

AMERICAN RESCUE PLAN ACT & OTHER FUNDING: WHAT DOES IT MEAN FOR GEORGIA?

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FEDERAL FUNDING LEARNING PROCESS



ANALYZE

- Study the flow of federal funds
- Survey coordinated strategy approaches
- Assess the landscape of potential fiscal intermediaries
- Explore a systems map for master planning



TRANSLATE

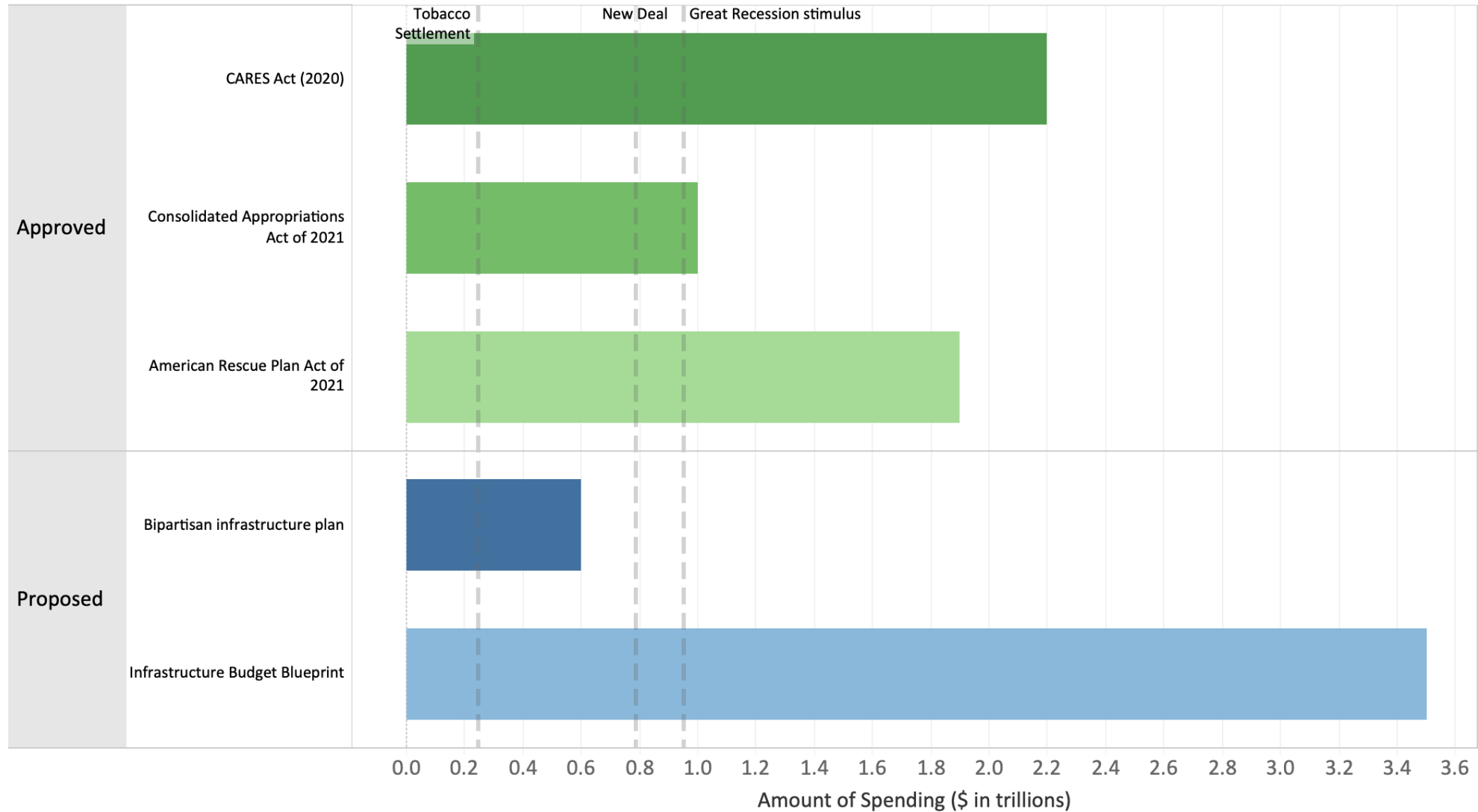
- Synthesize opportunities to blend and braid funding
- Share best practices and practical steps and strategies
- Prototype tools for master planning to leverage federal funds



