RESOURCES ROADMAP

COVID-19 Healthcare Resource Roadmap

This COVID-19 Healthcare Resource Roadmap (Roadmap), as developed by FEMA, is to assist state, local, tribal, and territorial (SLTT) leaders and stakeholders with navigating some of the challenges, as well as the resources, associated with the Coronavirus (COVID-19) pandemic. Specifically, the Roadmap describes how supplemental appropriated funds, in particular funding authorized under the Coronavirus Aid, Relief, and Economic Security (CARES) Act, and certain ongoing annually funded federal programs, can be used to implement potential solutions.

Please note that the information that follows is for general informational purposes only and has been compiled with publicly available information or with information provided by sources that are publicly obtained and should be viewed as only a starting point for navigating challenges and available resources. The user should always directly consult the respective department or agency administering the federal program as the provider of a potential resource for current program information, as well as to verify whether proposed activities would be allowable under a program.

Navigating the Roadmap

The Roadmap is to assist in challenges that federal departments and agencies which work directly with SLTT partners have identified in healthcare and COVID-19 pandemic recovery. Although not an exhaustive list, the identified challenges that follow fall within five topic areas:

- Patient Care Delivery
- Healthcare Workforce Protection and Expansion
- Hospital Operations and Financial Management
- Post-Acute and Long-Term Care and Other Implications of COVID-19
- Vaccine Administration

Each topic area consists of a flowchart of specific challenges, potential solutions, and federal department or agency resources, including federal funding and technical assistance which may be available (e.g., Figure 1). Federal funding resources are either universal or solution specific. Universal resources, for purposes of this document, have broad applicability to the solutions presented within the

“The whole of government and the whole of community is involved in the fight against COVID-19. We will prevail, but it will take government, the private sector and individual Americans working together.”

- Pete Gaynor, FEMA Administrator
topic area, whereas resources directly linked to specific solutions are limited to the challenge presented.

Although the solutions are general in nature, additional considerations may be necessary to support those who may be at an elevated risk for contracting COVID-19, including those who may have physical, sensory, behavioral, or intellectual disabilities affecting their ability to conform to infection control protocols such as masking, hand washing, or distancing.

The Roadmap also includes a Program Index (Index) that provides an overview of resource structure and connection to the identified healthcare challenges. The Index is designed to help SLTT partners navigate resource availability, find opportunities to leverage assistance across federal programs, and avoid potential areas of duplication of benefits. For example, some of the resources, such as the Coronavirus Relief Fund, are federal resources allocated to state and local governments, and thus may be subject to state and local decision-making for eligible activities. This information can help inform decisions on how to apply funding to maximize resources and achieve recovery outcomes.

Additionally, the U.S. Department of Health and Human Services (HHS), FEMA, and other federal interagency partners are continuing to coordinate support requirements for the distribution of vaccinations related to COVID-19. Planning will continue for the implementation of the immunization effort once a vaccine is approved and ready for use. Final details will be dependent on the requirements associated with the delivery of the vaccine, including the type of storage that may be necessary, the rate at which the vaccine is available for use, and priorities for distribution of the vaccine. To the extent feasible, the vaccine will be made available through established health care delivery and reimbursement systems, and HHS has established mechanisms and program funding for the implementation of the vaccine. There may be additional resources needed from the Federal government to support SLTT in order to deliver and execute the vaccination effort, such as any additional costs for distribution and storage of the vaccine, or additional supplies or equipment, such as PPE, that are not covered by established processes or funding. Such costs incurred by SLTT governments in implementing the vaccine may be eligible for FEMA Public Assistance, and/or Fiscal Year (FY) 2020 Emergency Management Performance Grant Program – COVID-19 Supplemental (EMPG-S) funding, when reasonable and necessary, when not covered by another source of supplies or funding, and in accordance with eligibility criteria. We will have more information on the support and funding that will be available from various Federal resources as the requirements for the vaccine become known and will update the Roadmap as details are finalized.
Figure 1: Patient Care Delivery

Patient Care
Healthcare providers face challenges in treating persons diagnosed with COVID-19 while continuing to treat those without COVID-19. For healthcare providers not treating COVID-19, in-person treatments may still result in the transmission of COVID-19. Healthcare providers will need to take additional steps to ensure the health and safety of both staff and patients, even when the patient is not seeking COVID-19-related medical care.

