

Northwest Portland Area Indian Health Board

<u>Federal Novel Coronavirus 2019(COVID-19) Funding for Tribes</u> June 3, 2020

KEY Funding Application Available Now New Funding Opportunity

HEALTHCARE

AGENCY	AMOUNT	PURPOSE	Funding Opportunity & Distribution Information
IHS	\$1.032 billion PHASE 3- S.3548 CARES Act	COVID-19 response efforts may include treatment, supplies, education, electronic health records improvement, telehealth, etc. \$125 million will be transferred to the Facilities Account to support COVID-19 facilities-type activities at IHS and Tribal health programs. \$172 million will be allocated and managed centrally by IHS. Negotiations of Contract Support Costs will be made after the first award has been made. https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/2020_Letters/DTLL_DUIOLL_CARES_042_32020.pdf	 Should be distributed by 5/8. \$570 million to federal health programs and Tribal Health Programs \$30 million to UIOS \$65 million for RPMS electronic health record support Distributed through Funding Agreements using existing distribution methodologies for program increases in hospitals and health clinics, PRC, alcohol and substance abuse, and mental health funding. \$74 million will support medical equipment needs \$41 million will support maintenance and improvement needs \$10 million will support sanitation and potable water needs. \$50 million to IHS health programs and THPs for CHR program increases. \$95 million to support the expansion of telehealth activities \$6 million for public health support activities \$5 million to provide additional test kits and materials

		• \$10 million to non-clinical federal staff support
		 \$30 million to address unanticipated needs \$26 million to Tribal Epi Centers
\$750 million PHASE 3.5 – H.R. 266 Paycheck Protection Program and Health Care Enhancement Act	Set aside for tribes, tribal organizations, UIOs, and Indian health care providers to the Public Health and Social Services Emergency Fund. The purpose is for use to purchase, administer, and expand capacity for COVID-19 testing; to procure and distribute COVID-19 tests and PPE for administering COVID-19 tests; to support surveillance and contact tracing; and to support other COVID-19 related activities. Recipients must submit a plan for COVID-19 funding to the HHS Secretary. The plan must include the number of tests needed month to month as well as the description of how the recipient intends to use support for testing and how it will relate to COVID-19 community mitigation policy. • \$550 million will be allocated to IHS federal health programs and THPs using existing distribution methodologies for program increases in Hospitals and Health Clinics, PRC, Alcohol and Substance Abuse, Mental Health, Community Health Representatives, and Public Health Nursing. • \$50 million is allocated using the PRC distribution formula for new PRC funds. • \$50 million for Urban Indian Organizations. • \$100 million is allocated to purchase tests, test kits, testing supplies, and related PPE through the IHS National Supply Service Center • \$50 million for nation-wide coordination, epidemiological, surveillance, and public health support to bolster the expansion of testing across Indian Country.	 \$5/28 COVID-19 Testing Plan template was circulated by IHS The IHS Area Office will be reaching out to you to initiate actions necessary for transferring resources, and may have already been in contact with you. Tribal Health Programs will receive these one-time, non-recurring funds through bilateral modifications/amendments to your existing ISDEAA agreements. Tribal Health Programs will be required to provide the statutorily-required COVID-19 Testing Plan, and an all-inclusive budget, as a condition of receiving these funds. Budget submitted by Tribes must be all inclusive with Direct and Indirect costs for the activity. There will be no additional CSC costs calculated on these funds. Executed amendment will include terms that they provide a "Testing Plan" within 30-days of award to fully describe the activities that will be under taken.
	IHS DTLL: https://www.ihs.gov/sites/newsroom/them-es/responsive2017/display-objects/docume	

