

House COVID-19 HCWG - Funding Requests Since H1043 (S.L. 2020-4)

| Row | Request is from | Request is for | Amount | Notes | PRIORITY TIERS: Tier 1: Must do in Sept. Tier 2: Might need to wait for next federal relief bill |
|---|---|--|---|---|---|
| Continuation of time-limited or one-time funds from H1043 | | | | | |
| 1 | Rep. White | Continuation of foster care assistance program | \$2.25M per quarter - Est. \$3.2M needed to continue through Dec | This would continue program providing \$100/foster child/month originally authorized for Apr-Jun in H1043 and provided another \$1.3M in H1023. | |
| 2 | NC Senior Living (6-17 Written Update) | State/County SA Funds needed | \$50M to continue program thru FY20-21 (July 2 letter) | SL 2020-4 Item (30): One time \$1,325 payment only covers through July 30. | |
| Personal Protective Equipment (PPE) | | | | | |
| <i>S.L. 2020-4 provided \$50M total for PPE: \$25M for NC Healthcare Association (hospitals); \$3.75M each to nonprofits NC Senior Living Association and NC Health Care Facilities Association; \$5M to Medical Society for independent medical practices; and \$12.5M to Dept of Public Safety, Division of Emergency Mgmt.</i> | | | | | |
| 3 | Board of Nursing (5/14 HCWG mtg) | Funding for PPE - range of facilities | | •SL 2020-4: Some facilities qualify for portions of \$50M provided for PPE and other supplies. | |
| 4 | Assn. for Home and Hospice Care (AHC) of NC (5/14 HCWG mtg) | Funding for PPE | \$3.75M | •SL 2020-4: AHC not a specified recipient of PPE, but \$12.5M of PPE may be allocated per Division of Emergency Management priorities. | |
| 5 | NC Early Education Coalition (6-17 written update) | PPE | \$5.7M | •SL 2020-4: NEEC not a specified recipient of PPE, but \$12.5M of PPE may be allocated per Division of Emergency Management priorities. | |
| 6 | NC Senior Living (7-2 Written Request) | PPE | \$7M | •SL 2020-4: \$3.75M provided in SL 2020-4. •NC Senior Living is requesting an additional \$7M. | |

House COVID-19 HCWG - Funding Requests Since H1043 (S.L. 2020-4)

| Row | Request is from | Request is for | Amount | Notes | PRIORITY TIERS: Tier 1: Must do in Sept. Tier 2: Might need to wait for next federal relief bill |
|---|---|--|---|---|---|
| Medicaid | | | | | |
| <p><i>The DHHS, Division of Health Benefits (DHB) has increased rates for just about every provider type during the pandemic, with the help of the 6.2 percentage point increase in the FMAP. The rate increases have been implemented through an 1135 waiver, which expires when the national public health emergency expires. A portion of the increases are required by Section 4.6 of S.L. 2020-4, which requires a 5% rate increase for all provider types that expires on the earlier of (1) the end of the national emergency, (2) the end of the State emergency, or (3) March 31, 2021. Except for these 5% rate increases, DHB could end other rate increases earlier if necessary. Providers have been notified the full increases will be in place through at least September 30, 2020.</i></p> | | | | | |
| 7 | AHHC of NC (5/14 HCWG mtg) | Make Medicaid home health rate increases permanent | ~\$12M annual cost after emergency period | Home Health and Private Duty Nursing Medicaid rates have been increased approximately 15% for the emergency period. After the emergency period, permanent increases would require additional GF appropriations or identification of other funding source. | |
| 8 | NC Senior Living (6-17 Written Update) | Medicaid PCS increase from Increase from July-Dec 2020 | | Current 15% increase anticipated thru end of the national emergency. | |
| 9 | NC Health Care Facilities (Nursing facilities) (6-17 Update) | Support funding - Increased costs outpacing Medicaid funding increase | | Cost increases outpaced Medicaid funding of \$180,000 per facility, 8-10 % decrease in occupancy due to postponed elective procedures | |
| 10 | Bayada Home Health Care via Rep. Baker (email 8/13) and Rep. Jones (8/18) | Continuation of Medicaid rate increases for personal care services, Community Alternative Programs, and private duty nursing through 2021 with goal of increasing further in the future. | | | |