Transport of Persons Diagnosed with or Suspected of Having COVID-19
Diagnostic Testing, Screening, and/or Surveillance for COVID-19
Treatment of Persons Diagnosed with COVID-19
Expand Telemedicine to mitigate spread of COVID-19

Treasuries:
- Coronavirus Relief Fund
- HHS/HRSA: Provider Relief Fund

FEMA:
- Public Assistance - Category B Emergency Protective Measures
- DOT/MSA:
  - EMS Guidance for Preventing Disease Spread During Transport of Patients at High Risk for COVID-19

HHS/CMS:
- Suspension of Medicare Sequestration
- Medicare Accelerated and Advance Payments

HHS/CDC:
- Public Health Preparedness Cooperative Agreement
- COVID-19 Public Health Crisis Response
- Supporting Tribal Public Health Capacity in Coronavirus Preparedness and Response
- Tribal Public Health Capacity Building and Quality Improvement
- Contact Tracing Resources for Health Departments

HHS/HRSA:
- COVID-19 Medical Countermeasure Portfolio

HHS/HRSA:
- Uninsured Patient Testing and Relief

FEMA:
- Public Assistance - Category B Emergency Protective Measures

DOT/MSA:
- EMS Personnel Support for Population Testing, Screening, and Vaccination

Note: Under “Diagnostic Testing, Screen and/or Surveillance for COVID-19”, FEMA Public Assistance Category B can be used specifically for testing only.
Figure 2: Healthcare Workforce Protection and Expansion

**Workforce**
As the frontline to the COVID-19 pandemic, the healthcare workforce will face significant challenges. Inadequate training, staffing, and protection of workers could lead to an understaffed and underprepared workforce. Workers may face mental health challenges and burn-out during the ongoing pandemic. Administrative staff and non-patient-facing staff will encounter their own set of challenges either through social distancing or teleworking.

- Train staff to care for persons with and without a diagnosis of COVID-19
- Medical sheltering for emergency workers
- Hire additional staff and redeploy existing and furloughed staff
- Provide Personal Protective Equipment (PPE)

**Treasury**
- Coronavirus Relief Fund

**HHS/ASPR**
- Hospital Preparedness Program Supplemental Funding
- Strengthening Public Health Systems and Services Through National Partnerships to Improve and Protect the Nation’s Health
- Infection Control Training and Education Resources

**HHS/CDC**
- Medicare Accelerated and Advanced Payments
- Suspension of Medicare Sequestration

**HHS/FAA**
- FY2020 COVID-19 Workforce Telehealth
- State and Regional Primary Care Association Cooperative Agreements

**FEMA**
- Public Assistance – Category B Emergency Protective Measures
- State Long-term Care Ombudsman programs
- Public Assistance – Category B Emergency Protective Measures
- National Disaster Medical System

**HHS/ACL**
- Hospital Preparedness Program Supplemental Funding

**HHS/ASPR**
- Public Assistance – Category B Emergency Protective Measures
- Using the Critical Care Decontamination System
- Hospital Preparedness Program Supplemental Funding

**HHS/CDC**
- Optimizing Personal Protective Equipment (PPE) Supplies
- Personal Protective Equipment (PPE) Burn Rate Calculator
- PPE Preservation Best Practices

* Specific challenges for the topic area
* Potential Solutions to consider
* Universal Resources
* Solution-specific

Technical assistance resources
COVID-19 Healthcare Resource Roadmap

Figure 3: Hospital Operations and Financial Management

Facilities and Operations
Additional costs incurred due to COVID-19, paired with decreased patient revenues, will create financial stress for healthcare facilities. As the pandemic continues, constant preparation and prevention will be crucial.

