



**Date:** August 11, 2020

**To:** Legislative Advisory Commission Members

Senator Paul Gazelka  
Senate Majority Leader

Senator Julie Rosen, Chair  
Finance Committee

Senator Michelle Benson, Chair  
Health and Human Services Finance and Policy  
Committee

Representative Melissa Hortman  
Speaker of the House

Representative Lyndon Carlson, Sr., Chair  
Ways and Means Committee

Representative Tina Liebling, Chair  
Health and Human Services Finance Division

**From:** Myron Frans, Secretary Legislative Advisory Commission

**Subject:** URGENT REVIEW | #59-63 Coronavirus Relief Fund Request to Legislative Advisory Commission

This is a request to spend federal dollars received through the CARES Act as part of the Coronavirus Relief Fund for necessary expenditures incurred due to the public health emergency with respect to the Coronavirus Disease 2019 (COVID-19). This request is submitted under M.S. 3.3005 subd. 4 and 5, which allows for a 10-day review.

Attached are the details of the federal fund review requests. Details about these requests were shared in a briefing for the Legislative COVID-19 Response Commission members and the chairs of the relevant House and Senate Finance Committees on August 7, 2020 and August 10, 2020.

<b>Federal Fund Review Requests</b>	<b>FY 2021</b>
59. Ensuring Timely Access to Testing in Long Term Care (Health)	\$7,000,000
60. Additional Testing Processing Capacity (Health)	\$55,000,000
61. Vault/RUCDR COVID Saliva LAB Capacity (Health)	\$14,660,000
62. COVID-19 Case Investigation and Contact Tracing (Health)	\$35,091,423
63. Tribal Public Health Grants (Health)	\$2,578,978
<b>Total:</b>	<b>\$114,330,401</b>

**PROCEDURE FOR LAC REVIEW:**

The six LAC members have until Friday, August 21, 2020, to provide a recommendation. To expedite the LAC review process, LAC members may respond to this review request directly, recommending their approval or

request for further review, instead of waiting the 10-day period.

CC: Bill Marx, House Chief Fiscal Analyst  
Eric Nauman, Senate Lead Fiscal Analyst  
Nancy Conley, House Ways and Means Committee Administrator  
Jessica Young, Senate Finance Committee Administrator

Please complete this form in accordance with the process instructions.

**Agency/Point of Contact:** Minnesota Department of Health/Margaret Kelly, Deputy Commissioner

**Title of Request:** Ensuring Timely Access to Testing in Long Term Care

**Date:** 8/6/2020 **Request Amount:** \$ 7,000,000

**Expenditure Time Period:** 8/1/2020 to 12/30/2020

**Request Funding Source:**

- Coronavirus Relief Fund (if selected complete page 2)
- Health Care Response Fund
- COVID-19 Minnesota Fund

**Brief Summary of Request:** (Summary must be complete on this page with supporting information attached)

**Recommendation:** This proposal requests \$7 million from the Coronavirus Relief Fund to maintain and expand the testing infrastructure it has built over the last few months, to accommodate anticipated increased demand related to the spread of the virus and expanded visitation by friends and family members of residents.

**Rationale:** A robust testing regimen is a key component of a comprehensive plan to keep LTC residents and staff safe from the spread of COVID-19. As Minnesota LTC facilities move towards reopening to additional visitors, and as continued spread of the virus creates new risks of infection, ensuring that testing is available when and where needed in these vulnerable communities will be even more critical. This proposal addresses two of the biggest barriers to successfully implementing testing in LTC: 1) staff to collect specimens, and 2) support for coordination and management of the complex logistics of testing.

1) Specimen Collection. Since May, Minnesota has primarily relied on the MN National Guard to swab residents and staff in LTC facilities. With the pending release of National Guard troops, and anticipated higher testing demand between now and the end of the calendar year, the State will enter into multiple contracts with health systems, regional healthcare coalitions, and staffing companies to ensure there are sufficient swabbing teams available. Anticipated total contractual obligations under this proposal are \$6,700,000.

2) Coordination and Management. Since May, the State has required 6 FTE staff to work with facilities to plan for testing, coordinate transport of supplies and testing teams, and oversee daily reporting. This proposal would support continued funding through the end of the calendar year for those staff, plus one additional FTE for managing contracts and overseeing reimbursement of staff testing costs for LTC facilities that lack other mechanisms to cover these costs. Total commitment for staffing under this proposal is \$300,000.

An additional \$8 million for specimen processing is being carried in the broader testing budget.