		nts/2020 Letters/DTLL DUIOLL 05192020.p	
		df	
	\$64 million	Funds to be utilized to cover the costs of	• \$3 million will support UIOS
	304 111111011	COVID-19 diagnostic testing supplies and	• \$61 million will be allocated to IHS
	DUASE 2 II D C201	services (including PPE for testing staff).	
	PHASE 2- H.R. 6201	, ,	federal health programs, and THPs
	Families First	https://www.ihs.gov/sites/newsroom/them	Uses the existing distribution
	Coronavirus Response	es/responsive2017/display objects/docume	methodology.
	Act	nts/2020 Letters/DTLL DUIOLL 03272020.p	Distributed through existing funding
		<u>df</u>	agreements using methodology for
			hospitals and health clinic program
			increases.
	\$70 million	To prevent prepare for, and respond to the	 \$40 million to purchase PPE and
		spread of COVID-19 in AI/AN communities.	medical supplies through the IHS
	PHASE 2- H.R. 6201	May include medical supplies, treatment	National Supply Service Center.
	Families First	costs, patient transport, etc.	• \$30 million to direct service tribes
	Coronavirus Response	PPE /supplies provided to IHS facilities,	(DSTs)
	Act	Tribal Health Programs, and UIOs at no cost.	Funds distributed through existing
		https://www.ihs.gov/sites/newsroom/them	methodology that use recurring
		es/responsive2017/display_objects/docume	federal hospitals and health clinics
		nts/2020 Letters/DTLL DUIOLL 03272020.p	base funding levels.
		df	base ramaning reversi
	\$40 million	Tribal set-aside to support preventing,	CDC-RFA-OT20-2004
CDC	, ,	preparing for, and responding to the	https://www.grants.gov/web/grants/
CDC		coronavirus. Non-competitive funding	view-opportunity.html?oppld=325942
	PHASE 1- HR. 6074	opportunity to Title I and Title V tribes to	
	Coronavirus	strengthen the tribal public health system to	CDC FAQs for this announcement:
	Preparedness and	carry out surveillance, epidemiology,	https://www.cdc.gov/tribal/documen
	Response	laboratory capacity, infection control,	ts/cooperative-agreements/OT20-
	Supplemental	mitigation, communications, and other	2004-FAQs-508.pdf
	Appropriations Act,	preparedness and response activities.	Posted: April 1
	2020	Expenses will be reimbursed dating back to	NEW Closing Date: June 3
	2020	January 20.	Awards: 574
		January 201	• CDC Calls: 4/2 and 4/8
	\$30 million	Supplemental funding to the existing OT18-	NPAIHB application form for the
	330 111111011	1803: Tribal Public Health Capacity Building	
	DUACE 1 UD 6074	and Quality Improvement Umbrella	1803 subawards (the \$61,062-
	PHASE 1- HR. 6074	cooperative agreement to directly fund the	\$63,000 available now).
	Coronavirus Proparedness and	three largest tribal nation recipients.	Applications are rolling, due ASAP. http://www.ppaibb.org/wofb
	Preparedness and	The nine regionally designated tribal	http://www.npaihb.org/wpfb-
	Response	organizations recipients (NPAIHB) will	file/fy2020-npaihb-funding-
	Supplemental		application-covid-19-docx/
	Appropriations Act,	receive funding which includes resources for	CDC Listening Session: 3/31
	2020	sub-awards to tribal nations with the	
	\$12F m;!!!:	greatest burden and needs in their region.	TDD
	\$125 million	Established under the CDC-wide Activities	TBD
	minimum	and Program Support account, which is	May be same mechanism used to
		used to carry out the agency's public	distribute \$40 million in non-
	PHASE 3- S.3548	health service authorities like surveillance,	competitive grants.
	CARES Act	epidemiology, diagnostics, laboratory	
		support, infection control, mitigation,	