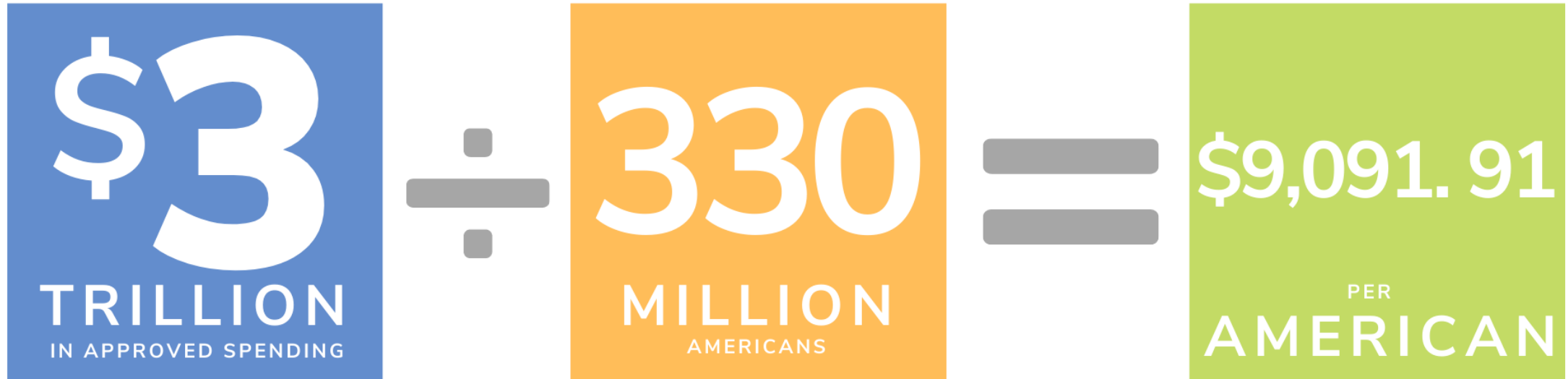
ACT

- Partner with states, local communities, and fiscal intermediaries
- Provide technical assistance, thought partnership, and policy guidance
- Elevate examples of innovative strategies
- Encourage systems alignment to build resilient, equitable communities.

FEDERAL FUNDING IN CONTEXT



SINCE DECEMBER 2020



FROM THE CONSOLIDATED APPROPRIATIONS
ACT & AMERICAN RESCUE PLAN ACT

H.R. 133: CONSOLIDATED APPROPRIATIONS ACT

SIGNED INTO
LAW ON

DECEMBER

27

2020

PROVIDES
\$900
BILLION

ADDED COVID RELIEF
ONTO 2021
APPROPRIATIONS

H.R. 133: ADDITIONAL HIGHLIGHTS



\$284 Billion in forgivable Paycheck Protection Program (PPP) loans

\$20 Billion for low-income communities

\$15 Billion for at-risk music venues, theaters, and museums



\$1.65 Billion for Mental Health Services block grants, 50% of which must be for providers

\$1.65 Billion for Substance Abuse and Prevention Treatment block grants

\$600 Million for Certified Community Behavioral Health Clinics



\$2.5 Billion for communities of color and rural areas

H.R. 133: SUBSTANTIVE CHANGES



BANS SUPRISE MEDICAL BILLING

REAUTHORIZES
FUNDING FOR
COMMUNITY
HEALTH CENTERS
FOR 3 YEARS

FORGIVES \$1.3
BILLION IN
LOANS MADE
TO HBCUs

PERMITS HUD
TO COVER
ONE YEAR OF
OPERATING
LOSSES FOR
CERTAIN
FHA-
INSURED
HOSPITALS
AND LONG-
TERM CARE
FACILITIES

EXPANDS
PPP
ELIGIBILITY
FOR
CRITICAL
ACCESS
HOSPITALS

ALLOWS MEDICARE BENEFICIARIES TO RECEIVE MENTAL HEALTH SERVICES VIA TELE-HEALTH, INCLUDING IN THEIR HOME

H.R. 1319: AMERICAN RESCUE PLAN OF 2021

SIGNED INTO
LAW ON

MARCH

11

2021

PROVIDES

\$1.9

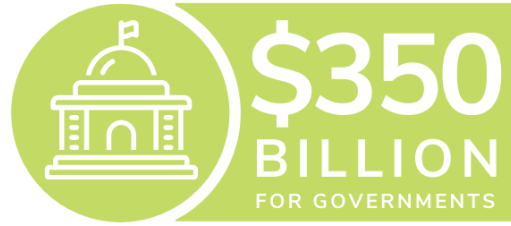
TRILLION

ADDITIONAL
FUNDING FOR
STATE AND
LOCAL
GOVERNMENTS

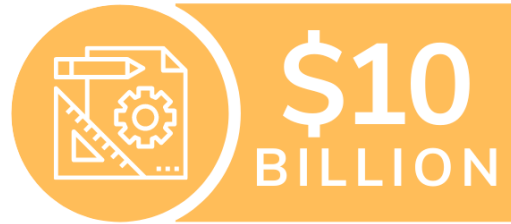
NEW OPTION FOR STATES TO EXTEND
POSTPARTUM MEDICAID COVERAGE
TO 12 MONTHS THROUGH A STATE
PLAN AMENDMENT

