 1 must be returned by December 31, 2021 at 11:59 PM ET. Click here for HRSA fact sheet.</p> <p>The Portal opened for Reporting Period 2 on January 1, 2022. This portal is for providers who received one or more Provider Relief Fund payments exceeding \$10,000, in aggregate, during a Payment Received Period.</p> <p>Click here for the FAQs updated 1/27/22.</p> <p>The reconsideration window for Phase 4 PRF payments and ARP Rural payments opened on February 1 and will remain open until 11:59 PM EST on May 2, 2022. Click here for more information. Click here for FAQs on the PRF reconsideration process.</p>		<p>(updated 10/26/21)</p> <p>Approximate ly \$9 billion in Phase 4 released the week of 12/14/21. The average payment for small providers is \$58,000, for medium providers is \$289,000, and for large providers is \$1.7 million. (12/14/21) Click here for the press release. Click here for distribution by state. HRSA is still processing the general distribution applications with another \$8 billion distributed at the</p>
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				<p>beginning of 2022. HRSA announced the distribution of \$2 billion beginning 1/25/22, less than the \$8 billion expected. Approximately 82% of all Phase 4 applications have now been processed. Click here for the press release, here for a state-by-state breakdown of all funds released to date and here for a breakdown of the ARP Rural funds.</p>
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<p>\$8.75 billion to CDC for vaccines</p>	<p>Supports federal, state, local, territorial and tribal public health agencies to distribute, administer, monitor, and track coronavirus vaccination to ensure broad-based distribution, access, and vaccine coverage, including:</p> <p>\$4.5 billion for State, local, Territorial, and Tribal Public Health Departments; and</p> <p>\$300 million for a targeted effort to distribute and administer vaccines to high-risk and underserved populations, including racial and ethnic minority populations and rural communities.</p> <p>\$2.1 billion to improve infection prevention and control from COVID-19 and other emerging infections. Click here for CDC press release (9/17/21)</p> <p>Initial awards of \$885 million in October, with \$550 million going to support state-based nursing home and long-term care strike teams. Another \$888 million will be used over several years to support healthcare partners, academic institutions, and other nonprofit partners to develop new prevention interventions and capacities for infection prevention and control</p>	<p>In the Consolidated Appropriations Act</p> <p>CDC provided \$3 billion out of the \$8.75 billion that should be hitting states about now. Click here for a state-by-state breakdown of funds. Click here for the CDC general announcement which includes information about another \$19 billion being made available for testing, tracing, etc.</p>	<p>Funding largely to flow through state and local public health departments</p>	<p>1st payment to states happened in February 2021. Keep tabs on your state and local public health department</p> <p>Click here for Medicaid and CHIP guidance on targeted vaccination and testing. (8/30/21)</p>
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	training, data collection and technical assistance.			
\$8.5 billion to CDC for vaccine activities	<p>Supplemental funding opportunity for state, locality and territorial vaccine distribution grants</p> <p>On 5/13, \$3.4 billion to create a new grant program for new hires in state and local public health departments; also includes \$500 million for school nurses and \$400 million to launch Public Health Americorps, \$245 million for the Epidemic Intelligence Service and \$337 million for the public health laboratory workforce. Click here for the White House statement.</p> <p>\$35 Million for CDC to Improve Diversity in the Public Health Workforce and Ensure Better Capacity to Response to the Needs of Underserved Communities. Click here. (11/10/21)</p>	<p>In the American Rescue Plan – Sec. 2301</p> <p>Funds for CDC to (1) conduct activities to enhance, expand, and improve nationwide COVID–19 vaccine distribution and administration, including activities related to distribution of ancillary medical products and supplies related to vaccines; and (2) provide technical assistance, guidance, and support to, and award grants or cooperative agreements to, State, local, Tribal, and territorial public health departments for enhancement of COVID–19 vaccine distribution and administration capabilities, including— (A) the distribution and administration of vaccines; (B) the establishment and expansion, including staffing support, of community vaccination centers, particularly in underserved areas; (C) the deployment of mobile vaccination units, particularly in underserved areas; (D) information technology, standards-based data, and reporting enhancements, including improvements necessary to support standards-based sharing of data related to vaccine distribution and vaccinations and systems that enhance vaccine safety, effectiveness, and uptake, particularly among underserved populations; (E) facilities enhancements; (F) communication with the public regarding when, where, and how to receive COVID–19 vaccines; and (G) transportation of individuals to facilitate vaccinations, including at community vaccination centers and mobile vaccination units, particularly for underserved populations.</p>	Flows to state, local and territorial public health departments	<p>Keep tabs on your state and local public health department</p> <p>Click here for CDC press release regarding \$400 million for Public Health AmeriCorps to fund 5000 AmeriCorps public health positions. Click here for more on the funding opportunity. Deadline for applications is 11/8/21. Click here for FEMA’s role in</p>