**Margaret Kelly**  
Digitally signed by Margaret Kelly  
Date: 2020.08.06 14:24:32 -05'00'  
Department Head Signature

8/6/2020  
Date

## Coronavirus Relief Fund (CRF) Categories

<b>Medical Expenses</b>	<input type="checkbox"/> Costs incurred by public hospitals, clinics, and similar facilities
	<input type="checkbox"/> Establishing temporary public medical facilities and other measures to increase treatment capacity, including related construction costs
	<input checked="" type="checkbox"/> Testing, including serological testing
	<input type="checkbox"/> Emergency medical response expenses, including emergency medical transportation
	<input type="checkbox"/> Establishing and operating public telemedicine capabilities for COVID-19 related treatment
<b>Public Health Expenses</b>	<input type="checkbox"/> Communication and enforcement of public health orders related to COVID-19.
	<input type="checkbox"/> Acquisition and distribution of medical and protective supplies, including sanitizing products and personal protective equipment, for medical personnel, police officers, social workers, child protection services, and child welfare officers, direct service providers for older adults and individuals with disabilities in community settings, and other public health or safety workers
	<input type="checkbox"/> Disinfection of public areas and other facilities, e.g., nursing homes, in response to the COVID-19 public health emergency
	<input type="checkbox"/> Technical assistance to local authorities or other entities on mitigation of COVID-19-related threats to public health and safety
	<input type="checkbox"/> Public safety measures undertaken in response to COVID-19
	<input type="checkbox"/> Expenses for quarantining individuals
	<input type="checkbox"/> Contact tracing
	<input type="checkbox"/> Recovery planning projects or operating a recovery coordination office
<b>Payroll Expenses</b>	<input type="checkbox"/> Payroll expenses for public safety, public health, health care, human services, and similar employees whose services are substantially dedicated to mitigating or responding to the COVID-19 public health emergency.
<b>Compliance with Public Health Measures</b>	<input type="checkbox"/> Food delivery to residents, including, for example, senior citizens and other vulnerable populations, to enable compliance with COVID-19 public health precautions.
	<input type="checkbox"/> Facilitate distance learning, including technological improvements, in connection with school closings to enable compliance with COVID-19 precautions.
	<input type="checkbox"/> Improve telework capabilities for public employees to enable compliance with COVID-19 public health precautions
	<input type="checkbox"/> Providing paid sick and paid family and medical leave to public employees to enable compliance with COVID-19 public health precautions
	<input type="checkbox"/> Maintaining state prisons and county jails, including sanitation and the improvement of social distancing measures, to enable compliance with COVID-19 public health precautions
	<input type="checkbox"/> Care for homeless populations provided to mitigate COVID-19 effects and enable compliance with COVID-19 public health precautions
<b>Economic Support</b>	<input type="checkbox"/> Provision of grants to small businesses to reimburse the costs of business interruption caused by required closures
	<input type="checkbox"/> Expenditures related to a state, territorial, local, or tribal government payroll support program.
	<input type="checkbox"/> Unemployment insurance costs related to the COVID-19 public health emergency if such costs will not be reimbursed by the federal government pursuant to the CARES Act or otherwise
	<input type="checkbox"/> Facilitation of livestock depopulation incurred by producers due to supply chain disruption
	<input type="checkbox"/> Programs designed to prevent eviction and assist in preventing homelessness due to COVID-19 public health emergency
	<input type="checkbox"/> Employment and training programs for employees that have been furloughed due to the COVID-19 public health emergency
	<input type="checkbox"/> Emergency financial assistance to individuals or families directly impacted by loss of income
<b>Other</b>	<input type="checkbox"/> Other COVID-19-related expenses reasonably necessary to the function of government that satisfy the Fund's eligibility criteria. If this category is selected, please explain further here:

### CRF Fund Request Confirmations

- **Confirm that your CRF funding request meets federal guidance: (1) as a necessary expenditure to respond to the COVID-19 public health emergency, (2) is not accounted in the current biennial budget and (3) funds will be expended by December 30, 2020.**
- **Confirm that your CRF funding request does NOT include expenses that cover:**
  - The state's share of Medicaid costs
  - Damages covered by insurance
  - Payroll or benefits of employees whose work duties are not substantially dedicated to mitigating or responding to COVID-19
  - Costs reimbursed under other federal programs or funding sources
  - Reimbursement to donors for donated items or services
  - Workforce bonuses other than hazard pay or overtime
  - Severance pay
  - Government revenue replacement, including provision of assistance to individuals or businesses to meet tax obligations
- **Confirm that your agency will maintain records related to these expenses that will be sufficient to demonstrate that they are in accordance with the requirements of the CARES Act.**
- **Confirm that your agency has the approval of the lead of the selected work group to submit this proposal.**

**Coronavirus Relief / Health Care Response / COVID-19 Minnesota Funds Request Form**

Please complete this form in accordance with the process instructions.

