HEALTHCARE COVID RELIEF FUNDING GUIDE

Discover government funding for telehealth solutions that extend access to health services and enhance patient care from anywhere.
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Need Help? Contact Logitech’s public sector team at www.logitech.com/vc or (800) 308-8666.
The global pandemic served as a catalyst for healthcare organizations to examine how they can better utilize technology to support continuity of care, drive stabilization, and ensure services are accessible to all. Fortunately, within the last year, Congress has passed three significant funding packages to assist providers, clinics, health systems, and qualified health centers in planning, preparation, and response to COVID-19:

- The $2.2 trillion Coronavirus Aid, Relief, and Economic Security (CARES) Act passed on March 27, 2020.

These appropriations have paved the way for healthcare organizations to invest in video conferencing and communication devices to support a wide variety of telehealth use cases and ongoing continuity and response efforts. In addition, technology has helped these organizations shift to more dynamic, flexible, and connected landscapes that meet new and changing expectations.

While relief funds have and will continue to be a vital lifeline, when these funds are exhausted, healthcare organizations will have to revert to the traditional annual state and federal programs to support telehealth programs and unfunded initiatives. When considering the conventional grant opportunities available throughout the year in conjunction with the surge of federal relief funding, healthcare organizations can approach technology investments and upgrades in a phased approach. The first phase consists of investing in technology using COVID relief funding to address needs brought about by the global pandemic. Phase two consists of planning for additional technology needs using funding sourced from traditional grants to enhance or expand telehealth programs to meet greater community needs.

In this guide, we outline the CARES, CRRSA, and ARP relief funding relevant to healthcare organizations. In addition, we provide insight into how these monies can be used to invest in Logitech’s interactive video conferencing and productivity devices to extend access to services, support preparedness, and enable organizations to respond to an ever-changing landscape with increased efficiency and effectiveness. With an eye to the future, we also recommend our favorite technology-friendly grant opportunities available each year, global pandemic notwithstanding, and how Logitech’s Grants Services Program can help your organization.

From peripherals for mobile devices and desktops to purpose-built video collaboration solutions – Logitech’s high-quality solutions are vital to bridging the digital divide and advancing the future of healthcare. Some of Logitech’s most popular tools include:

- Video Conferencing Room Solutions
- Webcams & Headsets
- Speakers & Microphones
- Streaming & Mobility Solutions for iPads
- Keyboards & Mice
- Presentation Remotes and more
In the healthcare sector, the Coronavirus pandemic has resulted in an exponential increase in demand for telemedicine services as providers and patients avoided in-person encounters to minimize the spread of Coronavirus. In fact, the structure of healthcare may forever be changed as the pandemic has made telehealth synonymous with healthcare delivery. As government regulations loosen and the comfort level with telemedicine technology increases across all stakeholders (patients, providers, payors), the demand will continue to grow. As such, funding to expand and enhance the telemedicine services available to patients has been a key component of funding across all phases of COVID relief funding.

**THE CARES ACT**

The largest bucket of funds available to healthcare providers is through the HHS Provider Relief Fund. The CARES Act established the fund with $100 billion, and it was quickly supplemented with an additional $75 billion through the Paycheck Protection Program and Health Care Enhancement Act. The fund has grown to $186.5 billion through additional allocations made via the CRRSA Act and ARP Act. The bulk of funds were deposited directly into the accounts of healthcare providers based on the amount they bill Medicare or reported net patient revenue data. Some portions of the program were targeted to high-impact areas, rural areas, or safety net providers. The funds are very flexible, allowing hospitals to pay personnel to keep doors open or upgrade IT systems to implement and expand telemedicine services. IT expenses are called out as healthcare-related pandemic expenses and are allowable within the program guidelines.

The guidance states, “Information Technology (IT) - Expenses paid for IT or interoperability systems to expand or preserve care delivery during the reporting period, such as electronic health record licensing fees, telehealth infrastructure, increased bandwidth, and teleworking to support a remote workforce.”

For providers that have not spent these funds, they are flexible and can be used for healthcare-related expenses attributable to the pandemic. The remaining funds can even be used to replace lost revenues. Funds applied to lost revenue are capped at the comparable 2019 levels or projected revenue if a budget was in place prior to March 2020. HHS Provider Relief Fund money must be spent by June 30, 2021.