IMPACTS NUMEROUS INDUSTRIES, BUSINESSES, AND INDIVIDUALS

H.R. 1319: ADDITIONAL HIGHLIGHTS



\$195.3 billion for states
\$65.1 billion for counties
\$45.6 billion for metropolitan cities
\$19.6 billion for small towns (<50,000 residents)



for state and local government capital projects that enable remote work, education, and health monitoring in response to the pandemic



for rental assistance programs
\$2.5 billion set aside for high-need communities based on number of low-income renters and availability of affordable housing

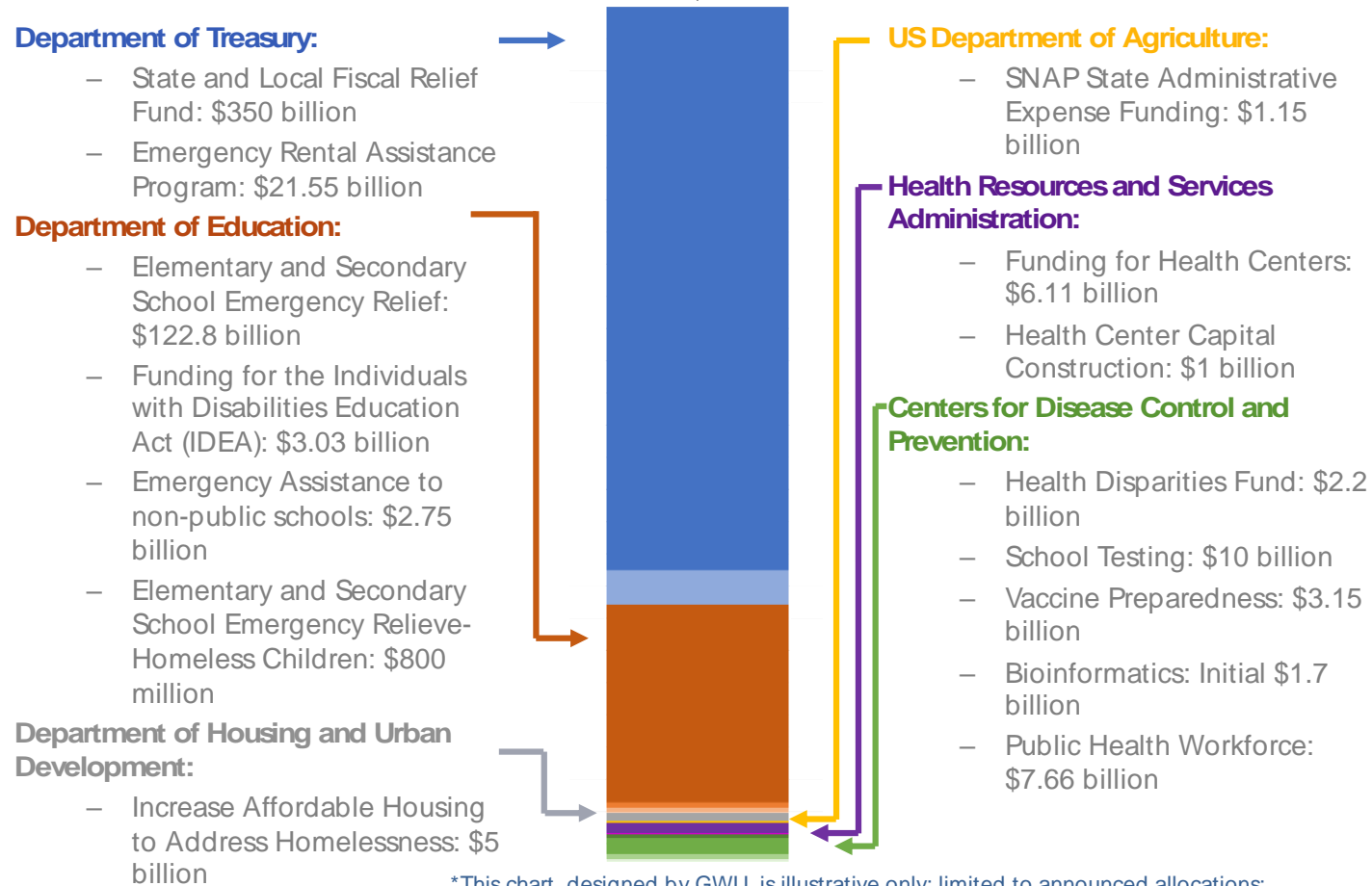


for a homeowner assistance fund to prevent defaults, foreclosures, and displacements, with 60% allocated to those under 100% median income