**Agency/Point of Contact:** Minnesota Department of Health/ Margaret Kelly, Deputy Commissioner

**Title of Request:** Additional Testing Processing Capacity

**Date:** 8/3/2020 **Request Amount:** \$ 55,000,000

**Expenditure Time Period:** 7/1/2020 to 12/30/2020

**Request Funding Source:**

- Coronavirus Relief Fund (if selected complete page 2)
- Health Care Response Fund
- COVID-19 Minnesota Fund

**Brief Summary of Request:** (Summary must be complete on this page with supporting information attached)

This proposal supports the Minnesota Testing Plan by purchasing additional capacity for test process across the state. The The goals of the Minnesota Testing Plan are to: minimize illness and death, optimize health care and public health resources, protect vulnerable populations, understand the epidemiology of and control the disease, and test to inform future changes in required social distancing measures. Minnesota's initial contract with Mayo Clinic and the University of Minnesota (UMN) intended to help Minnesota attain 20,000 test per day capacity throughout our health care system and set aside \$18 million to cover the upfront costs of processing test samples. As of August 4, 2020 the contract has provided for 325,428 COVID-19 PCR tests conducted in accordance with the goals of the state testing plan and consistent with MDH guidance on priority populations for testing. However, since April, both UMN and Mayo have exceeded the testing line items of the contract, and resources from other budget line items have been reallocated to the testing budget. Despite those efficiencies, we have exhausted budgets for testing and now require additional dollars. Mayo and UMN are billing insurers for the cost of testing, and working with MDH to return those reimbursements to the COVID-19 fund. Currently, billings represent roughly 60% of total test costs.)

We anticipate the demand for testing will continue to increase during the remainder of 2020. This proposal will purchase additional capacity for test processing at Mayo and UMN as well as Hennepin Healthcare. Similar to the investments in lab equipment for Mayo and UMN, we recently contracted with Hennepin Healthcare for to purchase instruments to increase their testing capacity (4 Seegene Starlets). This funding for lab capacity will leverage that purchase through a contract with Hennepin Healthcare for their added capacity. Finally, we will continue to seek out other test processing capacity contracts to ensure capacity to meet the demand from LTC and mobile testing events. This request would allow MDH to enter into multiple contracts for test processing capacity. Our expectation will be that each contracted vendor seek insurance reimbursement on behalf of the individuals tested, and return the reimbursement funds to the state to offset testing costs.

These resources will be needed to meet aggressive testing goals in line with CDC guidance to mitigate and control COVID-19. Our estimates anticipate the demand for testing from the Department of Corrections, childcare, preschool and K-12, higher education, long term care, workplace and mobile community/hot spot testing. We are assuming that this investment will fund testing costs for the next 8-10 weeks with 75% of the costs reimbursed and returned to the state. We will seek additional authority to spend the reimbursements to continue meeting the demand for testing through the end of the year. The logistical and infrastructure costs of mobile testing events will come in a separate request.