The CARES Act also invested an additional $25 million in the U.S. Department of Agriculture's Distance Learning and Telemedicine Program. While the CARES-funded round has expired, the DLT program is available on an annual basis to fund video conferencing endpoints that are being used for distance learning or telemedicine activities in rural areas. There is more information on this program in the 2021-22 forecast section that outlines traditional grant programs.

The CARES Act also established the FCC COVID-19 Telehealth Program to provide $200 million to health care providers that suddenly found themselves having to make unplanned investments in telehealth infrastructure. The first round was administered on a first-come, first-serve basis, and funding was exhausted by June 25, 2020. However, the high interest in the program underscored the need for federal funding in this area and led to additional investments in subsequent COVID relief packages.

The funding is not just limited to what is available from the federal government. Using video conferencing for telemedicine is one of the easiest technology use cases to justify when it comes to grants across the board. Since telemedicine inherently increases access to health services, it is a viable use case across state and foundation grant funders as well.
THE CRRSA Act

The CRRSA Act included an additional $3 billion for the HHS Provider Relief Fund to assist providers with healthcare-related pandemic expenses and lost revenue. Congress required the administration to prioritize payments to health care providers that demonstrate significant revenue losses in the last CY quarter of 2021 and the first CY quarter of 2021 (October 2020-March 2021). The legislation also gives providers more flexibility in calculating lost revenues and allows health systems to move funds between sites. This is critically important because many health care providers did not spend their funds because there was confusion over whether their use was restricted to certain clinical sites. The spend date for these funds remains June 30, 2021.

CRRSAA included nearly $250 million for the FCC COVID-19 Telehealth Program to support healthcare providers with the purchase of telecommunication services, information services, and telemedicine devices. The FCC executed a second round of funding under this program, and applications were due May 6, 2021. Applicants can receive up to a $1 million funding commitment. If a provider receives a funding commitment, they can position any allowable costs for reimbursement dating back to March 13, 2020. Selected providers will likely be able to position expenses for reimbursement through the program obligation date of September 30, 2021. There is a chance that this program may continue with appropriations through the annual federal budget process.

Understanding the toll of the pandemic in exacerbating mental and behavioral health issues, the CRRSAA included $4.25 billion in Health Surveillance and Program Support, including $1.65 billion for substance abuse prevention and treatment, and $1.65 billion for community mental health services. These funds will be sent to states and distributed to substance abuse and mental health providers. Funds are meant to primarily support direct health services, which includes providing increased access through telehealth technology.

THE ARP ACT

The ARP Act included an additional $8.5 billion in funding for rural healthcare providers being made available through the existing HHS Provider Relief Fund. ARP includes additional funding for rural health clinics, critical access hospitals, and other rural healthcare providers to make pandemic-related healthcare expenses and recover from lost revenue. Technology purchases for telemedicine and virtual care are considered pandemic-related expenses under this funding opportunity.

The US Department of Agriculture (USDA) received an allocation of $500 million to be exhausted by September 2023. The allocation will allow the USDA to provide funding to healthcare facilities that are either located in rural communities or provide healthcare services to a rural population. These funds will be distributed through a new pilot program that will reimburse providers for increasing telehealth capabilities, including underlying health care information systems; building structures to provide health care services which also include vaccine administration or testing; staffing support for vaccine administration or testing; and any other efforts discerned to be of vital significance for containing the pandemic that affects rural populations. The USDA must release the program solicitation by August 2021.

The ARP Act included $7.6 billion in funding for Federally Qualified Health Centers to support their efforts in responding to and recovering from the pandemic. The funds are very flexible and can be used to support vaccination delivery, contact tracing and testing, maintaining and increasing capacity, recovery, and stabilization or infrastructure projects. Telehealth is specifically called out as allowable as a mechanism to maintain or increase capacity, while virtual care and reconfiguring space to maximize the use of telehealth technology is highlighted as an allowable infrastructure expense. Applications were due May 31, 2021. Health centers can position expenditures dating back to January 31, 2020, and must expend all funds by March 31, 2023.
The table below provides a quick visual to help you keep track of all the important dates that your organization will need to obligate, incur costs, claim reimbursement, or even spend down relief funding. This covers relevant programs from the Coronavirus Aid, Relief, and Economic Security Act (CARES), the Coronavirus Response and Relief Supplemental Appropriations Act (CRRSAA), and the American Rescue Plan (ARP).