Support financial viability
Ensure capacity (infrastructure and/or technology)
Implementation of infection prevention and control measures associated with the care of persons diagnosed with COVID-19
Plan for continued public health emergency
Prepare for vaccine distribution (vaccination planning will continue to evolve)

Treasurer:
Coronavirus Relief Fund

HHS/HRSA:
Provider Relief Fund
HHS/CMS:
Medicare Accelerated and Advance Payments
SBA:
Paycheck Protection Program
Economic Injury Disaster Loan
Treasury/IRS:
Employer Payroll Tax Delay
Employer Retention Tax Credit

HHS:
Alternate Care Sites Toolkit
HHS/ASPR:
Hospital Preparedness Program Supplemental Funding
Hospital Surge Evaluation Tool

Facilities to Fight COVID-19

HUD:
Community Development Block Grant

VA:
Grants for Construction of State Extended Care Facilities

FEMA:
Public Assistance — Category B Emergency Protective Measures

USD/OM:
Community Facilities Loan and Grants
Rural Economic Development Loans and Grants

FEMA:
Public Assistance — Category B Emergency Protective Measures

EPA:
Disinfectants for Use Against SARS-CoV-2

HHS/ASPR:
Tools for Infection Control in Healthcare Settings
Infection Control Assessment Tools

HHS/HRSA:
Medical Operations Coordination Cells Toolkit
Healthcare System Considerations for Resumption of Services during COVID-19
COVID-19 Hospital Resource Package
State and Regional Primary Care Association Cooperative Agreements
ASPR National Disaster Medical System staff can provide temporary staff augmentation and decompression

HHS/OCC:
COVID-19 Public Health Cross Response
Strengthening Public Health Systems and Services Through National Partnerships to Improve and Protect the Nation’s Health
Supporting Tribal Public Health Capacity in Coronavirus Preparedness and Response
Tribal Public Health Capacity Building and Quality Improvement
Key Considerations for Transferring Patients to Relief Healthcare Facilities

HHS/HRSA:
Rural Healthcare Surge Readiness Web Portal

Legend:
Specific challenges for the topic area
Potential Solutions to consider
Universal Resources
Solution-specific

* Technical assistance resources

Learn more at fema.gov

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Figure 4: Post-Acute and Long-Term Care and Other Implications of COVID-19

**POST-ACTUE AND LONG-TERM CARE AND OTHER IMPLICATIONS OF COVID-19**

**Post-Acute and Long-Term Care (PALT) for At-Risk Populations**
Nursing homes, rehabilitation facilities, home health, long-term care facilities, and skilled nursing facilities pose their own unique virus mitigation challenges. Residents in these facilities may be persons previously hospitalized for care for COVID-19 illness.

- Continue and expand in-home care

**Mental Health and/or Increased Substance Abuse**
Stress, anxiety, social isolation, and other emotions associated with COVID-19 and its implications on daily life has led to mental health concerns. Some of this stress has resulted in increased substance abuse. Frontline healthcare workers may have additional stress in providing care to others during the COVID-19 pandemic.

- Strengthen community living and PALT resiliency
- Increase mental health/substance abuse services
- Mental health support for healthcare workers

**Treasury**
- Coronavirus Relief Fund

**HHS/ACL**
- National Family Caregiver Support Program
- Guidance for Implementing Home Care – People Not Requiring Hospitalization*

**HHS/CDC**
- Targeted COVID-19 Training for Frontline Nursing Home Staff*
- Toolkit on State Action to Mitigate COVID-19 Prevalence in Nursing Homes*

**HHS/HRSA**
- Provider Relief Fund Nursing Homes Allocation
- Provider Relief Fund Community Living Facilities Allocation