**Margaret Kelly** Digitally signed by Margaret Kelly  
Date: 2020.08.06 15:12:04 -05'00'  
Department Head Signature

8/6/2020  
Date

## Coronavirus Relief Fund (CRF) Categories

<b>Medical Expenses</b>	<input type="checkbox"/> Costs incurred by public hospitals, clinics, and similar facilities
	<input type="checkbox"/> Establishing temporary public medical facilities and other measures to increase treatment capacity, including related construction costs
	<input checked="" type="checkbox"/> Testing, including serological testing
	<input type="checkbox"/> Emergency medical response expenses, including emergency medical transportation
	<input type="checkbox"/> Establishing and operating public telemedicine capabilities for COVID-19 related treatment
<b>Public Health Expenses</b>	<input type="checkbox"/> Communication and enforcement of public health orders related to COVID-19.
	<input type="checkbox"/> Acquisition and distribution of medical and protective supplies, including sanitizing products and personal protective equipment, for medical personnel, police officers, social workers, child protection services, and child welfare officers, direct service providers for older adults and individuals with disabilities in community settings, and other public health or safety workers
	<input type="checkbox"/> Disinfection of public areas and other facilities, e.g., nursing homes, in response to the COVID-19 public health emergency
	<input type="checkbox"/> Technical assistance to local authorities or other entities on mitigation of COVID-19-related threats to public health and safety
	<input type="checkbox"/> Public safety measures undertaken in response to COVID-19
	<input type="checkbox"/> Expenses for quarantining individuals
	<input type="checkbox"/> Contact tracing
	<input type="checkbox"/> Recovery planning projects or operating a recovery coordination office
<b>Payroll Expenses</b>	<input type="checkbox"/> Payroll expenses for public safety, public health, health care, human services, and similar employees whose services are substantially dedicated to mitigating or responding to the COVID-19 public health emergency.
<b>Compliance with Public Health Measures</b>	<input type="checkbox"/> Food delivery to residents, including, for example, senior citizens and other vulnerable populations, to enable compliance with COVID-19 public health precautions.
	<input type="checkbox"/> Facilitate distance learning, including technological improvements, in connection with school closings to enable compliance with COVID-19 precautions.
	<input type="checkbox"/> Improve telework capabilities for public employees to enable compliance with COVID-19 public health precautions
	<input type="checkbox"/> Providing paid sick and paid family and medical leave to public employees to enable compliance with COVID-19 public health precautions
	<input type="checkbox"/> Maintaining state prisons and county jails, including sanitation and the improvement of social distancing measures, to enable compliance with COVID-19 public health precautions
	<input type="checkbox"/> Care for homeless populations provided to mitigate COVID-19 effects and enable compliance with COVID-19 public health precautions
<b>Economic Support</b>	<input type="checkbox"/> Provision of grants to small businesses to reimburse the costs of business interruption caused by required closures
	<input type="checkbox"/> Expenditures related to a state, territorial, local, or tribal government payroll support program.
	<input type="checkbox"/> Unemployment insurance costs related to the COVID-19 public health emergency if such costs will not be reimbursed by the federal government pursuant to the CARES Act or otherwise
	<input type="checkbox"/> Facilitation of livestock depopulation incurred by producers due to supply chain disruption
	<input type="checkbox"/> Programs designed to prevent eviction and assist in preventing homelessness due to COVID-19 public health emergency
	<input type="checkbox"/> Employment and training programs for employees that have been furloughed due to the COVID-19 public health emergency
	<input type="checkbox"/> Emergency financial assistance to individuals or families directly impacted by loss of income
<b>Other</b>	<input type="checkbox"/> Other COVID-19-related expenses reasonably necessary to the function of government that satisfy the Fund's eligibility criteria. If this category is selected, please explain further here:

### CRF Fund Request Confirmations

- **Confirm that your CRF funding request meets federal guidance: (1) as a necessary expenditure to respond to the COVID-19 public health emergency, (2) is not accounted in the current biennial budget and (3) funds will be expended by December 30, 2020.**
- **Confirm that your CRF funding request does NOT include expenses that cover:**
  - The state's share of Medicaid costs
  - Damages covered by insurance
  - Payroll or benefits of employees whose work duties are not substantially dedicated to mitigating or responding to COVID-19
  - Costs reimbursed under other federal programs or funding sources
  - Reimbursement to donors for donated items or services
  - Workforce bonuses other than hazard pay or overtime
  - Severance pay
  - Government revenue replacement, including provision of assistance to individuals or businesses to meet tax obligations
- **Confirm that your agency will maintain records related to these expenses that will be sufficient to demonstrate that they are in accordance with the requirements of the CARES Act.**
- **Confirm that your agency has the approval of the lead of the selected work group to submit this proposal.**

**Coronavirus Relief / Health Care Response / COVID-19 Minnesota Funds Request Form**

Please complete this form in accordance with the process instructions.

**Agency/Point of Contact:** Minnesota Department of Health/Margaret Kelly, Deputy Commissioner

**Title of Request:** Vault/RUCDR COVID Saliva Lab Capacity

**Date:** 8/11/2020 **Request Amount:** \$ 14,660,000

**Expenditure Time Period:** 8/11/2020 to 12/30/2020

**Request Funding Source:**

- Coronavirus Relief Fund (if selected complete page 2)
- Health Care Response Fund
- COVID-19 Minnesota Fund

**Brief Summary of Request:** (Summary must be complete on this page with supporting information attached)

The Harvard School of Public Health published thresholds for mitigation and suppression of COVID-19 in each state. Their recommendations for Minnesota are 17,361 tests processed per day to mitigate the virus (keeping the size of current outbreaks from growing), and 63,558 tests processed per day to suppress the virus (greatly reducing new infections and keeping them low enough to safely open public life again). Based on these recommendations, and analysis of testing trends and demand into the fall and winter, the Commissioner recommends building available capacity for 45,000 tests per day. Current capacity for processing COVID-19 testing across all state providers is approximately 22,000 tests per day.