<table>
<thead>
<tr>
<th>ELIGIBLE ENTITY</th>
<th>STIMULUS ROUND</th>
<th>FUNDING BUCKET</th>
<th>DATES TO REMEMBER</th>
</tr>
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<tbody>
<tr>
<td>Healthcare Providers</td>
<td>CARES, CRRSAA, ARP</td>
<td>HHS Provider Relief Fund</td>
<td>6/30/2021 – Providers must spend their funds by this date.</td>
</tr>
<tr>
<td>Healthcare Providers</td>
<td>CRRSAA</td>
<td>FCC COVID-19 Telehealth Program: Round 2</td>
<td>9/30/2021 – Estimated spend date for selected providers to claim reimbursement up to their funding commitment.</td>
</tr>
<tr>
<td>Rural Healthcare Providers</td>
<td>ARP</td>
<td>Emergency Rural Development Grants for Rural Healthcare Pilot Program</td>
<td>August 2020 – USDA must release solicitation within 150 days of ARP being enacted. 9/30/2023 – Funds must be obligated by this date.</td>
</tr>
<tr>
<td>Federally Qualified Health Centers/Section 330 Facilities/Community Health Centers</td>
<td>ARP</td>
<td>ARP Supplemental Awards to Health Centers (H8F)</td>
<td>3/31/2023 – Projects must be completed and funds spent by this date.</td>
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Distance Learning and Telemedicine (DLT)

This grant’s purpose is to provide access to education, training, and health care resources for rural Americans. The DLT program provides funds to acquire equipment (such as video collaboration technology) and the necessary hardware, software, and broadband to extend telemedicine applications to rural areas. Applicants that focus on opioid treatment and recovery receive special consideration in the application process.

Deadline: Applications are due June 4, 2021. A similar deadline is anticipated annually.

Evidence-Based Telehealth Network Grant Program (EB THNP)

The purpose of the EB THNP program is to demonstrate and evaluate the use of telehealth technology to improve access to care in rural and medically underserved communities. The program seeks applicants that will expand access to health services in three clinical primary focus areas: (1) Primary Care, (2) Acute Care, and (3) Behavioral Health Care. In addition, applicants have the option to address one of the following secondary focus areas: Maternal Care, Substance Use Disorder, or Chronic Care Management. The program will support the equipment as well as training, personnel, and other expenditures necessary for the telehealth initiative.

Deadline: The last application window closed on April 2, 2021. Similar deadlines are anticipated annually.

School-Based Health Centers Capital Program (SBHCC)

The School-Based Health Center Capital (SBHCC) Program works to increase access to mental health, substance abuse, and childhood obesity-related services in operational school-based health centers (SBHCs) by funding minor alteration/renovation (A/R) projects and/or the purchase of moveable equipment, including telehealth equipment.

Deadline: It is anticipated that applications will be due in March 2022.

Community Facilities Grant Program

Community Facilities Grant Program funds may be used to assist in the development of essential community facilities. Grant funds can be used to construct, enlarge, or improve community facilities for health care, public safety, and community and public services. This can include the purchase of equipment required for a facility’s operation, including telehealth technology.

Deadline: Applications are administered at the local level. Contact your regional USDA Area Office for more information: https://offices.sc.egov.usda.gov/locator/app.

Targeted Capacity Expansion: Special Projects (TCE-SP)

The purpose of this program is to develop and implement targeted strategies for substance use disorder treatment to address a specific population or area of focus. The goal is to address an unmet need or underserved population by enabling a community to identify the specific need or population it wishes to address through the provision of evidence-based substance use disorder treatment and/or recovery support services. Leveraging telemedicine technologies to increase access to treatment and enhance patient compliance is considered a best practice with individuals suffering from substance use disorder.

Deadline: Applications are anticipated to be due in March 2022.
Although the specifics required for applications vary from grant program to program, there are also several commonalities. Consider the following tips on developing a successful proposal.

1. GET TO KNOW THE PROGRAM
Read (and re-read) the funding announcement to gain a clear understanding of what the grantmaker requires for a project proposal. If the grant program isn’t currently accepting applications, examine the previous competition’s materials instead. Have questions about what you’ve read? Contact the program coordinator.

2. REFINE YOUR PROJECT IDEAS TO MATCH THE GRANT FUNDERS PRIORITIES
Consider how your described need, proposed activities, and draft budget match the specific grant solicitation and outlined objectives. Have a clear understanding of why your healthcare agency needs the initiative (such as increasing access to substance abuse patients via telemedicine) and how Logitech technologies will help you advance the objectives of the grant program. Avoid generic platitudes and home in on specific details.