House COVID-19 HCWG - Funding Requests Since H1043 (S.L. 2020-4)

| Row | Request is from | Request is for | Amount | Notes | PRIORITY TIERS: Tier 1: Must do in Sept. Tier 2: Might need to wait for next federal relief bill |
|--|--|--|--|---|---|
| COVID-19 Testing | | | | | |
| <i>S.L. 2020-4 and S.L. 2020-88 provide a total of \$125M from CRF for COVID-19 testing, contact tracing, and trends tracking and analysis. DHHS also has testing funds from a federal CDC grant. Most of the funds are being used to help support testing of individuals who have symptoms or have been exposed to COVID-19. Additional funds are being used to pay for staff surveillance testing in skilled nursing facilities, once every 2 weeks.</i> | | | | | |
| 11 | NCALA (5/14 HCWG mtg & 6/17 Update) | Funds for testing uninsured staff | No amount specified | NCALA reports they still need funds to cover testing of uninsured staff. | |
| 12 | NC Senior Living (6-17 Written Update) | Testing Access for staff | | <ul style="list-style-type: none"> •Uninsured staff not covered by some counties, need consistent access. •Some staff testing may not be covered by insurance. •Residents covered by Medicare and/or Medicaid. | |
| 13 | NC Health Care Facilities (Nursing facilities) (6-17 Update) | Testing Access for staff | \$4.5M per week or \$117M from July 1- Dec 1 | •DHHS has committed ~\$25M to cover biweekly testing of SNF staff and testing during outbreaks (400+ facilities) | |
| 14 | NC Health Care Facilities (Nursing facilities) (6-17 Update) | Testing Capacity Concerns | | •DHHS has committed ~\$25M to cover biweekly testing of SNF staff and testing during outbreaks (400+ facilities) | |
| 15 | Duke Human Vaccine Institute (proposal dated July 25, 2020) | Funding to design and develop a rapid, sensitive, and inexpensive test for active COVID-19. | \$2M | •SL 2020-4 Item (22): \$15M to DHVI to develop vaccine in SL 2020-4. | |
| 16 | Rep. Jones (Rep Lambeth 6/4) | NC Policy Collaboratory @ UNC, House Bill 1219- \$10M from CDC/Paycheck Protection Payment and Health Enhancement Act for Collaboratory to carryout testing, tracking, and tracing to create a statewide Internet based portal for businesses based in NC (test individual employees, surface testing, wastewater testing). Also, \$10M for Office of Minority Health and Health Disparities to support enhanced testing in underserved communities & epidemiological staff to support testing work of Office. | \$10M for NC Policy Collaboratory & \$10M for Office of Minority Health & Health Disparities | <ul style="list-style-type: none"> •SL 2020-4 Item (22): \$29M to Collaboratory, item (i) countermeasure (ii) vaccines (iii)community testing initiatives (iv) other research. •DHHS reports budgeting \$20M (from CDC Epidemiology and Laboratory Capacity grants) for testing in communities with higher prevalence of virus and among historically marginalized communities. | |

House COVID-19 HCWG - Funding Requests Since H1043 (S.L. 2020-4)

| Row | Request is from | Request is for | Amount | Notes | PRIORITY TIERS: Tier 1: Must do in Sept. Tier 2: Might need to wait for next federal relief bill |
|-----|-------------------------------|--|--------|--|--|
| 17 | Rep. Jones (8/17 email) | Surveillance testing trial at Cypress Glenn CCRC and ALG Senior | \$100K | •DHHS reports budgeting \$20M (from CDC grant) for testing in communities with higher prevalence of virus and among historically marginalized communities. | |
| 18 | UNC-Charlotte via Rep. Carney | Monitoring, detection, and early warning program to test wastewater and public transportation systems for virus on UNC-C campus and more broadly in Charlotte. | \$5M | •SL 2020-4 Item (22): \$29M to Collaboratory, item (i) countermeasure (ii) vaccines (iii)community testing initiatives (iv) other research. | |

