

# COVID-19 MINNESOTA FUND EXPENDITURE REPORT

May 15, 2020

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### **Executive Summary**

- The COVID-19 Minnesota fund was created to pay expenditures associated with the peacetime emergency declared by the Governor in executive order 20-01 related to COVID-19. The fund was established on March 28, 2020 with a starting balance of \$200 million.
- Money in the fund is appropriated to the Commissioner of Management and Budget to be disbursed or transferred to state agencies, as necessary, to:
  - 1. Protect Minnesota citizens from the COVID-19 outbreak, and;
  - 2. Maintain state government operations throughout the duration of the peacetime emergency.
- The Commissioner of Management and Budget may authorize expenditures of \$1 million or less. An
  expenditure request in excess of \$1 million must be submitted to the Legislative COVID-19 Response
  Commission for review and recommendation before it can be authorized.
- The COVID-19 Minnesota fund will expire December 31, 2020, pursuant to the Laws of 2020, Chapter 81. Upon expiration, any money in the fund that remains unobligated will transfer back to the general fund.
- As of May 14, 2020, \$20.582 million remains unauthorized in the fund. \$172.706 million has been authorized by the Legislative COVID-19 Response Commission and \$6.712 million has been authorized as an expenditure of \$1 million or less.
- Eight expenditure requests totaling \$64.711 million were submitted to the Legislative COVID-19
  Response Commission for review and recommendation between April 30, 2020 and May 14, 2020. All
  eight requests received the requisite number of positive recommendations to authorize the
  expenditure.
- Two expenditures of \$1 million or less, totaling \$472,400, were authorized between April 30, 2020 and May 14, 2020.
- LCRC Action Order #8 provides for discretionary spending on critical supplies. As of May 14, 2020, \$5.416 million of spending authority remains in this authorization. Purchases authorized from LCRC Action Order #8 between April 30, 2020 and May 14, 2020, include:
  - o Gloves 23,874,700
  - Surgical Masks 1,600,600; N95 Masks 1,005,520; Cloth Masks 100,000
  - o Gowns 225,000
  - o Face Shields –100,000
  - o Infrared Thermometers 200

Additional authorized purchases are listed in Appendix A, the COVID-19 Minnesota Fund Detail.

### **Background**

The COVID-19 pandemic presented an unprecedented challenge to our State. On March 19, 2020, in a letter to the leaders of the Minnesota Senate and House of Representatives, Governor Walz and Lt. Governor Flanagan asked the Legislature to create a fund that would give the Administration the flexibility to deploy resources necessary to respond to the needs of Minnesotans in real time.

On March 28, 2020, the Legislature passed legislation creating the COVID-19 Minnesota fund, transferring to it \$200 million from the general fund, and appropriating all money to the Commissioner of Management and Budget to be disbursed or transferred to state agencies, as necessary, to:

- 1. Protect Minnesota citizens from the COVID-19 outbreak, and;
- 2. Maintain state government operations throughout the duration of the peacetime emergency.

The legislation also established the Legislative COVID-19 Response Commission to review expenditures. Members of the Commission are: Senate President Jeremy Miller, Senate Majority Leader Paul Gazelka, Senate Minority Leader Susan Kent, Senator Julie Rosen, Senator Dick Cohen, Speaker of the House Melissa Hortman, House Majority Leader Ryan Winkler, House Minority Leader Kurt Daudt, Representative Lyndon Carlson, and Representative Pat Garofalo.

The Commissioner of Management and Budget may authorize expenditures of \$1 million or less. However, the process for approving these requests adopted by the Administration requires additional approval from the Commissioner of Health and the Governor's Chief of Staff.

