

Opportunities to Leverage American Rescue Plan Act (ARPA) Funds to Grow NWD Systems

Introduction

On March 11, 2021 President Biden signed the American Rescue Plan Act (ARPA) (H.R. 1319) into law. The final package included numerous provisions that offer opportunities for No Wrong Door (NWD) Systems to leverage funding to support planning, implementation and sustainability. This document outlines some of those opportunities and how they relate to each of the four No Wrong Door (NWD) functions.¹

NWD Systems currently utilize numerous funding streams administered by multiple federal, state, and local agencies. The funds granted by the ARPA provide additional opportunities for states to broaden the impact and reach of their existing efforts to build a seamless system of access to long term services and supports (LTSS) for all populations and payers. State health and human service leaders have an important and timely opportunity to evolve from focusing not only on administration and oversight of federal and state funding, but also to serve as strategists working across state government and beyond to ensure adequate growth and modernization of aging and disability networks in their states.² While the ARPA funds present a tremendous opportunity for states to meet the urgent and immediate needs of their population, states should also consider leveraging the funds to grow and sustain their NWD System. For example, if NWD Systems hire new staff with ARPA funds, sustainability planning should be on the radar, including tracking outcomes that could demonstrate the business case for supporting the position permanently. Additionally, as NWD Systems engage in vaccine outreach efforts, they can think about how to leverage those efforts to strengthen partnerships and further educate the public on the information and options counseling available for current or future LTSS needs through the NWD System.

The following table outlines specific sections in the ARPA that dedicate funds for functions carried out by the NWD System to increase the reach to older adults and individuals with disabilities and other populations. While a portion of these funds will be available through grants from ACL, additional funding opportunities will be awarded by other agencies. NWD Systems can reach out to these agencies within their state to forge partnerships and support the goals across funding streams. The NWD System can also encourage their local partners to apply for funding that is available.

¹ For additional information on other sections of the [American Rescue Plan Act](https://www.nashp.org/the-2021-american-rescue-plan-acts-major-health-care-provisions/), please visit <https://www.nashp.org/the-2021-american-rescue-plan-acts-major-health-care-provisions/>.

² For additional information on the Key Elements of a NWD System of Access to LTSS for All Populations and Payers, please visit <https://nwd.acl.gov/pdf/NWD-National-Elements.pdf>.



Funding Guide

Title; Section	NWD Function	Funding Amount	Description
Emergency Grants for Rural Health; Section 1002	Governance and administration; Public outreach and Coordination with Key Referral Sources; Person-Centered Counseling	\$500 million	Provides funding for community facilities that serve rural areas for health infrastructure, COVID-19 vaccinations, testing and treatment.
Commodity Supplemental Food Program; Section 1104	Governance and administration; Public outreach and Coordination with Key Referral Sources; Person-Centered Counseling; Streamlined Eligibility for Public Programs	\$37 million	Provides funding to the Commodity Supplemental Food Program to ensure low-income seniors can continue to access nutritious foods.
Funding for COVID–19 Vaccine Activities at the Centers for Disease Control and Prevention (CDC)³; Section 2301	Governance and administration; Public outreach and Coordination with Key Referral Sources	\$7.5 billion	Provides funding to the Secretary of Health and Human Services (HHS) to provide to the CDC for COVID–19 vaccine distribution and administration, including support for State, local, Tribal, and territorial public health departments. Activities include the establishment and expansion of community vaccination centers and mobile vaccination units, particularly in underserved areas; reporting enhancements; communication efforts; and transportation of individuals to vaccination, particularly underserved populations.

³ See the ACL announcement about the ACL/CDC partnership here: <https://acl.gov/news-and-events/announcements/partnership-cdc-increase-access-covid-19-vaccines>