		communications, guidance, and other preparedness and response activities. It can also be used to reimburse expenditures during a public health emergency like the current pandemic.	
HHS	\$100 billion (includes \$500 million to IHS and Tribal facilities) PHASE 3- S.3548 CARES Act	expenditures during a public health	 5/22 Update: https://www.hhs.gov/about /news/2020/05/22/hhs-announces-500-million-distribution-to-tribal-hospitals-clinics-and-urban-health-centers.html The payments can be used to prevent, prepare for, and respond to coronavirus, and shall reimburse only for health care related expenses or lost revenues that are attributable to coronavirus. Payments cannot be used for expenses or losses that have been reimbursed from other sources or that other sources are obligated to reimburse. Distribution: IHS and tribal clinics and programs will receive a \$187,000 base payment plus 5% of the estimated service population multiplied by the average cost per user. IHS and tribal hospitals will receive a \$2.81 million base payment plus 3% of their total operating expenses. IHs urban programs will receive a
		 \$30 billion proportional to providers' share of 2018 Medicare net patient revenue (distributed April 10 and April 17) \$20 billion will be dispersed to providers to build on the initial \$30B. distribution based on CMS cost reports or incurred losses on April 24. \$50 billion to areas particularly impacted by COVID-19 outbreak, rural providers, providers of services with lower shares of Medicare reimbursement or who predominantly serve the Medicaid population. 	\$181,000 base payment plus 6% of the estimated service population multiplied by the average cost per user. • Provider Relief Fund: https://www.hhs.gov/coronavirus/cares-act-provider-relief-fund/index.html • In order to qualify for the additional \$20 billion based on Medicare Reimbursements from 2018, HHS is requiring providers who received funding from the Provide Relief Fund before April 24th to submit their EIN and

		 \$10 billion to hospitals in areas hit hard by the outbreak \$10 billion to rural hospitals (non-tribal) \$500 million to IHS, Tribes, and urban Indian Health Centers based on operating expenses. \$12 billion to 395 hospitals who provided inpatient care for 100 or more COVID-19 patients through April 10. \$4.9 billion to skilled nursing facilities (SNFs) 	financial information to a portal by June 3. https://www.hhs.gov/coronavirus /cares-act-provider-relief- fund/for-providers/index.html Providers will be paid via Automated Clearing House account information on file with UHG, UnitedHealthcare, or Optum Bank, or used for reimbursements from CMS. Within 30 days of receiving the payment, providers must sign an attestation confirming receipt of the funds and agreeing to the terms and conditions of payment. The portal for signing the attestation will be open the week of April 13, 2020 and will be linked from hhs.gov/providerrelief.
	\$15 million minimum	Public Health Service and Social Services	TBD
	PHASE 3- S.3548 CARES Act	Emergency Fund can be used for essential preparedness and health center needs, as well as reimbursements of expenses incurred in response to the pandemic prior	
SAMHSA	\$40 million	FY 2020 COVID-19 Emergency Response for Suicide Prevention (COVID-19 ERSP) The purpose of this program is to support states and communities during the COVID-19 pandemic in advancing efforts to prevent suicide and suicide attempts among adults age 25 and older in order to reduce the overall suicide rate and number of suicides in the U.S. SAMHSA is requiring	FG-20-007 https://www.grants.gov/web/grants/view-opportunity.html?oppId=327024 Posted: May 12 Closing Date: May 22 Awards: 50 Award Ceiling: \$800,000
	\$110 million	that a minimum of 25 percent of direct services funding for this program be used to support domestic violence victims FY 2020 Emergency Grants to Address	https://www.samhsa.gov/newsroom/ press-announcements/202005131138 FG-20-006
	\$500,000 for territories and tribes in total costs (direct and indirect) for the proposed project	Mental and Substance Use Disorders. The purpose of this program is to provide crisis intervention services, mental and substance use disorder treatment, and other related recovery supports for children and adults impacted by the COVID-19 pandemic.	https://www.grants.gov/web/grants/view-opportunity.html?oppId=325993 Posted: April 2 Closing Date: April 10 Awards: 60
	\$15 million	Health Surveillance and Program Support Resources funding for mental and behavioral	Announcement: https://www.samhsa.gov/newsroo