3. ASSUME GRANT REVIEWERS ARE UNAWARE OF YOUR ORGANIZATION
Provide background information on your organization and the patient population benefiting from the proposed telehealth project. Give reviewers some context as to where and for whom their financial support will benefit.

4. CRAFT A COMPELLING PROBLEM STATEMENT
Convey the need or challenge this project will address within your organization. Explain to the grant reviewer how current conditions are challenging for your patient population and the broader implications. This is your chance to provide a connection between your proposed project and the guidelines or priorities established within the grant program. Make use of recent patient demographics to support the problem statement. Organization-specific data can serve as a powerful rationale and/or justification to illustrate themes or reinforce national trends. It’s not enough to say you are rural. Focus on the specific mountain range or terrain that isolates the patient population you serve and the impact on access and quality of care.
10 TIPS TO SECURE FUNDING

5. DRILL DOWN TO THE SPECIFICS
Grant funders love details. What are your SMART (specific, measurable, attainable, relevant, timely) goals for your project? What step-by-step activities will take place to ensure goals are achieved? Who will be responsible for those tasks? What will quantifiable success look like, and what actions will you take to know when you’ve achieved it? What makes your healthcare organization uniquely qualified to carry out the project above all others?

6. AVOID UNIQUE ACRONYMS OR COLLOQUIAL LANGUAGE
Your grant proposal may introduce grant reviewers to your organization for the first time. Be descriptive. If you must use an acronym, be sure to spell it out at least once on each application page. Assume that grant reviewers are also unaware of common field-specific terminology. A large organization like the USDA or FCC may have staff reviewing your applications that do not work in the healthcare industry and will be unaware of terms and acronyms common to healthcare professionals. If you do use professional vernacular, make sure you explain the meaning.

7. PAY ATTENTION TO THE APPLICATION TIMELINE
This section of your project is very important. The timeline is often the first item grant reviewers examine within a proposal. If the project is awarded, grant funders use that timeline to ensure your agency is in compliance upon review of progress/data reports or site visits. As such, be sure to list all project-related activities and identify the exact individuals responsible for each task. To show how thorough your hospital or clinic is, consider including general grant management and administration activities (i.e., send in a quarterly progress report by February 15) in the timeline as well.

8. CRAFT A DETAILED BUDGET & JUSTIFICATION
Budgets tell a story all on their own, so consider what story your budget might tell if a reviewer doesn’t read your proposal narrative. Thoroughly explain the need for each expense. Make sure that each line item is tied to a specific project goal and objective or activity in some way and that that connection is clear to the funder. Additionally, be sure to triple-check your math. Budget errors may cause grant reviewers to lose confidence in your organization’s ability to manage funds effectively.

9. FOLLOW DIRECTIONS
Make sure to follow any instructions about page length, margins, fonts, bindings, etc. Failure to follow even the simplest submission instructions is an easy reason for reviewers to deny your project without taking the time to read the narrative you have spent so much time preparing.

10. BE SURE TO SAVE TIME FOR REVIEW
Ask a person outside the project to read your responses, even better if this person is somewhat unfamiliar with your department and its activities. This extra set of eyes can check for spelling errors, confusing phrases or jargon, and unclear information. They can also give an overall impression of the project.
THE FUTURE OF CONNECTED, VIRTUAL CARE

There is a digital healthcare revolution taking place. Technology advancements, continuous innovation, policy, regulatory changes, and increased bandwidth availability provide new ways for patients and providers to interact. As a result, providers are being challenged to meet the growing demand for speedy access to healthcare services where and when it’s needed most.

With innovative video collaboration and audio solutions deployed in thousands of healthcare organizations worldwide, Logitech is a trusted brand with proven experience helping healthcare organizations meet this demand while improving care experiences and patient outcomes.