Title; Section	NWD Function	Funding Amount	Description
Funding for Public Health Workforce; Section 2501	Governance and administration; Public outreach and Coordination with Key Referral Sources; Person-Centered Counseling; Streamlined Eligibility for Public Programs	\$150 million	Provides funding to recruit, hire, and train public health workers to respond to the COVID-19 pandemic and to prepare for future public health challenges, including establishing, expanding, and sustaining a public health workforce. These funds may be used to support costs, wages, and benefits of public health professionals, such as community health workers, communication and policy experts, etc.
Funding for Community Health Centers and Community Care; Section 2601	Person-Centered Counseling	\$7.6 billion	Funds appropriated through HHS to establish, expand, and sustain the public health workforce to aid: <ul style="list-style-type: none"> ▪ Planning, promoting, distributing, and tracking COVID-19 vaccines and other vaccine-related activities, and ▪ Detecting, diagnosing, tracing, and monitoring COVID-19 infections and related efforts to mitigate the spread of COVID-19.
Funding for Community-Based Funding for Local Behavioral Health Needs; Section 2707	Public outreach and Coordination with Key Referral Sources; Person-Centered Counseling	\$50 million	Provides grants to states, local, tribal, and territorial governments, tribal and non-profit community-based organizations, and primary and behavioral health organizations to address increased community behavioral health needs worsened by COVID-19.
Supporting Older Americans and their Families; Section 2921	Governance and administration; Public outreach and Coordination with Key Referral Sources; Person-Centered Counseling; Streamlined Eligibility for Public Programs	\$1.4 billion total	<ul style="list-style-type: none"> ▪ \$750 million to support nutrition programs for older Americans. ▪ \$25 million for services, including nutrition, for Native American communities. ▪ \$460 million to support home and community-based support services program, including support for COVID-19 vaccination outreach and coordination and addressing social isolation. ▪ \$44 million for evidence-based health promotion and disease prevention. ▪ \$145 million for the National Family Caregiver Support Program. ▪ \$10M to carry out the long-term care ombudsman program.

Title; Section	NWD Function	Funding Amount	Description
Additional Funding for Aging and Disability Services Program; Section 9301	Governance and administration; Public outreach and Coordination with Key Referral Sources; Person-Centered Counseling	\$274 million- \$88 million for FY 21, \$188 million for FY 22	Provides additional funding for long-term care ombudsman programs, elder abuse forensic centers, and grants to states for adult protective services.
Providing for Infection Control Support to Skilled Nursing Facilities Through Contracts with Quality Improvement Agencies; Section 9401	Governance and administration; Public outreach and Coordination with Key Referral Sources; Person-Centered Counseling	\$200 million	Provides funding to carry out infection control and vaccine uptake support related to COVID-19 in skilled nursing facilities through the development and dissemination of COVID-19 protocols by contracted quality improvement organizations
Funding for Strike Teams For Resident and Employee Safety in Skilled Nursing Facilities; Section 9402	Governance and administration; Public outreach and Coordination with Key Referral Sources; Person-Centered Counseling	\$250 million	Provides funding to establish strike teams to respond to suspected or confirmed COVID-19 outbreaks in skilled nursing facilities, including assisting with clinical care, infection control, or staffing.
Enhanced Federal Medical Assistance Percentage (FMAP) for Mobile Crisis Intervention Services; Section 9813	Governance and administration; Public outreach and Coordination with Key Referral Sources; Streamlined Eligibility for Public Programs	\$15 million	State option to provide Medicaid coverage for qualifying community-based mobile crisis intervention services. Provides 85% FMAP for these services. Contains \$15 million in funding for state planning grants for purposes of developing a state plan or waiver.

Title; Section	NWD Function	Funding Amount	Description
<p>COVID-19 relief funds for rural providers; Section 9911</p>	<p>Governance and administration; Person-Centered Counseling</p>	<p>\$8.5 billion</p>	<p>Provides 10 percentage point increase in federal matching funds (capped at 95%) for HCBS.</p> <p>States shall use increased funds to supplement, not supplant, the level of state HCBS spending to implement or expand one or more activities to enhance HCBS. Applies to state plan home health, personal care, PACE, primary care case management, § 1915 (i), self-directed personal assistance, Community First Choice, case management, and rehabilitative option, § 1915 (c) and § 1115 waivers, and alternative benefit plans.</p>
<p>Fiscal Recovery Funds; Section 9901</p>	<p>Governance and Administration; Public Outreach and Coordination with Key Referral Sources; Person-Centered Counseling; Streamlined Eligibility for Public Programs</p>	<p>\$219.8 billion</p>	<p>Provides payments to states, territories, and tribal governments to mitigate the fiscal effects of COVID-19 public health emergency</p> <p>States can use funds to:</p> <ul style="list-style-type: none"> ▪ Respond to or mitigate public health emergency related to COVID-19 or its negative economic impacts ▪ Cover costs incurred as a result of the COVID-19 emergency ▪ Replace revenue that was lost, delayed, or decreased as a result of the emergency (as determined based on revenue projections as of Jan. 27, 2020) ▪ Address the negative economic impacts of the emergency