In order to meet this goal and push the state closer to suppression of the disease, we must expand lab capacity. Current capacity for processing COVID-19 testing across all state providers is approximately 22,000 tests per day . Given shortages in supplies and instrumentation as well as other constraints such as a trained medical professional needed to complete most swabs in person, further expansion of testing capacity within the state's existing labs is limited and uncertain during the remainder of 2020. Thus, the state, at the urging of federal partners, sought out to build lab capacity with equipment and supplies that have stronger, more abundant supply chains and that include self-collection methods.

Vault Health and RUCDR Infinite Biologics, a part of the Rutgers University Human Genetics Institute of New Jersey, are partnered to provide at-home and in-person saliva sample collection and test processing for COVID-19. They currently have an emergency use authorization (EUA) from the federal government. MDH public health lab personnel have reviewed RUCDR test data and have concurred their test is as sensitive and accurate as nearly any test on the market. Clients include Bristol Myers Squibb, Space X, MLS, MLB, local jurisdictions in several states and many others.

This request is for funding to assist RUDCR/Vault Health to establish a COVID-19 saliva sample testing lab in Oakdale, Minnesota processing as many as 30,000 samples per day. The lab will create 250 jobs. \$3.0 million will be used for laboratory testing equipment and \$2.2 million for initial operating costs (leased space, personnel and supplies). These investments will allow the lab to get up an running and will lower the cost of test processing for the state. An additional \$9 million will pre-purchase tests, which the lab will bill insurers for and then reimburse the state. Finally, Vault/RUCDR will operate the state's semi-permanent test collection sites, in addition to mail-order testing program to provide adequate testing access to all Minnesotans. Each site will employ roughly 20 people. Health systems, employers, and other institutions will be able to buy excess capacity the state does not use. The lab expects to be operational in September.

**Margaret Kelly** Digitally signed by Margaret Kelly  
Date: 2020.08.11 15:19:47 -05'00'  
Department Head Signature

8/11/2020  
Date

## Coronavirus Relief Fund (CRF) Categories

<b>Medical Expenses</b>	<input type="checkbox"/> Costs incurred by public hospitals, clinics, and similar facilities
	<input type="checkbox"/> Establishing temporary public medical facilities and other measures to increase treatment capacity, including related construction costs
	<input checked="" type="checkbox"/> Testing, including serological testing
	<input type="checkbox"/> Emergency medical response expenses, including emergency medical transportation
	<input type="checkbox"/> Establishing and operating public telemedicine capabilities for COVID-19 related treatment
<b>Public Health Expenses</b>	<input type="checkbox"/> Communication and enforcement of public health orders related to COVID-19.
	<input type="checkbox"/> Acquisition and distribution of medical and protective supplies, including sanitizing products and personal protective equipment, for medical personnel, police officers, social workers, child protection services, and child welfare officers, direct service providers for older adults and individuals with disabilities in community settings, and other public health or safety workers
	<input type="checkbox"/> Disinfection of public areas and other facilities, e.g., nursing homes, in response to the COVID-19 public health emergency
	<input type="checkbox"/> Technical assistance to local authorities or other entities on mitigation of COVID-19-related threats to public health and safety
	<input type="checkbox"/> Public safety measures undertaken in response to COVID-19
	<input type="checkbox"/> Expenses for quarantining individuals
	<input type="checkbox"/> Contact tracing
<b>Payroll Expenses</b>	<input type="checkbox"/> Recovery planning projects or operating a recovery coordination office
	<input type="checkbox"/> Payroll expenses for public safety, public health, health care, human services, and similar employees whose services are substantially dedicated to mitigating or responding to the COVID-19 public health emergency.
<b>Compliance with Public Health Measures</b>	<input type="checkbox"/> Food delivery to residents, including, for example, senior citizens and other vulnerable populations, to enable compliance with COVID-19 public health precautions.
	<input type="checkbox"/> Facilitate distance learning, including technological improvements, in connection with school closings to enable compliance with COVID-19 precautions.
	<input type="checkbox"/> Improve telework capabilities for public employees to enable compliance with COVID-19 public health precautions
	<input type="checkbox"/> Providing paid sick and paid family and medical leave to public employees to enable compliance with COVID-19 public health precautions
	<input type="checkbox"/> Maintaining state prisons and county jails, including sanitation and the improvement of social distancing measures, to enable compliance with COVID-19 public health precautions
	<input type="checkbox"/> Care for homeless populations provided to mitigate COVID-19 effects and enable compliance with COVID-19 public health precautions
<b>Economic Support</b>	<input type="checkbox"/> Provision of grants to small businesses to reimburse the costs of business interruption caused by required closures
	<input type="checkbox"/> Expenditures related to a state, territorial, local, or tribal government payroll support program.
	<input type="checkbox"/> Unemployment insurance costs related to the COVID-19 public health emergency if such costs will not be reimbursed by the federal government pursuant to the CARES Act or otherwise
	<input type="checkbox"/> Facilitation of livestock depopulation incurred by producers due to supply chain disruption
	<input type="checkbox"/> Programs designed to prevent eviction and assist in preventing homelessness due to COVID-19 public health emergency
	<input type="checkbox"/> Employment and training programs for employees that have been furloughed due to the COVID-19 public health emergency
	<input type="checkbox"/> Emergency financial assistance to individuals or families directly impacted by loss of income
<b>Other</b>	<input type="checkbox"/> Other COVID-19-related expenses reasonably necessary to the function of government that satisfy the Fund's eligibility criteria. If this category is selected, please explain further here:

### CRF Fund Request Confirmations

- **Confirm that your CRF funding request meets federal guidance: (1) as a necessary expenditure to respond to the COVID-19 public health emergency, (2) is not accounted in the current biennial budget and (3) funds will be expended by December 30, 2020.**
- **Confirm that your CRF funding request does NOT include expenses that cover:**
  - The state's share of Medicaid costs
  - Damages covered by insurance
  - Payroll or benefits of employees whose work duties are not substantially dedicated to mitigating or responding to COVID-19
  - Costs reimbursed under other federal programs or funding sources
  - Reimbursement to donors for donated items or services
  - Workforce bonuses other than hazard pay or overtime
  - Severance pay
  - Government revenue replacement, including provision of assistance to individuals or businesses to meet tax obligations
- **Confirm that your agency will maintain records related to these expenses that will be sufficient to demonstrate that they are in accordance with the requirements of the CARES Act.**
- **Confirm that your agency has the approval of the lead of the selected work group to submit this proposal.**



Please complete this form in accordance with the process instructions.

**Agency/Point of Contact:** Minnesota Department of Health/Margaret Kelly, Deputy Commissioner

**Title of Request:** COVID-19 Case Investigation and Contact Tracing

**Date:** 8/7/2020 **Request Amount:** \$ 35,091,423

**Expenditure Time Period:** 5/1/2020 to 12/30/2020

**Request Funding Source:**

- Coronavirus Relief Fund (if selected complete page 2)
- Health Care Response Fund
- COVID-19 Minnesota Fund

**Brief Summary of Request:** (Summary must be complete on this page with supporting information attached)

MDH requests \$35.1 million of funding from the CRF to meet the need for case investigation and contact tracing activities to limit the spread of COVID-19 in the coming months. We are revising how we approach this work to make it more effective with rising case growth rates, increasing transmission without a known contact (community spread), and higher incidence and positivity rates among communities of color. By moving our work upstream we can better inform people who may be infectious so they can protect their health and avoid transmitting the virus to others. Through early identification and intervention with high risk settings we can further limit the spread of the virus and prevent outbreaks. Through outreach to communities disproportionately at risk of COVID-19 and affected by COVID-19 we can improve access to testing, quickly identify cases and contacts, and provide information and needed resources through trusted community partners.