H.R. 1319: ADDITIONAL HIGHLIGHTS

- **\$1,400** STIMULUS CHECKS TO MOST AMERICANS
- **\$7.25 BILLION** FOR ADDITIONAL PPP FUNDING WITH BROADENED ELIGIBILITY RULES
- **\$10 BILLION** FOR STATE SMALL BUSINESS CREDIT INITIATIVE
- **\$15 BILLION** FOR ECONOMIC INJURY DISASTER LOAN PROGRAM
- **\$28.6 BILLION** FOR A RESTAURANT REVITALIZATION FUND
- **\$8.5 BILLION** FOR RURAL HEALTHCARE PROVIDERS TO COVER EXPENSES AND LOST REVENUE DUE TO COVID
- **\$7.66 BILLION** FOR EXPANDED PUBLIC HEALTH WORKFORCE
- **\$7.6 BILLION** FOR TESTING AND VACCINATION AT COMMUNITY HEALTH CENTERS
- **\$3 BILLION** FOR COMMUNITY MENTAL HEALTH SERVICES

AMERICAN RESCUE PLAN ACT: HIGHLIGHTED FUNDS FOR STATES AND LOCALITIES*

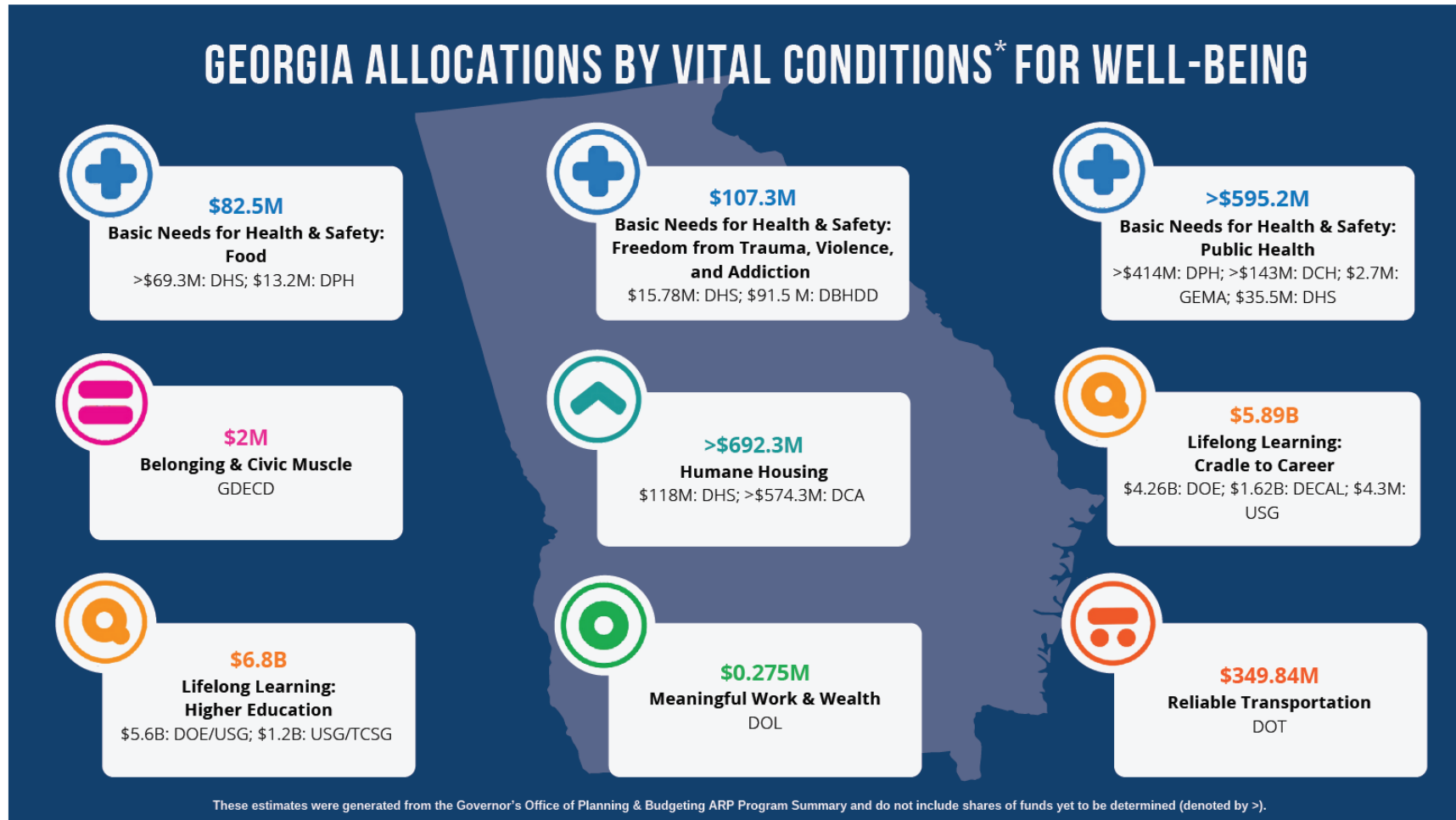


*This chart, designed by GWU, is illustrative only; limited to announced allocations; national totals