An expenditure request in excess of \$1 million must be submitted to the Legislative COVID-19 Response Commission for review and recommendation before it can be authorized. Upon submission, the Commission has 24 hours to review a request and provide a positive recommendation, a negative recommendation, or no recommendation. If a majority of commission members from the Senate and a majority of commission members from the House of Representatives provide a negative recommendation on a proposed expenditure, the commissioner is prohibited from expending the money. If a majority of the commission members from the senate or a majority of the commission members from the house of representatives do not make a negative recommendation, or if the commission makes no recommendation, the commissioner may expend the money.

The Commissioner of Management and Budget must provide reports on the spending from the COVID-19 Minnesota fund to the Legislative COVID-19 Response Commission on the 15th and last day of each month. The report must include the total amount of each expenditure, the purpose of each expenditure, and any additional information the commissioner of management and budget determines is necessary to properly document each expenditure.

The COVID-19 Minnesota fund will expire December 31, 2020, pursuant to the Laws of 2020, Chapter 81. Upon expiration, any money in the fund that remains unobligated will transfer back to the general fund.

## **Authorized Expenditures**

Below is a summary of total authorized expenditures from the COVID-19 Minnesota fund. The first chart highlights authorized expenditures in excess of \$1 million. The second chart highlights authorized expenditures of \$1 million or less.

### **Authorized Expenditures in Excess of \$1 Million**

(\$ in thousands)

Request #	Date	Agency	Description	Requested	Approved
LCRC-1	03/30/20	MDH	Ventilators	\$31,500	\$31,500
LCRC-2	03/3020	MDH	N95 Respirators	\$16,000	\$16,000
LCRC-3	04/02/20	MDH	Amend LCRC Request #2 from \$4 million to \$16 million	~	~
LCRC-4	04/02/20	MDH	PPE – Gowns	\$8,000	\$8,000
LCRC-5	04/02/20	MDH	PPE – Gloves	\$7,000	\$7,000
LCRC-6	04/03/20	MDH	PPE – Surgical Masks	\$5,400	\$5,400
LCRC-7	04/09/20	DOC	Manage COVID-19 Related Demands for March/April	\$2,255	\$2,255
LCRC-8	04/14/20	MDH	Amend LCRC Requests #1-6 for Critical Supply Needs	~	~
LCRC-9	4/22/20	MDH	Rapid and Widespread Testing for COVID-19	\$36,000	\$36,000
LCRC-10	4/28/20	MDH	Preparation of a Community Alternative Care Site	\$1,840	\$1,840
LCRC-11	5/4/2020	MDA	Animal Carcass Disposal	\$10,952	\$10,952
LCRC-12	5/6/2020	MDH	Community Engagement and Outreach	\$2,250	\$2,250
LCRC-13	5/7/2020	ADM	Storage Facility	\$6,900	\$6,900
LCRC-14	5/9/2020	MDH	Gown Purchase; Flexibility for Critical Care Supplies	\$21,550	\$21,550

Request #	Date	Agency	Description	Requested	Approved
LCRC-15	5/10/2020	DHS	Isolation Space for Individuals Experiencing Homelessness	\$7,200	\$7,200
LCRC-16	5/13/2020	MDH	Regional Mobile Testing Teams: Long Term Care	\$3,000	\$3,000
LCRC-17	5/13/2020	MDH	Washable Gowns Purchase	\$8,500	\$8,500
LCRC-18	5/14/2020	MDH	Purchase of Testing Supplies – Swabs	\$4,359	\$4,359
		1	SUBTOTAL   Requests in Excess of \$1 Million	\$172,706	\$172,706

## **Authorized Expenditures of \$1 Million or Less**

(\$ in thousands)

