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MEMORANDUM

Date: July 15, 2022

To: Eric Boley, President, Wyoming Hospital Association (WHA)

From: Stefan Johansson, Director 
Wyoming Department of Health

Subject: ARPA Health and Human Services Stabilization: Frequently Asked Questions

Ref: J-2022-317

As the Health and Human Services (HHS) Staffing Stabilization program has been stood up, providers have sent in various questions regarding the amount and disposition of their payments.

This memorandum intends to answer some of these questions.

Question 1: I received a letter from the Wyoming Hospital Association regarding a one-time disbursement of American Rescue Plan Act funds for staff retention and recruitment activities.

Is this a scam?

Answer 1: No. This is legitimate communication from the WHA, on behalf of the Wyoming Department of Health, which was tasked with administering the HHS Staffing Stabilization program by the Wyoming Legislature in Senate Enrolled Act 20 from the 2022 Budget Session. Funding provided through this program is intended to assist certain health and human services providers – who care for vulnerable populations and who were disproportionately impacted by the COVID pandemic and labor market shocks associated with it – in retaining key staff within their organizations.

Question 2: My award letter says I was awarded \$15,000 based on an estimated 10 employees, but I only have 5 employees. Should I return the rest of the award?

Answer 2: No. Your organization may keep the entire award and use it for all staff retention and recruitment activities that are allowed under this program.

While they are intended to be proportionate to average staffing levels, the awards made by the Department of Health are **not** specifically tied to the actual number of employees retained by any provider.

Instead, they are prospective (pre-determined) amounts made based on provider-specific proxy estimates of total employees derived from data sources known to the department to be **comprehensive** and **accurate** across provider types. These data sources vary by provider type:

- For Comprehensive, Supports and Community Choices Waiver providers, we use the number of clients served by direct care services based on Medicaid enrollment and claims data.
- For Psychiatric Residential Treatment Facilities, Residential Treatment Facilities, Group Homes and Crisis facilities, we use licensed DFS bed counts.
- For Community Mental Health and Substance Abuse Center residential services we use an Average Daily Census.
- For Federally-Qualified Health Centers, we use FTE as reported to the Uniform Data System.

We used this prospective award methodology for two reasons:

- It makes rolling out this program much quicker and significantly less administratively intensive on providers in need of this assistance; and,
- It provides a more equitable distribution, since providers without the resources to apply for grants may still receive an award letter.

Thus, while our calculated proxy measure of employees may differ from the actual number of employees you have, the prospective nature of the award means that you can keep the entire amount and use it on appropriate staffing retention or recruitment activities.

Question 3: The award letter states that executive management are prohibited from receiving recruitment and retention funding, but I am a sole proprietor -- so am also the front-line worker.

Answer 3: If you are both the owner/executive manager of a provider organization and a front-line employee (e.g. the sole proprietorship), you can receive the staffing stabilization funding.

Question 4: Can I use this funding to offset normal payroll?

Answer 4: No. This funding is intended for staffing stabilization through retention payments and recruitment incentives, *in addition to* your normal payroll.

Question 5: Is this funding taxable?

Answer 5: Yes. We recommend both the employer and employees budget for the tax implications of receiving this funding.

Question 6: If I don't have payroll (e.g., am a sole proprietorship), how should I report on the use of funding I received?

Answer 6: In addition to the attestation document sent out by the Wyoming Hospital Association that each provider is required to sign and return, providers who do not have business accounts and/or payroll should plan to submit bank statements that show the depositing of the grant funds.

Question 7: Can this funding be used for staff recruitment efforts in addition to staff retention payments?

Answer 7: Yes. Providers may use this funding for new staff recruitment incentives. Funding is not permitted for use to reimburse previous recruitment efforts. Efforts should be made to strike an appropriate balance between staff retention and staff recruitment, based on a provider's unique circumstances, operations, and previous efforts.

Question 8: For staff retention payments, should this funding be distributed equitably among my staff?

Answer 8: Yes. Retention funding should be distributed on an equitable basis, and should exclude executive management. Provider leadership should determine the best methods for equitable distribution based on their own unique circumstances and operations (e.g., adjusted for hours worked, hours worked in direct care or patient/resident support, etc.).

SJ/ff/jg