**AHRQ**
- National Nursing Home COVID Action Network*

* Technical assistance resources

Learn more at fema.gov

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Note: Costs incurred by state, local, tribal and territorial governments in delivering and executing vaccination may be eligible for FEMA Public Assistance and/or Fiscal Year (FY) 2020 Emergency Management Performance Grant Program – COVID-19 Supplemental (EMPG-S) funding in accordance with each program’s eligibility criteria (see Additional Resources below).
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*Items that may provide assistance but are not CARES Act funded

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# COVID-19 Healthcare Resource Roadmap

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Learn more at fema.gov

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Additional Resources

General
The Centers for Disease Control and Prevention provides facts about Coronavirus (COVID-19) on staying safe and protecting others in your home and community. Indian Health Services: Coronavirus and National Council of Urban Indian Health provide information and technical assistance for tribal nations. General information and resources for the healthcare industry can be found at:

- Information for Healthcare Professionals about Coronavirus
- Preparedness Tools for Healthcare Professionals and Facilities Responding to Coronavirus
- National Emerging Special Pathogens Training and Education Center
- COVID-19 Resources for EMS
- COVID-19 Hospital Resource Package
- Contact Tracing Resources for Health Departments

For a list of the U.S. Department of Health and Human Services funding for COVID-19 by state and territory, information by funding phase, please see HHS COVID-19 Awards.

The Centers for Medicare & Medicaid Services provides flexibility for Medicare and Medicaid providers. These flexibilities are available at: Hospitals: Centers for Medicare & Medicaid Services Flexibilities to Fight COVID-19.

General COVID-19 related information and resources for SLTT emergency management officials is available at: https://www.fema.gov/disasters/coronavirus/governments

Patient Care Delivery
Identifying patients diagnosed with COVID-19 is a critical measure in delivering patient care during the COVID-19 pandemic. Funded and/or approved COVID-19 vaccines, diagnostics, therapeutics, and other countermeasures are tracked in the COVID-19 Medical Countermeasures Portfolio. Additionally, Personnel Support for Population Testing, Screening, and Vaccination can be used to assist in COVID-19 surveillance.

In caring for patients diagnosed with COVID-19, Rapid Expert Consultation on Crisis Standards of Care for the COVID-19 Pandemic promotes broad principles and core elements of Crisis Standards of Care planning and implementation. Interim Guidance for Implementing Home Care of People Not Requiring Hospitalization for Coronavirus Disease 2019 can be used for treating patients in non-hospital settings.

Guidance on Preventing Disease Spread During Transport of Patients at High Risk for COVID-19 Illness provides recommendations for Emergency Medical Services. Additionally, the CDC is providing the American public with the information and assistance it needs to address COVID-19 head on and continues to issue guidance and recommendations based on the best available science and data. CDC’s guidance on Contact Tracing can be found on the CDC website.
In expanding and implementing telehealth, several resources are available to support telehealth practices:

- Telehealth Information
- Telehealth Resource Library
- Telehealth – Rural Health
- COVID-19 Telehealth Toolkit

**Healthcare Workforce Protection and Expansion**

For additional staffing needs, National Disaster Medical System provides nationwide support and mobilization of medical teams during disasters. Additionally, Emergency Medical Services Personnel Support for Population Testing, Screening, and Vaccination can help supplement staffing needs.

Regarding shortages of Personal Protective Equipment (PPE), the COVID-19: Personal Protective Equipment (PPE) Preservation Best Practices can be used to decrease burn rates of PPE. Optimization strategies and burn-rate calculators can also help preserve supplies. Additionally, using the Critical Care Decontamination System ™, and other FDA authorized sterilizing systems, to decontaminate compatible N95 filtering facepiece respirators can help preserve PPE supply.

State and Regional Primary Care Association Cooperative Agreements provides training and technical assistance to health centers for continued primary care. The CDC provides additional training and education resources on infection prevention and control, which includes Safe Healthcare Webinars, Continued Medical Education (CME) courses, and Continued Nursing Education (CNE) courses.

Additional training resources for nursing homes is provided at: Targeted COVID-19 Training for Frontline Nursing Home Staff.