		Sec. 2302 Includes \$1 billion for vaccine confidence activities.		providing testing. (12/27/21)
\$10 billion for vaccines in underserved communities	<p>Includes approximately \$6 billion for community health centers, \$3 billion through the CDC to increase vaccine confidence and \$330 million to invest in community health workers.</p> <p>Includes grants and cooperative agreements for FQHCs and certain qualified entities under sections 4 and 6 of the Native Hawaiian Health Care Improvement Act</p> <p>\$150 million for 100 Health Center Program look-alikes (LALs) – applications due 5/14 - click here for press release, here for list of applicants eligible to apply and here for how to apply</p> <p>\$1 billion to support construction, expansion, alteration, renovation, and other capital improvements to modify, enhance, and expand health care infrastructure at community health centers for an estimated 1,376 awards. Click here for the press release. Applications are due in HRSA's Electronic Handbooks by 5:00 p.m. ET</p>	<p>In the American Rescue Plan – Sec. 2601</p> <p>Click here for the fact sheet and here for HRSA's state-by-state graphic identifying the allocation of funds. For additional details on grant submissions, a webinar and slide deck, click here.</p> <p>Click here for press release.</p> <p>Funds(1) to plan, prepare for, promote, distribute, administer, and track COVID–19 vaccines, and other vaccine-related activities; (2) to detect, diagnose, trace, and monitor COVID–19 infections and related activities necessary to mitigate the spread of COVID–19, including activities related to, and equipment or supplies purchased for, testing, contact tracing, surveillance, mitigation, and treatment of COVID–19; (3) to purchase equipment and supplies to conduct mobile testing or vaccinations for COVID–19, to purchase and maintain mobile vehicles and equipment to conduct such testing or vaccinations, and to hire and train laboratory personnel and other staff to conduct such mobile testing or vaccinations, particularly in medically underserved areas; (4) to establish, expand, and sustain the health care workforce to prevent, prepare for, and respond to COVID– 19,</p>	CHCs, FQHCs	<p>HRSA</p> <p>For construction /renovation funding, apply to HRSA by 5:00 p.m. ET on Thursday, June 24, 2021. Click here for details.</p> <p>Click here for recipients of the LAL awards announced 7/15; click here for the press release.</p> <p>Click here for Native Hawaiian Health Care award recipients (8/13/21)</p>

	<p>on Thursday, June 24, 2021. Click here for the Notice of Funding Opportunity; click here for details, including information on webinars 5/6 and 5/18.</p> <p>On 4/29 HRSA awarded \$32 million to 122 organizations that provide training and technical assistance support to HRSA Health Center Program-supported health centers. Click here for press release with links to awardees.</p> <p>Effective June 8, CMS will pay an additional \$35 for vaccines administered in patients' homes. Click here for details.</p> <p>CMS expands Medicare payments for home COVID-19 vaccinations – click here for press release, here for information on provider requirements and here for payment details and billing codes. (8/24/21)</p>	<p>and to carry out other health workforce-related activities; (5) to modify, enhance, and expand health care services and infrastructure; and (6) to conduct community outreach and education programs activities. Covers expenditures from onset of PHE to the end.</p>		<p>CDC awards \$300 million to support community health workers – click here for press release and here for list of awardees (9/3/21)</p> <p>Click here for state-by-state breakdown of the federally-funded health centers that received nearly \$1 billion to modernize health centers (9/28/21)</p> <p>HRSA awards \$66.5 million to expand</p>
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				<p>community based efforts to increase vaccination (click here for press release) 2/8/22</p> <p>Click here for press release on \$55 million awarded to CHCs to increase virtual health care access to mitigate the impact of COVID-19. (2/14/22)</p>
<p>\$22.4 billion for the Public Health & Social Services Emergency Fund to support testing, contact tracing</p>	<p>Includes funding for other activities to monitor and suppress COVID-19, including reimbursement for health care related expenses or lost revenue attributable to COVID-19.</p> <p>On 5/4, HHS announced \$1 billion for rural COVID-19 response to include:</p> <ul style="list-style-type: none"> \$460 million to more than 4,600 RHCs – up to \$100,000 per RHC-certified clinic site; funds to be issued this summer. On 6/11 	<p>In the Consolidated Appropriations Act – Title III</p> <p>Includes \$2.5 billion for a target effort in high-risk and underserved populations, including racial and ethnic minority populations and rural communities.</p> <p>Includes support for workforce to scale up academic, commercial, public health, and hospital laboratories, and community-based testing sites, mobile testing units, health care facilities, and other entities engaged in COVID–19 testing, and other related activities related to COVID–19 testing.</p>	<p>Funding largely to flow through state and local public health departments</p>	<p>Keep tabs on your state and local public health department</p> <p>Click here for details on the RHC Vaccine Confidence program –</p>