	PHASE 3- S.3548 CARES Act	health services, as well as the systematic collection and analysis of public health related data for community wellness planning.	m/press- announcements/202005011645 DTLL: https://files.constantcontact.com/c 2394f27001/765dac03-4a52-4e0f- bf54-91321b089eab.pdf SAMHSA is releasing supplemental grant awards to 154 current Tribal Behavioral Health (TBH) grant recipients in the amount of \$97,402 each to meet the increased mental and substance use disorders needs among tribes. The purpose of the TBH program is to prevent suicide and substance misuse to reduce the impact of trauma, and to promote mental health among AI/AN youths up to 24 years old. SAMHSA Listening Session: 4/1
	\$50 million PHASE 3- S.3548 CARES Act	Build national capacity for preventing suicide by providing technical assistance, training, and resources to assist states, tribes, communities, providers, and members of the public on suicide prevention strategies and best practices to address the issue of suicide.	TBD • Updates: https://www.samhsa.gov/coronavir us • Program information: https://www.samhsa.gov/grants/gra nt-announcements/sm-20-011
	\$250 million PHASE 3- S.3548 CARES Act	Certified Community Behavioral Health Clinics (CCBHCs) to increase access to and improve the quality of community mental health and substance use disorder treatment services through the expansion of CCBHCs.	 Update: grants awarded: https://www.samhsa.gov/grants/grant-announcements/sm-20-012
HRSA	\$15 million minimum PHASE 3- S.3548 CARES Act	Telehealth and rural health activities set- aside funding for Tribes, Tribal organizations, and urban Indian health organizations, or health service providers under HRSA. Funding is for health surveillance and other needs under the HRSA Rural Health program. The purpose is to provide maximum flexibility to assist tribes, tribal organizations, urban Indian health organizations, and health service providers to tribes to prevent, prepare for, and	HRSA-20-135 https://www.grants.gov/web/grants/s earch-grants.html?keywords=hrsa-20- 135 Posted: 4/21 Closing Date: 5/6 Awards: 50 Award Ceiling: \$300,000 HRSA Consultation: 4/14 & 4/17

		respond to the coronavirus and the evolving needs in rural communities.	
	Reimbursement for Testing and Treatment of Uninsured Individuals	HRSA will begin to provide claims reimbursement to health care providers for testing uninsured individuals for COVID-19 and treating uninsured individuals with a COVID-19 diagnosis at Medicare rates. Includes providing treatment for uninsured individuals with a COVID-19 diagnosis on or after February 4, 2020 can electronically request claims.	Submit patient information and claims beginning 5/6: https://coviduninsuredclaim.linkheal th.com
FEMA	COVID-19 National Emergency Declaration	Emergency protective measures, such as medical care, medial sheltering, operation costs, etc.	Details on how to apply: https://www.fema.gov/newsrelease/ 2020/03/23/coronavirus-covid-19- pandemic-public-assistance- simplifiedapplication Tribal specific information: https://www.fema.gov/newsrelease /2020/03/26/coronavirus-covid-19- femaassistance- tribal-governments ISSUE: 25% cost sharing, even if Tribe is sub-awardee with the
EPA	\$1,000,000	This notice announces EPA re-opening the State Environmental Justice Cooperative Agreement Program (SEJCA) and the availability of funds for US States, Territories, Tribal Governments, and local governments to propose projects focusing on COVID-19 and other areas.	state. EPA-OP-OEJ-20-02 https://www.grants.gov/web/grants/ view-opportunity.html?oppId=326650 Posted: 04/30/20 Closing Date: 06/30/20 Awards: 5 Award Ceiling: \$200,000

COMMUNITY SUPPORT SERVICES (NUTRITION, CHILDCARE, AFFORDABLE HOUSING)

AGENCY	AMOUNT	PURPOSE	Funding Opportunity & Distribution Information
ACL	\$10 million PHASE 2- H.R. 6201 Families First Coronavirus Response Act	Supplemental funding for nutrition and related services for Native American Programs to help tribes and tribal organizations provide meals and supportive services directly to Native American elders.	 Eligibility: Existing tribal grantees. Idaho OAA Title VI Tribes: \$232,080 Oregon OAA Title VI Tribes: \$509,250 Washington OAA Title VI Tribes: \$1,871,860 ACL connecting services for older adults and their families: https://eldercare.acl.gov