Request #	Date	Agency	Description	Requested	Approved
MMB-1	03/30/20	MDH	N95 Respirators	\$402	\$402
MMB-2	03/31/20	MDH	Cloth Masks	\$250	\$250
MMB-3	03/31/20	MDH	Face Shields	\$59	\$59
MMB-4	04/01/20	MDH	Cloth Masks	\$250	\$250
MMB-5	04/01/20	MDH	Gloves	\$600	\$600
MMB-6	04/01/20	MDH	Nasal Cannula	\$84	\$84
MMB-7	04/06/20	MDH	Face Shields	\$277	\$277
MMB-8	04/07/20	MDH	Reusable Respirators	\$78	\$78
ММВ-9	04/07/20	MDH	Infrared Thermometers	\$8	\$8
MMB-10	04/07/20	MDH	Reusable, Washable Gowns	\$85	\$85
MMB-11	04/07/20	MDH	Safety Glasses	\$8	\$8
MMB-12	04/08/20	MDH	Gloves	\$77	\$77
MMB-13	04/08/20	MDH	Patient and Equipment Tracking System Software	\$64	\$64
MMB-14	04/08/20	MDH	Water Resistant, Washable Gowns	\$35	\$35
MMB-15	04/09/20	MDH	Simple Surgical Masks	\$150	\$150
MMB-16	04/09/20	MDH	Hand Sanitizer	\$455	\$455
MMB-17	04/09/20	MDH	Simple Surgical Masks	\$266	\$266

Request #	Date	Agency	Description	Requested	Approved
MMB-18	04/09/20	MDH	Alternate Care Sites Medical Supplies	\$180	\$180
MMB-19	04/10/20	MDH	Simple Surgical Masks	\$850	\$850
MMB-20	04/10/20	MDH	Shoe Covers	\$17	\$17
MMB-21	04/13/20	MDH	Surgical Masks	\$470	\$470
MMB-22	04/13/20	MDH	BiPAP Machines and Equipment	\$415	\$415
MMB-23	04/13/20	MDH	Surgical Masks	\$961	\$961
MMB-24	04/13/20	MDH	Gloves	\$2	\$2
MMB-25	04/20/20	MDH	Alternative Care Sites - Professional/Technical Contract	\$198	\$198
MMB-26	5/2/2020	DHS	Direct Food Assistance to Tribal Nations	\$386	\$386
MMB-27	5/5/2020	MDH	Health Care Surge Work Group – software purchase	\$86	\$86
			SUBTOTAL   Requests of \$1 Million or Less	\$6,712	\$6,712

### **Commentary on Authorized Expenditures**

Eight new LCRC requests were authorized for expenditures in excess of \$1 million between April 30, 2020 and May 14, 2020, totaling \$64.711 million.

1. LCRC-11: \$10,952,000 is authorized to the Minnesota Department of Agriculture for animal carcass disposal. Due to the closing of meat processing plants both in Minnesota and South Dakota because of COVID-19, a large volume of livestock animals must be euthanized and disposed of. This creates a human and environmental health hazard that must be managed to protect Minnesotans and their communities. This funding will be used to start with the first regional site near the JBS plant in Worthington. Once this site is up and running, remaining funds will be used to set up other regional sites to help with other area farmers.

Representative Kurt Daudt raised questions about this proposal, particularly the numbers. Minnesota Department of Agriculture Commissioner Thom Petersen provided a response on Monday, May 4, 2020, which is provided in Appendix C.

- 2. LCRC-12: \$2,250,000 is authorized to the Minnesota Department of Health for community engagement and outreach. This funding is provided to the Minnesota Department of Health to administer multiple contracts to community-based organizations and media vendors to ensure that all who reside in Minnesota and the 11 Tribal Nations that share its geography including residents from communities of color, American Indian residents, LGBTQ communities, and residents with limited English proficiency have the opportunity to be (1) connected to resources and services addressing their COVID-19-related needs, and (2) fully informed with culturally relevant, linguistically appropriate, accurate, and timely messages related to COVID-19.
- 3. LCRC-13: \$6,900,000 is authorized to the Minnesota Department of Administration for a storage facility. COVID-19 is driving an increase in the number and rate of deaths in Minnesota. Public Health experts say half of all projected deaths are likely to occur within a four to five-week period. Funeral homes, medical examiner offices, and hospitals cannot meet the coming demand alone. The State of Minnesota has identified a facility that can accommodate anticipated needs. This type of facility is not available for lease, due to the nature of the use of the facility. The purchase price is estimated to be \$5.475 million. With \$1 million in projected building operating costs, \$425,000 of improvements, maintenance and other costs, the total need for resources is \$6.9 million. This facility can accommodate a surge in demand for the timely, dignified, and temporary storage of human remains. It is anticipated that this request will be reimbursable at 75% through the Federal Emergency Management Agency (FEMA).