	<p>HRSA announced \$424.7 million distributed - click here for the press release and here for breakdown by state. Another \$35.3 million to be disbursed later this summer.</p> <ul style="list-style-type: none"> • \$398 million to existing SHIP grantees to work with approximately 1,730 small rural hospitals and CAHs (up to \$230,000 per hospital, on COVID-19 testing and mitigation. Funds to be issued later in the year. Click here for the press release. Funds are being distributed – click here for the press release. • \$100 million in grants to eligible RHCs to address health equity gaps through the Rural Health Clinic Vaccine Confidence Program (RHCVC). Click here for details on the RHC Vaccine Confidence program – applications for up to \$50K due June 23. • HRSA is inviting Medicare-certified RHCs to join the new Rural Health Clinic COVID-19 Vaccine Distribution (RHCVD) Program to directly receive 			<p>applications for up to \$50K closed.</p> <p>Click here for \$100 million distribution to RHCs for vaccination outreach. Click here for distribution by state.</p> <p>SHIP grantee funds are being distributed – click here for the press release.</p>
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	<p>vaccines from the Biden Administration. HRSA and CDC will continue to enroll interested RHCs to receive COVID-19 vaccines, the allocation for which is separate from jurisdictions' weekly allocations.</p> <p>Click here for the press release.</p> <p>On 10/14 HHS announced \$100 million is available for state-run programs that support, recruit, and retain primary care clinicians who live and work in underserved communities. The program is open to all states and HRSA estimates that it will make up to 50 awards of up to \$1 million per year, over the program's four-year project period. States are to apply by April 8, 2022, with a project start date of September 1, 2022. Click here for the press release and here for eligibility and application requirements.</p>			
\$7.66 billion for public health workforce expansion	<p>Funding for state, local and territorial public health departments to establish, expand and sustain their public health workforce.</p> <p>\$100 million for Medical Reserve Corps.</p> <p>\$250 million for community-based workforce to increase vaccinations in underserved communities – click here</p>	<p>In the American Rescue Plan – Sec. 2501</p> <p>Funding for costs, including wages and benefits, related to the recruiting, hiring, and training of individuals to serve as case investigators, contact tracers, social support specialists, community health workers, public health nurses, disease intervention specialists, epidemiologists, program managers, laboratory personnel, informaticians, communication and policy experts who are employed by the State, territorial, or local public</p>	Largely state and local public health departments; nonprofit private or public organization with public health expertise	<p>Keep tabs on your state and local public health department.</p> <p>Application for the Community-Based</p>