**Hospital Operations and Financial Management**

There are resources available for hospital planning:

- Hospital Surge Evaluation Tool from HPP
- Alternate Care Site Toolkit
- COVID-19 Hospital Resource Package
- Healthcare System Considerations for Resumption of Services during COVID-19
- Rural Healthcare Surge Readiness
- Infection Control Assessment Tools

On a regional scale, Medical Operations Coordination Cell Toolkit can assist in load-balancing across healthcare facilities and systems so that the highest possible level of care can be provided during the COVID-19 pandemic. Key Considerations for Transferring Patients to Relief Healthcare Facilities when Responding to Community Transmission of COVID-19 in the United States is also provided to assist in balance resources across multiple hospital systems.
In implementing infection prevention and control in healthcare settings, infection control assessment and response tools are available. The Environmental Protection Agency (EPA) provides information and resources related to indoor air and COVID-19. These considerations for reducing airborne transmission of COVID-19 may be helpful for planning, operating facilities, and implementing infection prevention and control procedures to protect patients and healthcare workers. EPA also provides information on approved disinfectants against COVID-19, the virus that causes COVID-19.

Additionally, State and Regional Primary Care Association Cooperative Agreements provides training and technical assistance to health centers for continued primary care. Businesses and Workplaces provides guidance and strategies to help prevent workplace exposures of COVID-19.

Healthcare systems should prepare for eventual vaccine distribution. COVID-19 Medical Countermeasures Portfolio tracks COVID-19 vaccines, diagnostics, therapeutics, and other countermeasures. CDC provides Emergency Preparedness and Vaccine Safety information, with examples from past experience with Smallpox in 2002 and H1N1 in 2009 and 2010. For the most up to date operational plans for jurisdictions, the COVID-19 Vaccination Interim Playbook led by the CDC provides guidance from planning to administering and monitoring vaccinations.

Post-Acute and Long-Term Care and Other Implications of COVID-19

To decrease the burden on overwhelmed healthcare systems, consider the Interim Guidance for Implementing Home Care of People Not Requiring Hospitalization for Coronavirus Disease 2019.

For Community Living facilities mitigating the spread of COVID-19, visit:

- Administration for Community Living COVID-19 information
- COVID-19 Rapid Response Network for Nursing Homes
- National Nursing Home COVID-19 Action Network (Recent Announcement)
- Nursing Homes and Long-Term Care Facilities
- Considerations for Preventing Spread of COVID-19 in Assisted Living Facilities
- Toolkit on State Action to Mitigate COVID-19 Prevalence in Nursing Homes

To support the general population experiencing stress, anxiety, and other negative behavioral health effects due to COVID-19’s impact on daily life, tools are available at:

- COVID-19 Behavioral Health Resources
- Taking Care of your Behavioral Health – Tips for Social Distancing, Quarantine, and Isolation During an Infectious Disease Outbreak
- Grief and Loss
- Coping with Stress

For frontline healthcare professionals undergoing heightened stress, anxiety, and other emotions due to COVID-19, resources and guidelines are available at:

- Healthcare Personnel and First Responders: How to Cope with Stress and Build Resilience during the COVID-19 Pandemic
- Burnout, Self-Care, and COVID-19 Exposure for First Responders
- Tips for Healthcare Professionals: Coping with Stress and Compassion Fatigue
Vaccine Administration

In planning for eventual vaccine distribution, stakeholders and administrators will have to plan every step of the process from transportation and distribution to administration and administration sites. For the most up to date operational plans for jurisdictions, the COVID-19 Vaccination Interim Playbook led by the CDC provides guidance from planning to administering and monitoring vaccinations. Federal strategy on vaccination distribution is outlined in the Operational Warp Speed plan. CDC also provides Emergency Preparedness and Vaccine Safety information, with examples from past experience with H1N1 in 2009 and 2010 and Smallpox in 2002. When planning for vaccine storage, CDC offers administration tools on Vaccine Storage and Handling as well as Interim Guidance for Routine and Influenza Immunization Services During the COVID-19 Pandemic. Vaccine Administration, Personnel Support for Population Testing, Screening, and Vaccination can be used to assist in vaccine administration. In planning administration sites, Guidance for Planning Vaccination Clinics Held at Satellite, Temporary, or Off-Site Locations is also provided by the CDC.