	\$20 million		\$10 million has already been disbursedMore information:
	PHASE 3- S.3548 CARES Act		https://acl.gov/about-acl/older- americans-act-oaa
	\$250 million	Senior Nutrition Program to provide additional home-delivered and prepackaged meals to low-income seniors. Funding has been provided to states, territories, and tribes for subsequent allocation to local meal providers. Grant amounts are determined based on the population-based formulas defined in the Older Americans Act	Funding Allocation Tables https://acl.gov/about-acl/older-americans-act-oaa
USDA	\$500 million PHASE 2- H.R. 6201 Families First Coronavirus Response Act	Special Supplemental Nutrition Program for low-income pregnant women or mothers with young children (WIC) who lose their jobs or are laid off due to COVID-19. Funding "to remain available through Sept. 30, 2021 for increases in program participation. FNS will work with state to ensure funding is available to state agencies that require additional funds based on enrollment"	Intended to cover increases in program participants. For more information: https://www.fns.usda.gov/disaster/pandemic/covid-19 TBD
	PHASE 3- S.3548 CARES Act	Program for Indians Reservations (FDPIR).	 \$50 million shall be for facility improvements and equipment upgrades. \$50 million shall be for the costs relating to additional food purchases.
	\$25 million PHASE 3- S.3548 CARES Act	Telemedicine and distance learning services in rural areas	RUS-20-02-DLT https://www.grants.gov/web/grants/search-grants.html Posted: 04/15/20 Closing Date: 07/13/20 Awards: 200 Award Ceiling: \$1,000,000 https://www.rd.usda.gov/programs-services/distance-learning-telemedicine-grants Round 2 — Applications accepted beginning April 14, due no later than July 13 at grants.gov
ACF	\$4.5 million Family Violence and Prevention Services	Family Violence and Prevention Services formula grants to provide temporary housing and in-person assistance to victims of family, domestic, and dating violence	 Eligible: Existing FVPSA Tribal formula grantees. Should be automatically awarded via existing formula grant.

	PHASE 3- S.3548		
	CARES Act		
	\$900 million	Low Income Home Energy Assistance	TBD
			 For tribes and tribal organizations
	PHASE 3- S.3548		
	CARES Act		
	\$96.25 million	Supplemental Child Care and	For existing Tribal Child Care and
	PHASE 3- S.3548 CARES Act	Development Block Grant (CCDBG) funding for tribes to provide immediate assistance to child care providers to	 Development Fund (CCDF) Lead Agencies. Allocation will most likely be based on current percentage share of funding with
		prevent them from going out of business and to otherwise support child care for families, including for healthcare	 some adjustments. More information: https://www.acf.hhs.gov/occ/resource/su
		workers, first responders, and other essential workers.	mmary-of-child-care-provisions-of-cares- act
	\$750 million	Head Start funding to meet emergency	Eligible: Existing Head Start programs.
	PHASE 3- S.3548	staffing needs, address added operational costs, and provide summer	• Up to \$500 million for summer Head Start programs.
	CARES Act	learning opportunities.	More information:
			https://eclkc.ohs.acf.hhs.gov/about- us/coronavirus/responding-covid-19
	\$45 million	Supplemental Title VI-B Child Welfare Services Grant funding to support the	TBD • Eligible: Existing tribal grantees.
	PHASE 3- S.3548	child welfare needs of families during the	 Should be automatically awarded via
	CARES Act	COVID-19 crisis and to help keep families	existing formula grant
		together.	
	\$1 billion	Funding for wide range of social services	Supplemental funding to existing block
		and emergency assistance to serve	grant recipients.
	Supplemental	individuals up to 200% of the federal	More information:
	Community	poverty line	https://www.acf.hhs.gov/ocs/resource/st
	Services Block		ate-officials-and-program-contacts
	Grant		
	PHASE 3- S.3548 CARES Act		
HUD	\$300 minimum	Funds will be allocated using the same formula used for the FY 2020 Indian	ICDBG-CARES Implementation May 15 Update:
	Native American	Housing Block Grants.	https://www.hud.gov/sites/dfiles/OCHCO/
	Block Grants	Funds shall be used by recipients to	documents/2020-
	program	"prevent, prepare for, and respond to	11pihn.pdf?utm medium=email&utm sou
		coronavirus, including to maintain normal	rce=govdelivery
	PHASE 3- S.3548	operations and fund eligible affordable	The Office of Native American Programs
	CARES Act	housing activities under NAHASDA during	will begin accepting applications on
		the period that the program is impacted	Monday June 1 at 3PM.
		by coronavirus. May be "used to cover or reimburse allowable costs to prevent,	Purpose: for activities, projects, or
		prepare for, and respond to coronavirus	programs tied to preventing, preparing
		that are incurred by a recipient, including	for, and/or responding to COVID-19.
		and the meaned by a recipient, melading	• \$200 million for Indian Housing Block Grants (IHBG)
		<u> </u>	Grants (mbd)