** \$3B in SAMHSA block grants recently announced

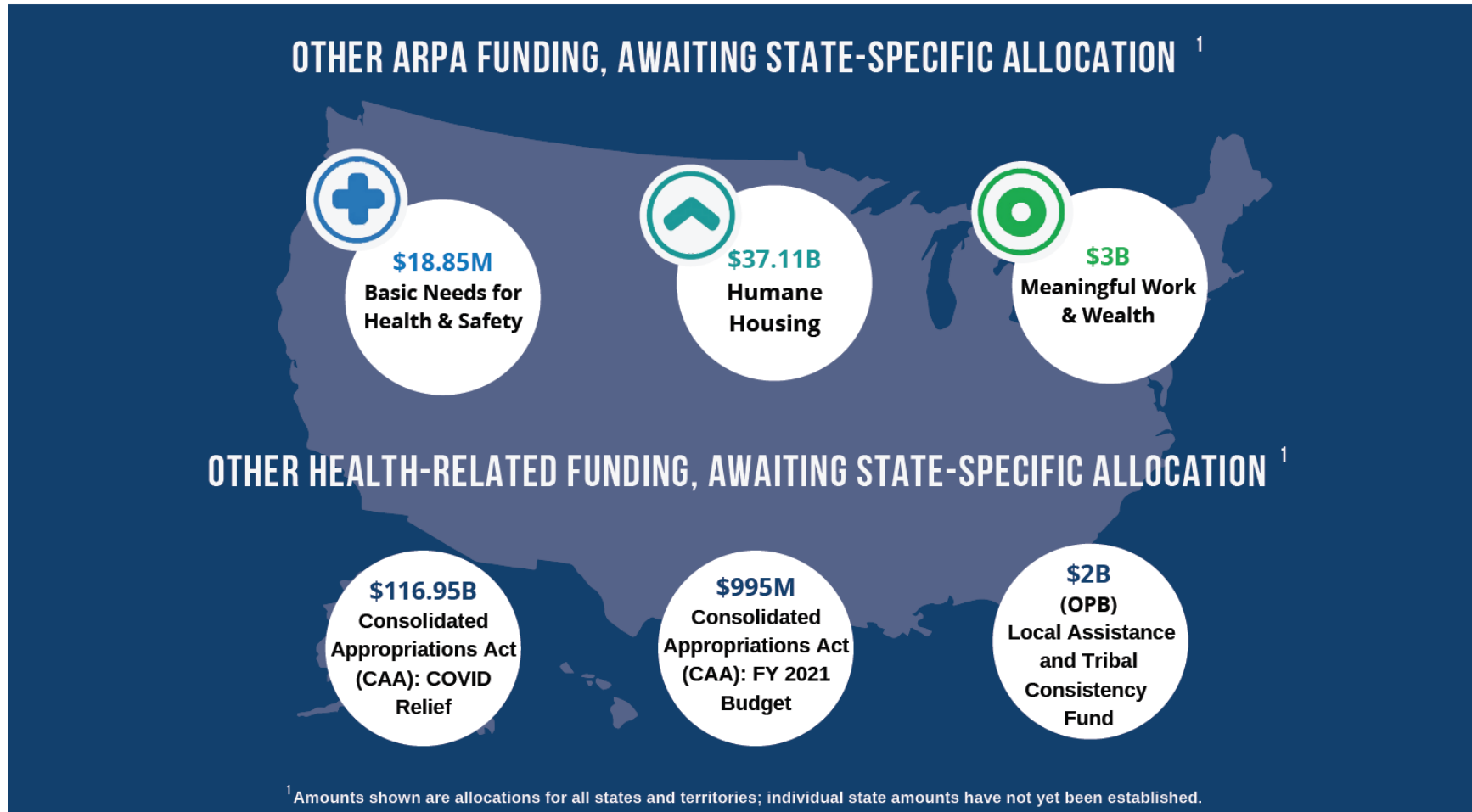
What does all of this mean for Georgia?