This request includes funding to:

- Provide capacity to community based organizations to serve people of color, Indigenous communities, LGTBQA and people with disabilities, using culturally relevant, linguistically appropriate, and timely strategies to connect communities to testing, assist at testing events, and connect individuals to resources addressing their multifaceted needs related to COVID-19. (\$10 million for contracts, MDH capacity)
- Provide staffing through local partnerships and contracted surge staffing. Staff will conduct case investigation and contact tracing, primarily at the local level. Specialized teams at MDH will provide guidance and support to high-risk settings, conduct timely "hot spot" response work. We will continue to work with local and tribal public health, colleges and universities, volunteers, community based organizations as well as a staffing vendor for surge capacity. Staffing and program design will reflect diverse communities and geographies. (\$21.15 million)
- Contract with a vendor to manage the scheduling to meet daily caseload, provide virtual learning system for all personnel; as well as the on-boarding, off-boarding, training, supervision, and performance management of the additional staff; and to ensure quality control of their work. (\$3.94 million)

Margaret Kelly Digitally signed by Margaret Kelly  
Date: 2020.08.07 13:05:39 -05'00'  
Department Head Signature

8/7/2020  
Date

## Coronavirus Relief Fund (CRF) Categories

<b>Medical Expenses</b>	<input type="checkbox"/> Costs incurred by public hospitals, clinics, and similar facilities
	<input type="checkbox"/> Establishing temporary public medical facilities and other measures to increase treatment capacity, including related construction costs
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<b>Payroll Expenses</b>	<input type="checkbox"/> Recovery planning projects or operating a recovery coordination office
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<b>Compliance with Public Health Measures</b>	<input type="checkbox"/> Food delivery to residents, including, for example, senior citizens and other vulnerable populations, to enable compliance with COVID-19 public health precautions.
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<b>Economic Support</b>	<input type="checkbox"/> Provision of grants to small businesses to reimburse the costs of business interruption caused by required closures
	<input type="checkbox"/> Expenditures related to a state, territorial, local, or tribal government payroll support program.
	<input type="checkbox"/> Unemployment insurance costs related to the COVID-19 public health emergency if such costs will not be reimbursed by the federal government pursuant to the CARES Act or otherwise
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	<input type="checkbox"/> Emergency financial assistance to individuals or families directly impacted by loss of income
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  - Damages covered by insurance
  - Payroll or benefits of employees whose work duties are not substantially dedicated to mitigating or responding to COVID-19
  - Costs reimbursed under other federal programs or funding sources
  - Reimbursement to donors for donated items or services
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  - Severance pay
  - Government revenue replacement, including provision of assistance to individuals or businesses to meet tax obligations
- **Confirm that your agency will maintain records related to these expenses that will be sufficient to demonstrate that they are in accordance with the requirements of the CARES Act.**
- **Confirm that your agency has the approval of the lead of the selected work group to submit this proposal.**

**Coronavirus Relief / Health Care Response / COVID-19 Minnesota Funds Request Form**

Please complete this form in accordance with the process instructions.

**Agency/Point of Contact:** Minnesota Department of Health, Margaret Kelly

**Title of Request:** Tribal Public Health

**Date:** 8/7/2020 **Request Amount:** \$ 2,578,978

**Expenditure Time Period:** 5/1/2020 to 12/30/2020

**Request Funding Source:**

- Coronavirus Relief Fund (if selected complete page 2)
- Health Care Response Fund
- COVID-19 Minnesota Fund

**Brief Summary of Request:** (Summary must be complete on this page with supporting information attached)

Tribal public health departments play a critical role in COVID-19 response and preventing the spread of the virus. Their work is similar to that of state and local public health agencies: they work to prevent outbreaks in congregate living settings (LTC facilities, jails, and group homes), and work places (food processing plants, grocery stores, health care facilities, public utilities, and transportation providers); they partner with MDH and local governments to identify and respond to hotspots/case clusters; they identify testing needs and assist in coordinating testing operations; and they provide essential services so people can successfully isolate, including but not limited to, adequate food, clothing, shelter, means of communication between those in isolation or quarantine and those outside these settings, medication, and competent medical care.

American Indians in Minnesota have higher rates of chronic health conditions. The incidence of COVID-19 among American Indians has increased 48 percent in the past four weeks. American Indians have the highest age adjusted rate of deaths from COVID-19 and the highest age adjusted rate of hospitalizations and ICU admissions.

While the need for additional funding is similar to the need at both the state and local level, Tribal Governments were not included in the state's allocation of \$841 million to local units. This request for funding will provide Tribal Governments with additional resources to address the public health response needs. Funding will be allocated based on a population-based formula.