For healthcare providers, their patients, and IT teams, Logitech video collaboration solutions provide high-quality telehealth experiences to extend what’s possible from a patient’s bedside, a provider’s home, and anywhere in between. We help healthcare organizations worldwide deliver high-quality care remotely, improve outcomes, reduce costs, and elevate the care experience for all involved.
Logitech video collaboration and productivity solutions are used throughout the healthcare industry to support a wide variety of use cases such as:

- **Specialty Care:** Extend access to specialty care such as behavioral health, tele-stroke services, specialty consults in gastroenterology, chronic disease management, in-home care, or aging-in-place solutions.
- **Triage/Assessments:** Set up telehealth carts at alternate triage sites for patient assessments to mitigate surges in emergency departments.
- **Virtual Rounds:** Equip physicians, residents, and other team members to check on patients virtually from the safety of an office or conference room to limit exposure and support the need for other family members to be included in medical care discussions at the virtual bedside.
- **Patient Monitoring:** Provide proactive monitoring and communication to patients while limiting exposure and reducing the use of personal protective equipment.
- **Family Visitation:** Protect vulnerable patients, set up separate areas in the healthcare facility or other location for family visitation.
- **Behavioral Health:** Extend access to mental health services, crisis intervention, suicide prevention, and individual and family counseling services.
- **Education & Training:** Educate healthcare professionals on procedures, processes, safety measures, and prevention control methods or supporting continuing medical education.
- **Daily Communications:** Support internal communication with administration, staff, families, and with external entities such as public health authorities, other facilities, and community organizations.
SUPPORTING YOUR FUNDING NEEDS

GRANTS SERVICES PROGRAM

Whether it’s COVID relief funding or traditional grants, government funding provides a critical pathway to support investments in technology that support vital community services and programs. However, identifying funding sources can be time-consuming and burden already strained resources.

To aid grant-eligible organizations, Logitech’s Grants Services Program (GSP) provides free consultation, customized funder research, and grant assistance to solve complex public problems with the help of Logitech’s voice and video communication, as well as productivity and mobility solutions.

Let our team of experts help connect the dots between your program goals and the technology needed to support those goals. Our complimentary services include:

PROJECT CONSULTATION

Each engagement begins with getting to know your organization and the goals to address the needs in your community. Our team has the expertise to help guide you in assessing technology needs, aligning with your mission, meeting budget requirements, and can share best practices to meet the needs within your community.

CUSTOMIZED FUNDING REPORTS

Once a project plan is in place and the team assembled, it’s time to start looking for funding options to support your project. Your Logitech representative will gather the information needed to generate a free grant funding research report. This report provides a listing of relevant funding programs to consider including, federal, state, and private/corporate foundation grants.

GRANT-READINESS COACHING

Once you have selected a grant program to pursue, your Grants Development Consultant will help you and your colleagues further develop and define your project based on funder requirements. If your agency already has that core idea in place, the consultant can help further articulate the needs of the project and provide input on other elements to further strengthen your application.

PROPOSAL DEVELOPMENT

Once it is time to put pen to paper and begin drafting your application, Logitech has a range of support services available. If your agency has a designated grant writer, these services include unlimited proposal draft review and feedback. If you don’t have the resources to prepare a full proposal in-house, your Grants Development Consultant can work with you to evaluate your grant-writing needs and determine the best level of support to optimize funding outcomes.

NEED HELP?

Contact the Logitech team today at www.logitech.com/vcsales to speak with someone about the Logitech Grants Services Program or visit or visit www.logitech.com/vc to learn more about Logitech’s solutions that can help you fulfill your mission.

The Logitech Grants Services Program is made possible through Logitech’s partnership with Grants Office LLC. Grants Office LLC is a global grants consulting firm and the nation’s leader in grants intelligence. They have a 20 year history of successfully helping public sector clients find and pursue grant funding.
NEXT STEPS

There are a few steps you can be taking to take advantage of these funds for your organization.

STEP 1

For the stimulus funding, start having conversations with your leadership. These funds are often already in hand (or will be shortly), and decisions are being made about how they will be spent. In most cases, hospitals and clinics have leadership teams working together to make these decisions. In most healthcare organizations, the grants team and the individuals managing stimulus funds work under the direction of the Chief Financial Officer. For COVID relief funding, make sure to connect the dots between your technology needs and how it is needed due to the coronavirus pandemic. Know the budget you will need to complete your project so that the decision-makers have all the information they need.

STEP 2

For the traditional grant programs, begin assembling your team early. Many of these grants require a team within your organization and involve external partners. Within your organization, you will want relevant clinicians, service line managers, telehealth coordinators, the internal grants office, the finance office, and someone from IT included. Make sure that all the necessary players are involved to put together a grant proposal.

STEP 3

Contact your Logitech Public Sector Account Manager at www.logitech.com/vcsales to learn more about how the Logitech Grants Services Program can help your institution.