	<p>for press release, here for details on applying. On 6/14 HRSA announced the first round of funding of \$125 million - Click here for press release and here for awardees. Additional awards expected in July.</p> <p>Another \$121 million awarded to support community-based efforts to increase vaccinations, click here for 7/27 press release and here for list of recipients.</p> <p>\$4.4 billion to surge public health staff for the COVID-19 response. Click here for the White House statement from 5/13.</p> <p>\$80 million to establish a Public Health Informatics & Technology Workforce Development Program – click here for the press release. \$73 million awarded in cooperative agreements – click here for 9/22/21 press release with list of awardees.</p> <p>Three HRSA Workforce Loan Repayment Programs with an additional \$800 million available through ARP. Click here for details. Applications due December 16, 2021 at 7:30 PM ET.</p> <p><u>Eligible clinicians</u> providing primary medical, dental, behavioral health care services, or evidence-based substance</p>	<p>health department involved; or (ii) a nonprofit private or public organization with demonstrated expertise in implementing public health programs and established relationships with such State, territorial, or local public health departments, particularly in medically underserved areas.</p>		<p>Workforce for COVID-19 Vaccine Outreach Program closed.</p> <p>HRSA awards \$77 million to 9 community based organizations to build vaccine confidence and administer vaccines - Click here and here (11/10/21) \$1.5 billion to support the National Health Service Corps, Nurse Corps and Substance Use Disorder Treatment and</p>
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	<p>use disorder treatment can qualify for loan repayment of up to:</p> <ul style="list-style-type: none"> • \$50,000 for the <u>NHSC Loan Repayment Program</u> (NHSC LRP) • \$75,000 for the <u>NHSC Substance Use Disorder Workforce Loan Repayment Program</u> (NHSC SUD Workforce LRP) • 100,000 for the <u>NHSC Rural Community Loan Repayment Program</u> (NHSC Rural Community LRP) <p>\$240 million to expand public health workforce by creating pipeline for 13,000 community health workers from underserved communities – click here. (11/10/21)</p> <p>More than \$140 million to support community-based organization vaccine outreach- click here (11/10/21)</p> <p>The Administration for Community Living is investing \$150 million for its disability and aging networks to increase the public health workforce with disability and aging expertise- click here (11/10/21)</p>		<p>Recovery programs. Click here for White House press release and here for the HHS press release (11/22/21). Click here for info on \$800 million for the National Health Service Corps Loan Repayment Programs. Apply by December 16, 2021 at 7:30 PM ET. Funds are also available for nurses through the Nurse Corps Loan Repayment Program. Click here for details. Deadline is</p>
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	<p>Click here for a CMS graphic of ARP funds spent on home and community-based services. (2/14/22)</p>			<p>January 13, 2022.</p> <p>\$48 million in grants available for the Rural Public Health Workforce Training Network Program. Funding to establish networks to develop formal training/certification programs to help professionals in the following workforce training tracks: Track #1 - Community Health Support Track #2 - Health IT and/or Telehealth</p>
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				<p>Technical Support Track #3 - Community Para-Medicine Track #4 - Case Management Staff and/or Respiratory Therapists. Click here for details. Applications due March 18, 2022.</p> <p>Click here for a summary of HRSA's expenditure to support the workforce. (1/22)</p> <p>HRSA has \$19.2 million in grants through the Teaching Health Center</p>
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				<p>Graduate Medical Education (THCGME) Program to support and expand training of primary care residents in rural and underserved communities. Click here for the 2/3/22 press release and here for grant information. Applications due March 31, 2022.</p>
<p>\$47.8 billion for testing and tracing activities</p>	<p>For testing to contain the virus and mitigate its effects, hire staff for contact tracing, provide PPE for frontline health workers, and take other steps to combat the virus, such as enabling isolation and quarantine. On 4/16, the administration announced \$1.7 billion to be used to fight COVID-19 variants:</p>	<p>In the American Rescue Plan - Sec. 2401 HHS to use funds in part to provide grants to state, local public health departments for activities to detect, diagnose, trace, and monitor infections and related strategies and activities to mitigate the spread of COVID-19; to establish and expand testing and contact tracing capabilities, including through investments in laboratory capacity, such as academic and research laboratories, or other</p>	<p>Largely state and local public health departments; academic and research labs or other labs that could be used for testing; community-based</p>	<p>Keep tabs on your state and local public health department</p> <p>\$1.6 billion to be distributed</p>