Physicians

S.L. 2020-4 provides \$5M to NC Medical Society for PPE and supplies to independent medical practices. In addition, it provides \$50M for rural and underserved communities for health provider grants, targeted Medicaid assistance for rural hardship grants to nonhospital providers, enhanced Telehealth services, transportation for critical services, and health care security for the uninsured. These uses could aid physicians and smaller medical practices.

| | | | | | |
|----|--|---|-------|--|--|
| 19 | NC Medical Society (Chip Baggett - 8/13 email) | \$50M to distribute to financially distressed practices to prevent further closures of independent practices. | \$50M | | |
|----|--|---|-------|--|--|

Hospitals

S.L. 2020-4 provides \$95M to hospitals: \$65M to rural hospitals, \$15M to teaching hospitals, and \$15M to all other hospitals. S.L. 2020-80 provides another \$9.5M, \$1M each to 7 specified hospitals and \$2.5M to Randolph County for Randolph Hospital.

| | | | | | |
|----|---------------------------|--|--------|---|--|
| 20 | NC Healthcare Association | \$100M for specific hospitals that did not receive the federal rural or safety net distributions. Many need funds for COVID capital investments. | \$100M | Request includes change to expand eligible uses of the funds. | |
|----|---------------------------|--|--------|---|--|

Child Care/Education

S.L. 2020-88 provides \$20M to DHHS, Division of Child Development and Early Education for various early childhood initiatives to mitigate impact of COVID-19. S.L. 2020-4 included a \$19M bucket that could be used for child care response, among a large number of other eligible uses. Other federal grants have provided additional child care funds.

| | | | | | |
|----|---|--------------------|--------|--|--|
| 21 | Walkabouts Program to Rep. Lambeth 5/27 | Walkabouts Program | \$250K | Web-based platform serves as a classroom and at-home intervention to improve education and health-related outcomes \$250K to serve 70,000-80,000 students. Create lessons featuring physically engaging activities that correlate to NC Math and ELA/Literacy standards teacher use to develop and manage lesson plans | |
|----|---|--------------------|--------|--|--|

House COVID-19 HCWG - Funding Requests Since H1043 (S.L. 2020-4)

| Row | Request is from | Request is for | Amount | Notes | PRIORITY TIERS: Tier 1: Must do in Sept. Tier 2: Might need to wait for next federal relief bill |
|---|--|--|---|--|--|
| 22 | NC Farms for NC Kids - Elle Evans Peterson NCPTA (Rep. Lambeth 6/4) | School Nutrition Programs (SNP) funding: \$5 million in recurring funding to eliminate reduced-price lunch copay & use CARES Act funds to provide funding to SNPs to continue feeding children | \$5 Million plus funding to continue summer feeding programs at schools | \$75M from H1043 for SNPs extended for use thru Dec 30, 2020 in H1023. Info provided: SNPs served more than 18M meals since March 16. Est 900,000 qualify for free & reduced price meals (100,000 increase). | |
| 23 | NC Early Education Coalition (6-17 written update) | Bonus Payments: to continue payments to teachers and staff in June and July | \$56.8M | | |
| 24 | NC Early Education Coalition (6-17 written update) | Parent copay fees, to be able waive the fees for parents enrolled in the child care subsidy program in July. | \$3.8M | Since this request, DCDEE has announced that they will be covering these copayments for July and August. | |
| 25 | NC Early Education Coalition (6-17 written update) | Essential Child Care Subsidy Assistance Program: To extend the program for June and July, in order for essential workers to access essential child care services. | \$29.2M | | |
| 26 | Rep. Dobson | Reach Out and Read Program | \$1M | | |
| Behavioral Health | | | | | |
| <i>S.L. 2020-88 provides \$50M for LME/MCOs. S.L. 2020-4 provides a \$20M bucket that includes behavioral health and crisis services among many potential uses, as well as a separate \$20M bucket that provides \$12.6M for ICF/IIDs, \$7M in flexible funds for behavioral health and crisis services, and \$400,000 for opioid antagonists to be distributed to opioid treatment programs.</i> | | | | | |
| 27 | Rep. Jones and Rep. Dobson | Funds for Triangle Residential Options for Substance Abusers (TROSA) (H1210) | \$1M | H 1210 states funds are for offsetting increased operations expenses for providing comprehensive residential substance use disorder treatment associated with COVID-19 pandemic | |