Planning will continue for the implementation of the immunization effort once a vaccine is approved and ready for use. Final details will be dependent on the requirements associated with the delivery of the vaccine. To the extent feasible, the vaccine will be made available through established health care delivery and reimbursement systems, and HHS has established mechanisms and program funding for the implementation of the vaccine. There may be additional resources needed from the Federal government to support SLTT in order to deliver and execute the vaccination effort, such as any additional costs for distribution and storage of the vaccine, or additional supplies or equipment, such as PPE, that are not covered by established processes or funding. Such costs incurred by SLTT governments in implementing the vaccine may be eligible for FEMA Public Assistance and/or EMPG-S funding, when reasonable and necessary, when not covered by another source of supplies or funding, and in accordance with eligibility criteria. More information on support and funding will be made available as the requirements for the vaccine become known, and the Roadmap will be updated as details are finalized.
## Acronym List

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>ACL</td>
<td>Administration for Community Living (HHS)</td>
</tr>
<tr>
<td>AHRQ</td>
<td>Agency for Healthcare Research and Quality (HHS)</td>
</tr>
<tr>
<td>ASPR</td>
<td>Assistant Secretary for Preparedness and Response (HHS)</td>
</tr>
<tr>
<td>CARES</td>
<td>Coronavirus Aid, Relief, and Economic Security</td>
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<tr>
<td>CDBG</td>
<td>Community Development Block Grant</td>
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<tr>
<td>CDC</td>
<td>U.S. Centers for Disease Control and Prevention</td>
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<tr>
<td>CMS</td>
<td>Centers for Medicare &amp; Medicaid Services</td>
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<tr>
<td>COVID-19</td>
<td>Coronavirus Pandemic</td>
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<tr>
<td>EMPG-S</td>
<td>Emergency Management Performance Grant Program – COVID-19 Supplemental</td>
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<tr>
<td>EMS</td>
<td>Emergency Medical Service</td>
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<tr>
<td>EPA</td>
<td>Environmental Protection Agency</td>
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<tr>
<td>FAQ(s)</td>
<td>Frequently Asked Questions</td>
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<tr>
<td>FCC</td>
<td>Federal Communications Commission</td>
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<tr>
<td>FEMA</td>
<td>Federal Emergency Management Agency</td>
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<td>HHS</td>
<td>U.S. Department of Health and Human Services</td>
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<td>HRSA</td>
<td>Health Resources and Services Administration (HHS)</td>
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<td>HUD</td>
<td>U.S. Department of Housing and Urban Development</td>
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<tr>
<td>IRS</td>
<td>U.S. Internal Revenue Service</td>
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<td>NASEM</td>
<td>National Academies of Sciences, Engineering, and Medicine</td>
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<td>NDMS</td>
<td>National Disaster Medical System</td>
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<tr>
<td>PPE</td>
<td>Personal Protective Equipment</td>
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<tr>
<td>SAMHSA</td>
<td>Substance Abuse and Mental Health Services Administration (HHS)</td>
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<td>SBA</td>
<td>U.S. Small Business Administration</td>
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<tr>
<td>PALTC</td>
<td>Post-Acute and Long-Term Care</td>
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<tr>
<td>SLTT</td>
<td>State, Local, Tribal, and Territorial</td>
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<tr>
<td>TRC</td>
<td>Telehealth Resource Centers</td>
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<td>Treasury</td>
<td>U.S. Department of the Treasury</td>
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<tr>
<td>USDA</td>
<td>U.S. Department of Agriculture</td>
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<tr>
<td>VA</td>
<td>U.S. Department of Veterans Affairs</td>
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