Margaret Kelly Digitally signed by Margaret Kelly  
Date: 2020.08.07 11:58:35 -05'00'  
Department Head Signature

8/7/2020  
Date

## Coronavirus Relief Fund (CRF) Categories

<b>Medical Expenses</b>	<input type="checkbox"/> Costs incurred by public hospitals, clinics, and similar facilities
	<input type="checkbox"/> Establishing temporary public medical facilities and other measures to increase treatment capacity, including related construction costs
	<input checked="" type="checkbox"/> Testing, including serological testing
	<input type="checkbox"/> Emergency medical response expenses, including emergency medical transportation
	<input type="checkbox"/> Establishing and operating public telemedicine capabilities for COVID-19 related treatment
<b>Public Health Expenses</b>	<input type="checkbox"/> Communication and enforcement of public health orders related to COVID-19.
	<input checked="" type="checkbox"/> Acquisition and distribution of medical and protective supplies, including sanitizing products and personal protective equipment, for medical personnel, police officers, social workers, child protection services, and child welfare officers, direct service providers for older adults and individuals with disabilities in community settings, and other public health or safety workers
	<input type="checkbox"/> Disinfection of public areas and other facilities, e.g., nursing homes, in response to the COVID-19 public health emergency
	<input type="checkbox"/> Technical assistance to local authorities or other entities on mitigation of COVID-19-related threats to public health and safety
	<input type="checkbox"/> Public safety measures undertaken in response to COVID-19
	<input checked="" type="checkbox"/> Expenses for quarantining individuals
	<input checked="" type="checkbox"/> Contact tracing
<b>Payroll Expenses</b>	<input type="checkbox"/> Recovery planning projects or operating a recovery coordination office
	<input checked="" type="checkbox"/> Payroll expenses for public safety, public health, health care, human services, and similar employees whose services are substantially dedicated to mitigating or responding to the COVID-19 public health emergency.
<b>Compliance with Public Health Measures</b>	<input checked="" type="checkbox"/> Food delivery to residents, including, for example, senior citizens and other vulnerable populations, to enable compliance with COVID-19 public health precautions.
	<input checked="" type="checkbox"/> Facilitate distance learning, including technological improvements, in connection with school closings to enable compliance with COVID-19 precautions.
	<input type="checkbox"/> Improve telework capabilities for public employees to enable compliance with COVID-19 public health precautions
	<input type="checkbox"/> Providing paid sick and paid family and medical leave to public employees to enable compliance with COVID-19 public health precautions
	<input type="checkbox"/> Maintaining state prisons and county jails, including sanitation and the improvement of social distancing measures, to enable compliance with COVID-19 public health precautions
	<input checked="" type="checkbox"/> Care for homeless populations provided to mitigate COVID-19 effects and enable compliance with COVID-19 public health precautions
<b>Economic Support</b>	<input type="checkbox"/> Provision of grants to small businesses to reimburse the costs of business interruption caused by required closures
	<input type="checkbox"/> Expenditures related to a state, territorial, local, or tribal government payroll support program.
	<input type="checkbox"/> Unemployment insurance costs related to the COVID-19 public health emergency if such costs will not be reimbursed by the federal government pursuant to the CARES Act or otherwise
	<input type="checkbox"/> Facilitation of livestock depopulation incurred by producers due to supply chain disruption
	<input type="checkbox"/> Programs designed to prevent eviction and assist in preventing homelessness due to COVID-19 public health emergency
	<input type="checkbox"/> Employment and training programs for employees that have been furloughed due to the COVID-19 public health emergency
	<input type="checkbox"/> Emergency financial assistance to individuals or families directly impacted by loss of income
<b>Other</b>	<input type="checkbox"/> Other COVID-19-related expenses reasonably necessary to the function of government that satisfy the Fund's eligibility criteria. If this category is selected, please explain further here:

### CRF Fund Request Confirmations

- **Confirm that your CRF funding request meets federal guidance: (1) as a necessary expenditure to respond to the COVID-19 public health emergency, (2) is not accounted in the current biennial budget and (3) funds will be expended by December 30, 2020.**
- **Confirm that your CRF funding request does NOT include expenses that cover:**
  - The state's share of Medicaid costs
  - Damages covered by insurance
  - Payroll or benefits of employees whose work duties are not substantially dedicated to mitigating or responding to COVID-19
  - Costs reimbursed under other federal programs or funding sources
  - Reimbursement to donors for donated items or services
  - Workforce bonuses other than hazard pay or overtime
  - Severance pay
  - Government revenue replacement, including provision of assistance to individuals or businesses to meet tax obligations
- **Confirm that your agency will maintain records related to these expenses that will be sufficient to demonstrate that they are in accordance with the requirements of the CARES Act.**
- **Confirm that your agency has the approval of the lead of the selected work group to submit this proposal.**