



COVID-19 Funding Priorities

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Coronavirus Relief Funding to Date

- The Coronavirus Aid, Relief, and Economic Security (CARES) Act established the Coronavirus Relief Fund (CRF), which provided \$150 billion to state, local, territorial, and tribal governments, administered by the US Department of the Treasury
- To date, DHHS has received **\$345,340,000** in CRF funds appropriated through the General Assembly
 - Must be expended by 12/30/2020
- All currently appropriated funding amounts have already been spent or obligated or are budgeted and in the process of being obligated
- DHHS anticipates that all funds will be spent in the categories laid out in slide 3 by 12/30/2020

CRF Summary by Program Area

Project	Appropriation
Enhanced Capacity for MH and Crisis Services	\$75,000,000
Special Assistance Facilities	\$25,000,000
Public Health, Mental Health, and Crisis Services	\$20,000,000
Food Safety and Child Care	\$25,000,000
Early Childhood Initiatives	\$20,000,000
Foster Care	\$3,550,000
LINKS Program	\$290,000
NC MedAssist	\$1,500,00
Testing, Tracing, and Contact Trends	\$125,000,000
Rural and Underserved Communities	\$50,000,000
TOTAL CRF	\$345,340,000

Priorities for Additional Funding

- **Access to Health Care**
 - Medicaid Expansion
- **Prevention Efforts to Combat COVID-19**
 - Ongoing Infection Control: Support for local health departments to support long-term care facilities, schools, contact tracing, etc.
 - Industrial Hygiene Technical Assistance: Teams from DHHS, DACS & DOL will provide technical assistance to high-risk occupational settings experiencing COVID-19 clusters
 - Public Awareness/Outreach: Continue efforts to promote 3Ws, getting tested, participating in contact tracing, getting vaccinated
- **Protecting and Serving Aging Adults**
 - Long-term Care Workforce Retention: Increased rates for Personal Care Services, Nursing Homes, and ICF/IDD facilities

Priorities for Additional Funding

- **Supports for Rural and Underserved Communities**
 - Wrap-Around Supports: Access to nutrition assistance, transportation, medication delivery, etc. to individuals so they can safely quarantine or isolate due to COVID-19
 - Community Health Workers: Contract with community organizations to provide telehealth services and referrals to wrap-around supports for rural and underserved people
- **Prioritizing Early Childhood**
 - PPE: Provide additional infection control supplies to child care programs
 - Child Care Workforce Retention: Provide one-time retention bonuses for child care staff working onsite in open programs
 - Operational Grants: Stabilize child care programs who have lost significant tuition revenue due to lower enrollment with operational grants

Priorities for Additional Funding

- **Supporting Mental Health and Resilience**
 - Early Childhood Mental Health Services: School and child-care based behavioral health services, training and resiliency programs
 - Adult Mental Health Crisis and Inpatient Services: Mental health crisis intervention, training for law enforcement, and inpatient services for the uninsured
- **Fighting the Opioid Epidemic During COVID**
 - Treatment and Support Recovery: Leverage telehealth tools and value-based payment agreements to quickly connect individuals to treatment and supportive recovery