		for costs incurred prior to the date of enactment of this Act.	 \$100 million Indian Community Development Block Grants (ICDBG) Indian Housing Block Grant distributed to tribes and tribally-designated housing entities via same formula for FY 2020 awards. Statutory and Regulatory Waiver Notice 2020-05 – issued 4/10/20, defines the authority provided under the CARES Act, to waive and establish alternative requirements.
FCC	Rural Tribal Priority Window	The Federal Communications Commission (FCC) began accepting applications as part of the Rural Tribal Priority Window to obtain spectrum licenses in the 2.5GHz band. As part of the Rural Tribal Priority Window, eligible applicants may obtain available licenses in the 2.5GHz band free of any auction bidding costs. The window will allow federally recognized tribal nations, a consortium of federally recognized tribal nations, or an entity majority owned and controlled by a federally recognized tribal nation or consortium of tribal nations to apply for unlicensed portions of the 2.5GHz band.	Public Notice: https://docs.fcc.gov/public/attachments/DA -20-18A1.pdf Additional Information: https://www.fcc.gov/25-ghz-rural-tribal-window The Rural Tribal Priority Window for 2.5Ghz band licenses will close on Monday, August 3, 2020, at 6:00 p.m. EST.

ECONOMIC ASSISTANCE

AGENCY	AMOUNT	PURPOSE	FUNDING OPPORTUNITY & DISTRIBUTION INFORMATION
BIA	\$453 million PHASE 3- S.3548 CARES Act	Aid to tribal governments; welfare assistance and social service programs; public safety and emergency response.	 \$380 million for aid to Tribal Governments (ATG/OATG) \$20 million to welfare assistance. \$20 million held until end of April for unexpected needs. \$33 million for purchasing PPE for law enforcement/detention center staff, overtime for law enforcement and essential workers, inmate quarantine, cleaning facilities, and telework. Funding will go under existing funding agreements, unless an amendment is needed.

			Title I Tribes can spend funds now
			but will have to work with BIA on a
			budget later.
	do Laura	Conservation Ballat Found for Librar for	• Consultation: 4/15
_	\$8 billion	Coronavirus Relief Fund for tribes for increased expenditures related to the	• 5/19 Update: Department of Treasury should be posting a
Treasury	PHASE 3- S.3548	COVID-19 public health emergency. For	tribal employment/expenditures
	CARES Act	increased expenditures related to COVID-19	form up on their website today
	CAILS ACC	public health emergency incurred between	and the deadline to submit will
		march 1-December 20, 2020.	be 5/26.
			Treasury Secretary Mnuchin told
		Treasury will distribute 60% of the \$8	a D.C. federal judge that they
		billion reserved for Tribal governments	plan to send out the \$3.2 billion
		immediately based on population.	it still owe tribal governments
		 Treasury will refer to the Tribal 	under the CARES Act by June 5.
		population data used by HUD in	Methodology:
		connection with the Indian Housing	https://home.treasury.gov/syste
		Block Grant (IHBG) program.	m/files/136/Coronavirus-Relief-
			<u>Fund-Tribal-Allocation-</u>
		Treasury will distribute the remaining 40	Methodology.pdf
		percent of the \$8 billion reserved for Tribal	• 5/5 Update:
		governments based on employment and expenditures data of Tribes and tribally-	https://www.indianz.com/covid 19/?p=4247
		owned entities.	 https://www.quarles.com/public
		The use of employment data is	ations/treasury-issues-
		expected to correlate reasonably	guidelines-for-use-of-cares-act-
		well with expenditures related to	title-v-funding-how-tribes-can-
		effects of the emergency, such as	prepare-to-spend-these-funds/
		the provision of economic support	Chehalis, et.al. v. Mnuchin
		to those experiencing	litigation: Judge preliminarily
		unemployment or business	enjoined the Treasury from
		interruptions due to COVID-19-	disbursing to ANCs any of the \$8
		related business closures.	billion
			Population-based component of
			allocation formula:
			Step 1. Calculate the pro-rata normal target for each Tribal
			payment for each Tribal government based on single-race
			and then multi-race data for
			each Tribe's IHBG formula area,
			and use the larger result for each
			Tribal government.
			Step 2. Assign a minimum
			payment of \$100,000 to those
			Tribal government that would
			otherwise receive less than that
			amount under step 1.
			 Step 3. For Tribal governments
			that would receive a payment
			greater than the minimum, a