Senator Paul Gazelka requested a year-end accounting/report of how these funds are used, including information regarding whether the purchased property is repurposed or sold. The Minnesota Department of Administration will provide this information.

Representative Kurt Daudt requested more information about this proposal. Minnesota Department of Administration Commissioner Alice Roberts-Davis provided a response and conveyed this conversation in an email on Thursday, May 7, 2020, which is provided in Appendix C.

- 4. LCRC-14: \$21,550,000 is authorized to the Minnesota Department of Health for gowns and/or flexible spending for critical care supplies. The Minnesota Department of Health, under the advice of the Critical Care Supply workgroup, requested \$21.55 million from the COVID-19 Minnesota fund to purchase an estimated 3,000,000 gowns. This request did not use the remaining authority from LCRC authorization #8 for discretionary spending for critical supplies, as the balance did not provide enough funding for this order. This was a new authorization to secure the purchase. In the event that we did not act quickly enough to secure this deal, or we could only secure a lesser quantity of gowns, we requested that the remaining amount of this request be added to LCRC authorization #8 for discretionary spending for critical supplies. As a result of this authorization, 3,000,000 gowns were secured.
- 5. LCRC-15: \$7,200,000 is authorized to the Minnesota Department of Human Services to establish isolation spaces for people experiencing homelessness who are symptomatic or COVID-19 positive. The Minnesota Department of Human Services' distribution and management of these funds will be designed to maximize FEMA reimbursement for eligible expenses. Isolation spaces are needed for people experiencing homelessness who are symptomatic or confirmed to be infected with COVID-19, who do not require hospitalization. Since people experiencing homelessness cannot isolate at home during their illness, such spaces are critical to minimize transmission and address the health needs of people who become ill. Lack of access to appropriate isolation space undermines major state efforts to test and trace COVID-19 positive individuals. The Legislature recently appropriated \$15.206 million for the purpose of providing additional shelter options that promote health and safety. All of those funds have been expended or encumbered. The total need for isolation space in Minnesota exceeds \$7.2 million. However, this proposal would support an initial effort to build capacity in targeted regions of the state and inform future isolation strategies.
- 6. LCRC-16: \$3,000,000 is authorized to the Minnesota Department of Health to implement regional mobile testing teams for priority COVID-19 testing settings in Long Term Care (LTC). The LTC Battle Plan that Governor Walz announced on May 7 placed a clear and urgent priority on expanded testing in LTC facilities, based on newly-released guidance for mass testing of all residents and staff within facilities that have a positive case or multiple symptomatic residents. Expanded testing in congregate facilities can present multiple challenges, as employees that test positive must be removed from duties, and many residents may require isolation and medical follow up.

Testing capacity is now becoming available for congregate care testing, with the expansion of lab capacity statewide as part of the MN Testing Plan. However, personnel for swabbing congregate facility residents and staff are not widely available in each region or through local public health, which means additional supports will be needed in order to effectively implement the testing components of the LTC Battle Plan.

Mobile teams would be supplied with staff, supplies and vehicles to perform the following functions:

- Sample acquisition for testing (on-site swabbing of residents/staff based on clinical criteria)
- Personal Protective Equipment (PPE) education and mentoring for LTC facilities to avoid additional burden on the healthcare system
- On-call emergency staffing for situations where staff in a LTC facility test positive and need to be immediately isolated

An additional request for Coronavirus Relief Funds will be forthcoming to expand the capacity of mobile testing to other congregate care and priority settings.