House COVID-19 HCWG - Funding Requests Since H1043 (S.L. 2020-4)

| Row | Request is from | Request is for | Amount | Notes | PRIORITY TIERS: Tier 1: Must do in Sept. Tier 2: Might need to wait for next federal relief bill |
|-----------------------------------|--|---|---------------------|---|---|
| 28 | Addiction Professionals of NC (Logan Martin@ Skyline Strategies) | Funding for Substance Use Treatment | \$113.4M | \$113.4M: \$81.4M for funds already spent for behavioral health and IDD plus \$32M for substance use and MH service in coming FY (\$4.4M prevention, \$13.2M SUD treatment, \$4.4M community-based recovery and harm reduction, \$10M for MH services). Background: 11% opioid death increase; suicide increase with unemployment; college student (18-25) pressures; capacity-survey response from 70 addiction and BH orgs reporting 57% closing 1 program, 10% unable to admit new clients | |
| 29 | Rep. White (8/12 email) | IDD BMT and Single Stream Funding for IDD | | Single Stream funding increase would be used to increase salaries for direct service personnel working with IDD population | |
| Assisted Living Facilities | | | | | |
| 30 | NCALA (5/14 HCWG mtg & 6/17 Update) | Funds to provide more education, training/Infection Control Guidance limitations | \$200K | 6/17 update - NCALA reports funds needed to work as a collaborative partner with the Sheps Center and Spice Program to develop specific template guidance for infection control and infection control training for staff. | |
| 31 | NCALA (5/14 HCWG mtg & 6/17 Update) | Funds to purchase or access new equipment and technology that would improve communication and safety/ Smart Devices for Residents | No amount specified | 6/17 update- NCALA reports this is related to funding to purchase smart devices for residents to communicate with families, but no amount was specified | |
| 32 | NCALA (5/14 HCWG mtg & 6/17 Update) | Funds to help cover environmental supplies and costs to redesign visitation or common areas to address resident isolation and maintain infection control and safety standards/Costs to redesign areas | No amount specified | 6/17 update - NCALA reports these would be funds to cover environmental supplies and costs to redesign visitation or common areas. | |

House COVID-19 HCWG - Funding Requests Since H1043 (S.L. 2020-4)

| Row | Request is from | Request is for | Amount | Notes | PRIORITY TIERS: Tier 1: Must do in Sept. Tier 2: Might need to wait for next federal relief bill |
|--------------|-------------------------------------|---|---------------------|---|---|
| 33 | NCALA (5/14 HCWG mtg & 6/17 Update) | Funds to establish a dedicated facility for treatment of COVID positive residents. | No amount specified | 6/17 update - NCALA reports need for funds to establish a dedicated facility for treatment of COVID positive patients and suggest the payment for residents be similar to a Medicare Rehab stay but no amount of funding specified. | |
| 34 | NCALA (5/14 HCWG mtg & 6/17 Update) | Funds to help cover costs of additional staff and staffing hours required to maintain state/county directives for extra sanitation, screening, and to safely deliver and observe meal services and activities. Similar to Medicaid model. | \$2.6M | 6/17 update - This amount would cover training 10 new PCAs/Med Aides per year at a cost of \$15,287.50 per facility. NCALA calculated the cost for 170 of its private pay providers. | |
| Other | | | | | |
| 35 | Rep. White (8/12 email) | Life Science Caucus | | | |
| 36 | Rep. White (8/12 email) | ROAP Area Transit for Dialysis | | | |
| 37 | Rep. White (8/12 email) | Adult Day Services (might include policy and funding requests) | | | |
| 38 | SHIFT NC | Funding for a focus group study of NC teens | \$107K | Teens will be asked about social, emotional, physical, and mental health during pandemic, and whether their needs are being met. | |
| 39 | Rep. Dobson | Nurse-Family Partnership | | | |

TOTAL for requests with specific amounts requested \$577,107,000