GEORGIA ALLOCATIONS BY VITAL CONDITIONS* FOR WELL-BEING



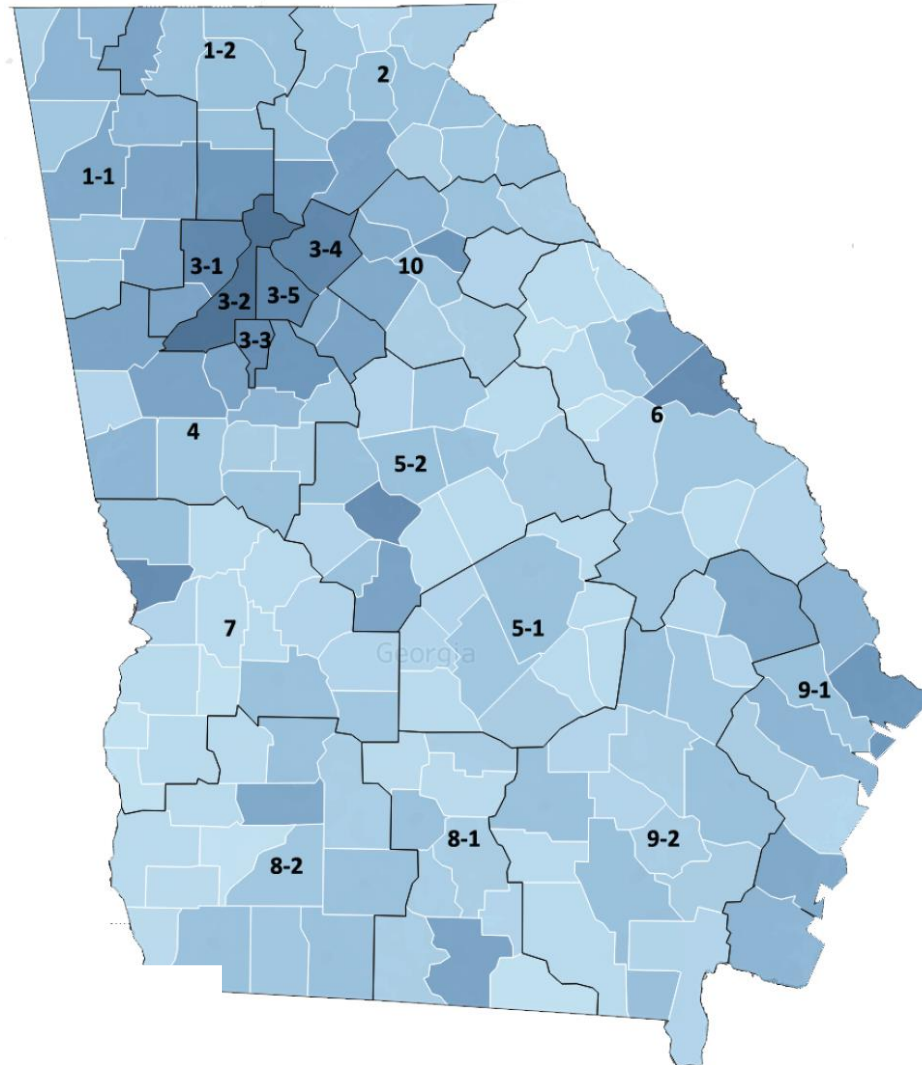
*Source: Vital Conditions for Well-Being were developed by ReThink Health and the Well-Being in the Nation Network

OTHER ARPA AND HEALTH-RELATED FUNDING AWAITING STATE-SPECIFIC ALLOCATION¹



¹ These values do not include local fiscal recovery funds going to counties and cities.