7. LCRC-17: \$8,500,000 is authorized to the Minnesota Department of Health for washable gowns. The Minnesota Department of Health, under the advice of the Critical Care Supply workgroup, requested \$8.5 million from the COVID-19 Minnesota fund to purchase an estimated 3,000,000 gowns. This request did not use the remaining authority from LCRC authorization #8 for discretionary spending for critical supplies, as the balance did not provide enough funding for this order. This was a new authorization to secure the purchase.

Following the successful purchase of 3,000,000 gowns from LCRC Action Order #14, the additional need for gowns at Minnesota's hospitals and long term care facilities was brought down to about 1,900,000 through August 2020. The Critical Care Supply workgroup updated this forecast and now estimates that Minnesota's hospitals and long term care facilities will need about 2,000,000 additional gowns through August 2020. The Department of Administration sourced an additional 520,000 washable gowns. This order would fulfill projected needs for washable gowns through August 2020. The workgroup will continue to source for the remaining projected need of about 1,480,000 disposable gowns.

8. LCRC-17: \$4,359,230 is authorized to the Minnesota Department of Health for up to 1,000,000 swabs. The Minnesota Department of Health will purchase nasopharyngeal 3D printed swabs, which are a key component of the testing supplies needed to collect specimens from people potentially infected with COVID-19. This authorization provides for the purchase of up to 1,000,000 swabs. The swabs will be used by statewide reference laboratories and collection sites specified on the MDH website. In addition, they may be used in collections at long term care facilities or other mobile testing sites.

Two new requests were authorized for expenditure of \$1 million or less between April 30, 2020 and May 14, 2020, totaling \$472,400.

1. \$386,000 is authorized to the Minnesota Department of Human Services for direct food assistance to Tribal Nations to meet an acute, short-term need. This request was developed by the Food Security Work Group (FSWG), whose goal is for all Minnesotans have safe access to food during COVID-19 and associated executive order impacts. Five tribes communicated an urgent need for food and supplies because the COVID-19 pandemic has exacerbated existing food insecurity, especially with closures of businesses and services including the casinos which is a main source of employment for community members. The tribes include Red Lake Nation, White Earth Nation, Leech Lake Band of Ojibwe, Lower Sioux Community, and Mille Lacs Band of Ojibwe. This request funds the procurement of current urgent food needs for tribes and the transport of those items and additional donated food items for the next 30 days. The procurement process is underway.

2. \$86,400 is authorized to the Minnesota Department of Health for a scheduling and workforce management software platform. This request was developed by the Health Care Surge Work Group in response to COVID-19 for a scheduling and workforce management software platform. The software will be used to ensure nursing shifts are covered in long term care facilities. This will be an important element of long term care testing strategy. The software will allow a real time schedule to be shared with a group of approximately 800 nurses to advertise staffing needs at different long term care sites. If a nurse can fill a shift, they will claim the shift on the app or other online device, which will populate their name on the shift and communicate to the facility that the shift is filled.

#### **COVID-19 Minnesota Fund Detail**

Laws 2020, Chapter 71, Article 1, Section 7 March 30, 2020 – May 14, 2020

(\$ in thousands)

Legislative COVID-19 Response Commission (LCRC) reviews requests over \$1 M within 24 hours for approval

Initial Fund Balance	Approved Spending Authority		Remaining Unauthorized	Actual Spent / Encumbered	Not	Committed
\$ 200,000	\$ 179,4	118 \$	20,582	\$ 163,248	\$	16,170