	\$474 billion For loans, loan guarantees, and other investments PHASE 3- S.3548 CARES Act	For loans, loan guarantees, and other investments to eligible businesses, municipalities, and states – the definition expressly includes Indian tribes. This fund includes the ability of the Secretary of Treasury to make direct loans to tribes and other governments.	pro-rata reduction is made for those amounts above the minimum for each Tribe so that the total amount for all Tribes does not exceed \$4.8 billion. TBD
SBA	\$100 billion eligible health care providers	For eligible health care providers to respond to coronavirus, including facilities construction.	 TBD Guidance forthcoming. Tribes are working to clarify Indian health care providers qualify.
	\$2 million each Emergency Income Disaster Loans (EIDL) PHASE 2- H.R. 6201 Families First Coronavirus Response Act	Tribal small business concerns, non-profits (under IRS code sections 501(c), 501(d), and 501(e)0 and non-profit veterans' organizations) are eligible for EIDL loans up to \$2 million, with up to \$10,000 immediate advance. May be coupled with Paycheck Protection Program, but may reduce forgiveness amount. Small dollar loans available.	Ongoing Application: https://covid19relief.sba.gov/#/ More information https://www.sba.gov/disaster- assistance/coronavirus-covid-19
DOL	\$345 million	Grants to provide employment-related services for dislocated workers, including funding to create temporary employment opportunities and funding to meet the increased demand for employment and training services.	 Eligible applicants for Disaster Recovery grants include Indian tribal governments. Eligible applicants for Employment Recovery grants are entities eligible for funding through the Indian and Native American program in WIOA Section 166(c) https://www.dol.gov/newsroom/releases/eta/eta20200415-0
EDA	\$1.5 billion PHASE 3- S.3548 CARES Act	Economic Adjustment Assistance (EAA) program grants to plan and implement economic recovery strategies in response to the coronavirus pandemic.	 For tribes and tribal organizations. Application: https://www.grants.gov/web/grants/view-

IRS	PHASE 3- S.3548 CARES Act	Refundable payroll tax credit of 50% of qualifying wages paid by employers. Tribes and other employers whose operations were suspended due to shutdown order or whose gross receipts declined by more than 50%. FAQs: Employee Retention Credit https://www.irs.gov/newsroom/faqs-employee-retention-credit-under-the-cares-act	Request Form 7200 in advance: https://www.irs.gov/forms-pubs/about-form-7200 More information: https://www.irs.gov/newsroom/irs-employee-retention-credit-available-for-many-businesses-financially-impacted-by-covid-19
DOJ	\$850 million PHASE 3- S.3548 CARES Act	Must be used for PPE, inmates' medical needs, hire personnel, overtime costs, distribution of resources. Solicitation: https://bja.ojp.gov/sites/g/files/xyckuh186/files/media/document/bja-2020- 18553.pdf?utm medium=email&utm source=govdelivery	Application Deadline: 5/29 Eligible applicants of the Byrne-Justice Assistance Grant Program eligible agencies State and Local Allocations: https://bja.ojp.gov/program/cesf/state-and-local-allocations