ARPA ALLOCATIONS BY GEORGIA COUNTY AND HEALTH DISTRICT



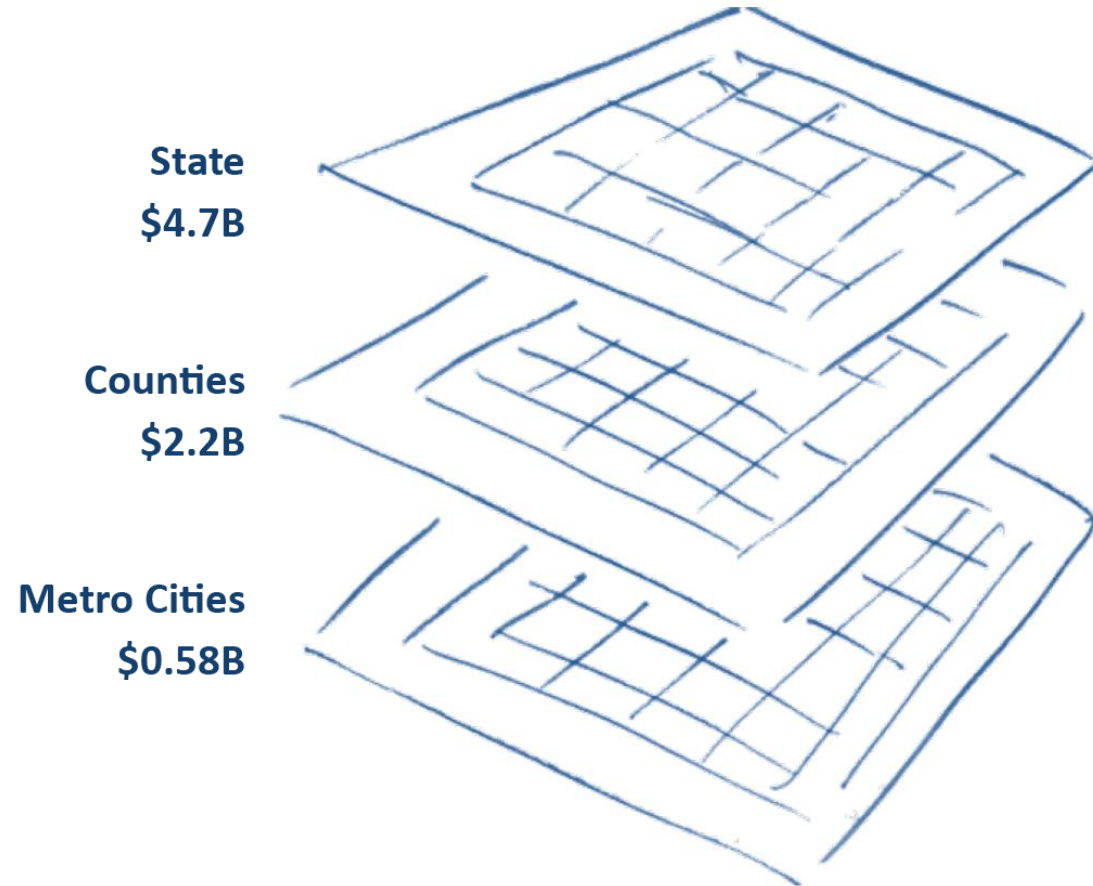
Allocation By County

- <\$1M
- \$1M-\$2M
- \$2M-\$3M
- \$3M-\$4M
- \$4M-\$5M
- \$5M-\$10M
- \$10M-\$15M
- \$15M-\$20M
- \$20M-\$40M
- \$40M-\$60M
- \$60M-\$100M
- \$100M-\$200M
- >\$200M

Public Health District	Federal \$ Allocated to Counties Within Public Health District (\$ in millions)
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1-1	132.77
1-2	95.88
2	142.36
3-1	176.07
3-2	206.66
3-3	66.85
3-4	221.22
3-5	147.48
4	170.25
5-1	29.18
5-2	149.92
6	138.39
7	112.15
8-1	50.25
8-2	66.6
9-1	122.11
9-2	72.55
10	130.96

MULTIPLE LEVELS OF FUNDING IN GEORGIA



ARPA FUNDING FOR GEORGIA: OPB (>\$8.2 BILLION)

\$4.7
BILLION

STATE FISCAL RELIEF FUND

- For expenses incurred through December 31, 2024.
- Funds may be used to respond to COVID-19 or its negative economic impacts, premium pay to essential workers, lost revenues, and water/sewer/broadband infrastructure.

\$3.5
BILLION

LOCAL FISCAL RELIEF FUND

- For city and county expenses incurred through December 31, 2024.
- For cities with 50,000 or more people and all counties, funds distributed directly; for cities less than 50,000, funds distributed by the state

\$2
BILLION

LOCAL ASSISTANCE AND TRIBAL CONSISTENCY FUND

- Available to states until September 30, 2023
- \$750 M in FY 2022 and \$750 M in FY 2023 to counties that experienced negative revenue impacts due to changes in federal programs, based on economic conditions.
- \$50 M for tribal governments.

The allocations in grey are total allocations for specific programs nationally, but state-specific amounts for these programs have not yet been determined.

ARPA FUNDING FOR GEORGIA: DPH (>\$427.2 MILLION)

\$95
MILLION

**COVID-19
VACCINES**

- For activities to plan, prepare for, promote, distribute, administer, and track COVID-19 vaccines; available until expended.

\$319
MILLION

**COVID-19
TESTING**

- For testing, contact tracing, and mitigation; available until expended.

\$13.2
MILLION

**WIC CASH VALUE
VOUCHERS**

- To increase the amount of a cash-value voucher to as much as \$35 for four months for participants receiving food packages.

\$7.7
BILLION

**PUBLIC HEALTH
WORKFORCE**

- Available to all states for recruiting, hiring, and training new public health workers; providing personal protective equipment, technology, and other supplies to new workers; and administrative costs.

The allocations in grey are total allocations for specific programs nationally, but state-specific amounts for these programs have not yet been determined.

ARPA FUNDING FOR GEORGIA: DCH (>\$143 MILLION)

\$143
MILLION

COMMUNITY HEALTH CENTERS

- For vaccine distribution, testing, contact tracing, equipment, staff, infrastructure, and community education and outreach.
- Funds are available until expended and can be used on prior expenditures since January 27, 2020.

\$800
MILLION

NATIONAL HEALTH SERVICES CORPS

- Available to states. \$100 million is set aside for state loan tuition repayment programs for participating physicians/clinicians.

\$250
MILLION

NURSING HOME STRIKE TEAMS

- Available to states until expended.
- Amounts for Georgia note yet determined.