	<ul style="list-style-type: none"> • \$1 billion to expand genome sequencing; • \$400 million to support innovation initiatives including the launch of new innovative Centers of Excellence in Genomic Epidemiology; • \$300 million for National Bioinformatics Infrastructure <p>The first tranche of funding will be distributed to states beginning in May. Click here for the details by state.</p>	laboratories that could be used for processing of COVID–19 testing; community-based testing sites and community-based organizations; or mobile health units, particularly in medically underserved areas; (award grants to, or enter into cooperative agreements or contracts with, State, local, and territorial public health departments to establish, expand, and sustain a public health workforce	organizations; mobile health units	for testing and mitigation in vulnerable populations; click here for press release (7/22); includes \$100 million for SAMSHA for people with mental health & SUD.
\$7 billion for broadband	<p>Expands access for students, families, and unemployed workers.</p> <p>Includes \$250 million for FCC’s COVID-19 telehealth program for health care providers’ telecommunications services and connected devices and \$300 for rural broadband.</p> <p>For details on all broadband funding opportunities, click here for a slide presentation from HRSA. Patients may be eligible for the Emergency Broadband Benefit program opening May 12. Click here for press release</p>	<p>In the Consolidated Appropriations Act – Title IX, sec. 903</p> <p>FCC’s grant application window is open from 4/29 at 12:00 PM ET through 12:00 PM ET on 5/6. Click here for the public notice with details. Application window closed 5/6.</p> <p>Click here for the press release and here for the report and order.</p>	Acute Care Facilities Post-Acute Physicians	<p>Apply for the FCC’s COVID-19 telehealth program from 4/29 to 5/6.</p> <p>Emergency Broadband Benefit program opened for applications on May 12.</p>

	<p>and here for the notice. Click here for details and here for a fact sheet. Click here for data tracker on sign-ups and here for press release.</p> <p>Click here for guidance on the FCC’s Connected Care Pilot Program and the second set of approved providers. Click here for the final rule on the Connected Care Pilot Program.</p> <p>Click here for a press release on the availability of unused funds for the Rural Health Care Funding Program.</p>		<p>4+ million households enrolled to date. Click here for 7/28 press release.</p> <p>FCC announced \$42 million in awards for COVID-19 telehealth program. Click here for press release with list of awardees, here for the public notice and here for invoicing guidance. (8/26/21)</p> <p>FCC announces additional \$42 million in Round 2 – click here for press release with</p>
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				<p>awardees (9/29/21)</p> <p>Click here for additional awards in Round 2 funding - total of \$166 million to date. Remaining applicants have 10 days to supplement their applications. Then the remaining funds will be committed. (11/9/21)</p> <p>Click here for the distribution of an additional \$42 million in Round 2 funding. (12/21/21) Click here for final Round 2</p>
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				awards. (1/26/22)
\$40 million	Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program for services to children and families living in communities at risk for poor maternal and child health outcomes – click here for press release, here for program details and here for list of awardees	American Rescue Plan	State Public Health Departments	Awards announced 5/12/21
\$1 million for grants to rural hospitals for telehealth	Funding through the Small Rural Hospital Improvement (SHIP) grant program through HRSA.	In the Consolidated Appropriations Act - click here .	Rural Hospitals	Awaiting info from HRSA
\$4.25 billion for SAMHSA	<ul style="list-style-type: none"> • \$1.65 billion for the Substance Abuse and Prevention Treatment Block Grant; • \$1.65 billion for the Mental Health Services Block Grant; • \$600 million for Certified Community Behavioral Health Clinics; • \$50 million for suicide prevention programs; • \$50 million for Project AWARE to support school-based mental health for children; 	In the Consolidated Appropriations Act – not limited to COVID-19, included here as an additional funding opportunity.	Varies by grant	SAMHSA Click here for FY 2021 SAMHSA COVID-19 Funded Grants to date; Click here FY 2021 SAMHSA American Rescue Plan (ARP) Funded Grants