### Legislative COVID-19 Response Commission (LCRC) Authorizations

		Approved Spending		
Agency	Expenditure Request	Authority	Approval Date	Purchased
Agency Health	Ventilators	\$31,500	3/30/2020 LCRC #1	800 Ventilators and 200 Airvo machines
Health	N95 Respirators (original approval 3/30 for \$4 M)	\$16,000		1,500,000 N95 Respirators/Masks
				1,500,000 N95 Respirators/Masks
Health	Personal Protective EquipmentGowns	\$8,000	4/2/2020 LCRC #4	V l l. f.   f.   f.
Health	Personal Protective Equipment-Gloves	\$7,000	4/2/2020 LCRC #5	Vendor can't fulfill order 10,000,000 gloves
Health	Personal Protective Equipment-Surgical Masks	\$5,400	4/3/2020 LCRC #6	4,000,000 Surgical masks
Corrections	COVID-19 related demands in March/April	\$2,255	4/9/2020 LCRC #7	Cleaning/medical supplies and compensation
Health	Spending already approved in previous requests	[\$42,043]	4/14/2020 LCRC #8	Discretionary spending for critical supplies
Health	Discretionary spending for critical supplies \$33		4/14/2020 LCRC #8	125,000 Gloves
Health	Discretionary spending for critical supplies \$184		4/14/2020 LCRC #8	1,000,000 Shoe covers (500,000 pairs)
Health	Discretionary spending for critical supplies \$7		4/14/2020 LCRC #8	1,440 lab coats, 100 pants, 20,000 gloves
Health	Discretionary spending critical supplies \$180		4/15/2020 LCRC #8	4,000 Half-mask respirators and 8,000 filters
Health	Discretionary spending critical supplies \$5		4/15/2020 LCRC #8	Alternate Care Sites miscellaneous supplies
Health	Discretionary spending critical supplies \$6		4/15/2020 LCRC #8	36,000 Gloves
Health	Discretionary spending critical supplies \$76		4/16/2020 LCRC #8	1,500 Infrared thermometers
Health	Discretionary spending critical supplies \$285		4/16/2020 LCRC #8	1,470,000 Gloves
Health	Discretionary spending critical supplies \$1.695 M		4/16/2020 LCRC #8	105,000 Gowns
Health	Discretionary spending critical supplies \$800		4/17/2020 LCRC #8	100,000 Gowns
Health	Discretionary spending critical supplies \$8		4/17/2020 LCRC #8	10,000 Poncho style gowns
Health	Discretionary spending critical supplies \$8		4/20/2020 LCRC #8	70,000 Gloves
Health	Discretionary spending critical supplies \$11.673 M		4/20/2020 LCRC #8	598,752 Washable gowns
Health	Discretionary spending critical supplies \$175		4/20/2020 LCRC #8	150,000 Cloth masks
Health	Discretionary spending critical supplies \$1.75  Discretionary spending critical supplies \$1.947 M		4/21/2020 LCRC #8	300,000 Disposable gowns (\$ revised 5/11/2020)
Health			4/21/2020 LCRC #8	1,000,000 Disposable gowns (3 Teviseu 3/11/2020)
	Discretionary spending critical supplies \$820			2.415.000 Gloves
Health	Discretionary spending critical supplies \$423		4/22/2020 LCRC #8	, -,
Health	Discretionary spending critical supplies \$10	405.000	4/22/2020 LCRC #8	50,000 Gloves
Health	U of M & Mayo Clinic COVID-19 Rapid Widespread Testing	\$36,000	4/22/2020 LCRC #9	U of M and Mayo Clinic - Rapid & Widespread Testing
Health	Discretionary spending critical supplies \$130		4/22/2020 LCRC #8	4,000 Washable gowns
Health	Discretionary spending critical supplies \$77			9,000 Disposable gowns
Health	Discretionary spending critical supplies \$4		4/23/2020 LCRC #8	80 Pulse oximeters
Health	Discretionary spending critical supplies \$7		4/24/2020 LCRC #8	99,000 Gloves
Health	Discretionary spending critical supplies \$19		4/27/2020 LCRC #8	600 Pulse oximeters