ARPA FUNDING FOR GEORGIA: DCH (>\$143 MILLION)

\$8.5
BILLION

RURAL HEALTH CARE PROVIDERS

- Available to states until expended to reimburse rural health care providers serving Medicare and Medicaid beneficiaries for health care-related expenses and lost revenues attributable to COVID-19.

100%
FEDERAL
MATCH

MEDICAID AND CHIP

- 100% federal match for COVID-19 vaccines.

\$500
MILLION

EMERGENCY RURAL DEVELOPMENT GRANTS FOR RURAL HEALTH CARE

- Available to states until September 30, 2022, for rural health care, including vaccine distribution and lost revenues.

ARPA FUNDING FOR GEORGIA: DHS (>\$25.57 MILLION)

\$20.3
MILLION

CONGREGATE AND HOME DELIVERED MEALS

\$20.3 million for aging nutrition services; requires 15% state match; available until expended.

\$3.8
MILLION

FAMILY CAREGIVERS

25% state match required; available until expended.

\$1.2
MILLION

PREVENTIVE SERVICES

\$1.2 million for DHS Special Programs for Aging-Disease Prevention and Health Promotion; requires 15% state match; available until expended.

\$270K

TITLE VII LONG-TERM CARE OMBUDSMAN

\$270,000; available until expended.

NOT YET DETERMINED FOR GEORGIA:

\$1.1
BILLION

SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM

\$1.1 billion for states; exact amounts for Georgia not yet determined but will depend on funding formula:

- 75% based on the share of SNAP households for the most recent 12-month period for which data are available, adjusted by the secretary for participation in disaster programs
- 25% based on the increase in SNAP households over the most recent 12-month period, adjusted for participation in disaster programs

ARPA FUNDING FOR GEORGIA: DBHDD (\$91.5 MILLION)

 **\$45.5**
MILLION

MENTAL HEALTH BLOCK GRANT

\$45.5 million available until 9/30/2025

 **\$46**
MILLION

SUBSTANCE ABUSE BLOCK GRANT

\$46 million available until 9/30/2025

ARPA FUNDING FOR GEORGIA: EDUCATION (\$5.6 BILLION)

DEPARTMENT OF EDUCATION

- Elementary and Secondary School Emergency Relief Fund: \$4.2 billion
- Emergency Assistance to Non-Public Schools: \$65.6 million
- Individuals with Disabilities Education Act: \$900,000

DEPARTMENT OF EARLY CARE AND LEARNING

- Child Care and Development Block Grants: \$607 million (until 9/30/2023)
- Child Care Stabilization Grants: \$970 million (until 9/30/2021)
- Child Care Entitlements to States (increase in matching funding): \$17.5 million (until 9/30/2021)
- Head Start: \$27 million (until 9/30/2022)

UNIVERSITY SYSTEM OF GEORGIA

- Higher Education Emergency Relief Fund: \$1.2 billion

ARPA: POSTPARTUM MEDICAID COVERAGE

EFFECTIVE
BEGINNING

APRIL

1

2022

GEORGIA RECENTLY EXTENDED POSTPARTUM COVERAGE TO 6 MONTHS THROUGH AN 1115 WAIVER, MANDATED BY THE GENERAL ASSEMBLY (GOOD FROM APRIL 16, 2021 TO MARCH 31, 2026)

SPAs REQUIRE MINIMAL PAPERWORK BY STATES, WHEREAS 1115 WAIVERS HAVE NUMEROUS REPORTING AND RENEWAL REQUIREMENTS

ARPA CREATES A STATE PLAN AMENDMENT (SPA) OPTION FOR STATE MEDICAID PROGRAMS TO EXTEND POSTPARTUM MEDICAID FOR PREGNANT WOMEN FROM 60 DAYS TO 12 MONTHS

UNLIKE MOST SPAs THAT ARE INDEFINITE, THIS OPTION IS ONLY AVAILABLE FOR 5 YEARS; ADDITIONAL ACTION BY CONGRESS NEEDED TO MAKE PERMANENT.

ALIGNING IN CRISIS PARTNERS



KEY PRINCIPLES FOR A RESILIENT AND EQUITABLE RECOVERY



Aligning sectors and efforts is critical to advance health and equity.



A coordinated strategy guides the work and investments.



Intermediary organizations are ready and able to assist.



Community leadership drives lasting change.

INSIGHTS FROM PARTNERS AND ADVISORS



PERHAPS THE GREATEST OPPORTUNITY IS WITH CITIES AND COUNTIES

- ACCOUNTABILITY IS IMPORTANT
- CONSIDER PARTNERSHIPS THAT INCREASE CAPACITY
- PRIVATE SECTOR CAN INFLUENCE THE PUBLIC SECTOR



SLOW DOWN



- MONEY BROKER
- CONVENER
- PLANNER



TRUST

THANK YOU

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