	<ul style="list-style-type: none"> • \$240 million for emergency grants to States; and • \$10 million for the National Child Traumatic Stress Network; • Not less than \$125 million of funds provided to SAMHSA must be allocated to tribes, tribal organizations, urban Indian health organizations, or health service providers to tribes across a variety of programs. • \$14.2 million to expand pediatric mental health care access using telehealth (Pediatric Mental Health Care Access) 		<p>Pediatric Mental Health Care Access (PMHCA) grant – closed July 6.</p> <p>\$17.8 million awarded in Emergency Response for Suicide Prevention grants. Click here for press release with grantees (8/6/21)</p> <p>Click here for 8/27 press release on \$10.7 million awarded through Pediatric Mental Health Care Access and here for awardees.</p>
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				<p>Click here for 8/27 press release re SAMHSA awards of \$74.2 million in grants for youth mental health.</p> <p>\$15 million in state planning grants for community based mobile crisis units – click here for press release and here for state recipients (9/20/21)</p> <p>Click here for press release on \$825 million in grants to strengthen</p>
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				<p>community mental health centers (9/28/21)</p> <p>Click here for White House Fact sheet and here for HHS summary of behavioral health funding for children and youth (10/18/21)</p> <p>Non-profit community-based organizations; and primary and behavioral health organizations are eligible to apply for \$30 million in new grants for harm reduction programs to</p>
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				<p>help address substance abuse. Click here for press release and here to apply. Applications are due February 7, 2022. HRSA expects to make 25 awards of up to \$400,000 per award per year for up to 3 years. (12/8/21)</p> <p>Non-profit community-based organizations; and primary and behavioral health organizations are eligible to apply for \$30 million</p>
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				<p>in new grants for harm reduction programs to help address substance abuse</p> <p>Click here for press release and here to apply.</p> <p>Applications are due February 7, 2022.</p> <p>HRSA expects to make 25 awards of up to \$400,000 per award per year for up to 3 years.</p>
<p>\$3 billion For SAMHSA Block Grant programs</p>	<p>\$1.5 billion for Community Mental Health Services Block Grant</p> <p>\$1.5 billion for Prevention & Treatment of Substance Abuse Block Grant – click here for the 5/18 press release on the awards</p>	<p>In the American Rescue Plan – Sec. 2701 & Sec. 2702</p> <p>Click here for the press release; click here for the Community Mental Health Services Block Grant supplemental distribution for FY2021 and here for the Substance Abuse Block Grant supplemental for FY2021</p>	<p>Funding distributed to states</p>	<p>Click here for the mental health services block grants awards by state and</p>

		Click here for press release noting \$800,000 in ARP funds added to awards to combat child trauma for a total of \$62.4 million; includes list of recipients.		here for the substance abuse block grant awards by state
\$80 million	<p>Funding for mental health and substance use disorder training for health care professionals; grants for health care providers to promote mental health among their health professional workforce</p> <p>Click here for press release announcing \$103 million through grants to reduce burnout and promote mental health among the health professional workforce (7/16)</p>	In the American Rescue Plan – Sec. 2703	Health professions schools, academic health centers, State or local governments, Indian Tribes and Tribal organizations	<p>HRSA</p> <p>Deadlines closed September 20, 2021</p> <p>Click here for Promoting Resilience and Mental Health Among Health Professional Workforce (PRMHW); here for Health and Public Safety Workforce Resiliency Training Program And here for Health and Public Safety Workforce Resiliency</p>

				Technical Assistance Center; Click here for 1/20/22 press release awarding \$103 million in grants. Click here for recipients.
\$20 million	Education campaign – mental health/substance use disorder services by health care professionals	In the American Rescue Plan – Sec. 2704	For the benefit of health care professionals	CDC
\$40 million	Grants for health care providers to promote mental health among health professional workforce	In the American Rescue Plan – Sec.2705	For the benefit of health care professionals	HRSA
\$420 million for grants to Certified Community Behavioral Health Clinics	Expansion grants	In the American Rescue Plan – Sec. 2713	Community Behavioral Health Clinics	Click here for the 7/29 press release announcing \$250 million in grants; click here for the grantees.
\$100 million	Funding for behavioral health workforce education and training Another \$22 million to be awarded for a total to date of approximately \$66	In the American Rescue Plan – Sec.2711	For the benefit of health care professionals	HRSA

	million awarded - click here for press release; click here for awards by state			
\$200 million to support infection control in SNFs and \$250 million for “strike teams”	Assists SNFs – funding to be provided up until one year after the end of the PHE	In the American Rescue Plan – Sec. 9401 and Sec. 9402	SNFs	HHS
\$500 million in Emergency Rural Development Grants for Rural Health Care	An emergency pilot program is to be established within 150 days of the Act through the Department of Agriculture.	In the American Rescue Plan – Sec. 1002 Funds may be used to (1)increase capacity for vaccine distribution; (2) provide medical supplies to increase medical surge burse for revenue lost during the COVID–19 pandemic, including revenue losses incurred prior to the awarding of the grant; (4) increase telehealth capabilities, including underlying health care information systems; (5) construct temporary or permanent structures to provide health care services, including vaccine administration or testing; (6) support staffing needs for vaccine administration or testing; and (7) engage in any other efforts to support rural development determined to be critical to address the COVID–19 pandemic, including nutritional assistance to vulnerable individuals, as approved by the Secretary.	Rural providers	Ag Dept. Click here for details - Applications were due October 12, 2021. Click here for the Federal Register notice with details on the application process and information required.
Funds Allocated to Indian Country	\$1.8 billion to combat COVID-19 Click here for press release; this is in addition to the \$4 billion announced previously - click here for the press release.	American Rescue Plan \$240 million for public health workforce activities; \$420 million for mental health and substance abuse prevention and treatment; \$500 million to detect, diagnose, trace, monitor and mitigate COVID-19		\$46.4 million to fund behavioral health programs. Click here for 11/4/21