Health	Discretionary spending critical supplies \$81		4/27/2020 LCRC #8	1,116,000 Gloves
Health	Discretionary spending critical supplies \$841		4/27/2020 LCRC #8	200,000 N95 Respirators/Masks
Health	Discretionary spending critical supplies \$23		4/27/2020 LCRC #8	414,700 Gloves
Health	Preparation of Community Alt. Care Site in Roseville	\$1,840	4/28/2020 LCRC #10	Preparation of Community Alt. Care Site in Roseville
Health	Discretionary spending critical supplies \$16		4/28/2020 LCRC #8	215,700 Gloves (Order Revised 5/5/2020)
Health	Discretionary spending critical supplies \$351		4/28/2020 LCRC #8	100,000 Face shields
Health	Discretionary spending critical supplies \$19		4/28/2020 LCRC #8	250 Infrared thermometers
Health	Discretionary spending critical supplies \$7.487 M			1,000,000 Disposable gowns
Health	Discretionary spending critical supplies \$3			21,000 Gloves
Health	Discretionary spending critical supplies Alt Care \$6		, ,	103 Oxygen flow regulators
Health	Discretionary spending critical supplies \$378		4/30/2020 LCRC #8	100,000 Face shields
Health	Discretionary spending critical supplies \$19		4/30/2020 LCRC #8	399,600 Gloves
Health			5/1/2020 LCRC #8	
Health	Discretionary spending critical supplies \$950			1,000,000 Simple surgical masks
	Discretionary spending critical supplies \$1.627 M	¢40.053	5/1/2020 LCRC #8	100,000 Reusable gowns
Agriculture	Animal Carcass Disposal	\$10,952		Environmental emergency response
Health	Discretionary spending critical supplies \$4		5/5/2020 LCRC #8	36,000 Gloves
Health	Discretionary spending critical supplies \$10	4	5/5/2020 LCRC #8	200 Infrared thermometers
Health	Community Engagement and Outreach	\$2,250	5/6/2020 LCRC #12	Community engagement/outreach contracts
Health	Discretionary spending critical supplies \$71		5/6/2020 LCRC #8	1,319,100 Gloves
Administration	Storage Facility	\$6,900	5/7/2020 LCRC #13	Secure and manage storage facility
Health	Discretionary spending critical supplies \$2.031 M		5/7/2020 LCRC #8	125,000 Reusable, washable gowns
Health	Discretionary spending critical supplies \$3		5/7/2020 LCRC #8	20,000 Gloves
Health	Discretionary spending critical supplies \$2.098 M		5/7/2020 LCRC #8	12,000,000 Gloves
Health	Discretionary spending critical supplies \$363		5/8/2020 LCRC #8	600,600 Surgical masks
Health	Discretionary spending critical supplies \$475		5/8/2020 LCRC #8	100,000 Cloth masks
Health	Discretionary spending critical supplies \$1.066 M		5/8/2020 LCRC #8	1,005,520 N95 masks
Health	Discretionary spending critical supplies \$7		5/8/2020 LCRC #8	50,000 Gloves
Health	Gown Purchase; Flexibility for Critical Care Supplies	\$21,550	5/9/2020 LCRC #14	3,000,000 Waterproof gowns
Human Services	Isolation Space for Individuals Experiencing Homelessness	\$7,200	5/10/2020 LCRC #15	Isolation space for homelessness individuals
Health	Regional Mobile Testing Strike Teams for Priority Settings	\$3,000	5/13/2020 LCRC #16	Testing at long term care facilities
Health	Discretionary spending critical supplies \$10	75,500	5/12/2020 LCRC #8	50,000 Gloves
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Agency	Expenditure Request	Approved Spending Authority	Approval Date	Purchased
Health	Gown Purchase	\$8,500	5/13/2020 LCRC #17	520,000 Washable gowns
Health	Discretionary spending critical supplies \$1.187 M		5/14/2020 LCRC #8	10,000,000 Gloves
Health	Purchase of Testing Supplies - Swabs	\$4.359	5/14/2020 LCRC #18	1.000.000 testing swabs