		<p>infections. Additionally, the HIS will invest \$600 million for COVID-related facilities activities –</p> <ul style="list-style-type: none"> • \$381 million to IHS, tribal, and urban Indian health programs for the lease, purchase, construction, alteration, renovation, and maintenance and improvement of facilities. • \$167 million to IHS and tribal health programs for COVID-19 related sanitation facilities construction projects. • \$23 million to IHS and tribal health programs for COVID-19 equipment needs. • \$29 million to support the appropriate management and oversight of facilities-related expenditures and to expand COVID-19 related environmental health activities. <p>\$210 Million to Build Preparedness in Tribal Communities, Support School Nurses in the Bureau of Indian Education, and Expand the Public Health Workforce in the Indian Health Service and Across Indigenous Communities. Click here. (11/10/21)</p>		<p>press release. Application deadline 2/2/22.</p>
\$250 Million to Fight COVID-19 & Improve Health Literacy	Through HHS’ Office of Minority Health - two-year initiative to identify and implement best practices for improving health literacy to enhance COVID-19 vaccination and other mitigation practices among underserved populations.	\$250 Million distributed to 73 local governments. Click here for press release with list of awardees.	Local Governments	Initiative began 7/1.
Regional Disaster Health	Grants from the HHS Office of the Assistant Secretary for Preparedness and Response Click here for details.	\$3 million		Closed

Response System				
SBA Loans for Paycheck Protection Program (PPP)	Continues funding PPP through 6/31/21; applications may be made through 5/31/21.	<p>The Consolidated Appropriations Act extended the program through 3/31/21 and increased authorizations to \$806.50 billion.</p> <p>The American Rescue Plan provided an additional \$7.25 billion and made some larger not-for-profits eligible.</p> <p>The Paycheck Protection Program Extension (P.L. 117-6) - click here Extends funding and application period.</p> <p>Click here for the Treasury Department website with all details.</p>	Acute Care Facilities Post-Acute Physicians Insurance	Closed
Tax Credits for paid sick leave for employees	<p>Allows small and midsize employers - any business, including tax-exempt organizations - with fewer than 500 employees, to claim refundable tax credits that reimburse them for the cost of providing paid sick and family leave to employees due to COVID-19, including leave taken by employees to receive or recover from COVID-19 vaccinations. The tax credits are available to eligible employers that pay sick and family leave for leave from April 1, 2021, through September 30, 2021.</p> <p>Tax credits expanded to include time off for employees' family members to get</p>	<p>American Rescue Plan – Title IX, Subtitle A, Part V, Sec. 9641-9643</p> <p>Click here for White House Fact Sheet, here for IRS fact sheet with links to relevant forms.</p>	Acute Care Facilities Post-Acute Physicians Insurance with less than 500 employees	

	vaccinated. Click here for press release and here for FAQs updated 7/29/21.			
COBRA Premium Assistance	Employers must notify employees by May 31 that COBRA is available with 100% federal coverage of COBRA premiums for April 1 through September 30. Click here for IRS Guidance which explains how employers can calculate and claim the tax credits; click here for Labor Dept FAQs for employers; and click here for Labor Dept. FAQs for employees.	American Rescue Plan – Section 9501	Acute Care Facilities Post-Acute Physicians Insurance	Click here for clarification on deadlines from the IRS (10/6/21).
Telehealth	\$35 million for Title X Family Planning Program grantees	American Rescue Plan		Title X grantees may apply for funds for to enhance and expand telehealth infrastructure and capacity. Click here for the press release and here for details on the grant opportunity. Applications are due February 3, 2022 at 6:00 p.m.

				ET. Notice of Awards will be announced prior to the project start date of May 1, 2022. A total of \$35 million is available, with a floor of \$50,000 and a ceiling of \$700,000 for individual grants.