Non-Legislative COVID-19 Response Commission (LCRC) Authorizations (\$1 million or under)

		Approved Spending		
Agency	Expenditure Request	Authority	Approval Date	Purchased
Health	100,000 N95 Respirators/Masks	\$402	3/30/2020	104,000 N95 Respirators/Masks
Health	100,000 Cloth masks	\$250	3/31/2020	100,000 Pleated cotton masks
Health	25,000 Face shields	\$59	3/31/2020	25,000 Face shields
Health	100,000 Cloth masks	\$250	4/1/2020	50,000 Pleated cotton masks (Revised)
Health	10,000,000 Gloves	\$600	4/1/2020	1,814,800 Gloves (Revised)
Health	1,000 Cannula	\$84	4/1/2020	1,000 Cannula
Health	125,000 Face shields	\$277	4/6/2020	125,000 Face shields
Health	2,016 Moldex Reusable Respirators (half-mask)	\$78	4/7/2020	2,016 Half-mask respirator
Health	150 Infrared thermometers	\$8	4/7/2020	
Health	1,700 Reusable, washable gowns	\$85	4/7/2020	1,700 Reusable, washable gowns
Health	1,500 Safety glasses	\$8	4/7/2020	1,500 Safety glasses
Health	1,530,000 Gloves	\$77	4/7/2020	1,530,000 Gloves (Revised)
Health	Patient and Equipment Tracking System (software)	\$64	4/8/2020	Patient & Equipment Tracking System (software)
Health	700 Water resistant, washable gowns	\$35	4/8/2020	700 Water resistant, washable gowns
Health	150,000 Surgical masks	\$150	4/9/2020	150,000 Surgical masks
Health	75,120 Bottles of hand sanitizer (Revised 4/22/2020)	\$455	4/9/2020	75,120 Bottles of hand sanitizer
Health	270,000 Surgical masks	\$266	4/9/2020	270,000 Surgical masks
Health	Alternate Care Sites medical supplies	\$180	4/9/2020	Alternate Care Sites Team medical supplies
Health	1,000,000 Simple surgical masks	\$850	4/10/2020	1,000,000 Surgical masks
Health	120,000 Shoe covers	\$17	4/10/2020	120,000 Shoe covers (60,000 pairs)
Health	1,000,000 Surgical masks	\$470	4/13/2020	1,000,000 Surgical masks
Health	500 BiPAP machines and related hoses/equipment	\$415	4/13/2020	500 BiPAP machines, hoses, and equipment
Health	1,000,000 Surgical masks	\$961	4/13/2020	1,000,000 Surgical masks
Health	120 boxes of gloves (100 per box)	\$2	4/13/2020	12,000 gloves
Health	Alt. Care Sites - Professional/Technical Contract	\$198	4/20/2020	Investigation and Planning Services
Human Services	Direct food assistance to Tribal Nations	\$386	5/2/2020	Direct food assistance to tribal nations
Health	Health Care Surge - software purchase	\$86	5/5/2020	Scheduling/workforce management software

## Purchases Summary Data through 5/14/2020

Quantity	Purchased
2,809,520	N95 Respirators/Masks
800	Ventilators
200	Airvo machines
500	BiPAP machines, hoses, and equipment
10,020,600	Surgical Masks
400,000	Cloth Masks
351,250	Face Shields
33,283,900	Gloves
5,864,152	Gowns
1,000	Cannulas
1,500	, ,
6,016	Half-mask respirator
75,120	Bottles of hand sanitizer
1,120,000	Shoe covers
1,540	•
1,950	Infrared thermometers
10,000	Poncho style gowns
680	Pulse oximeters
103	Oxygen flow regulators
1,000,000	Testing swabs
	Patient and Equipment Tracking System (software)
	Alternate Care Sites misc medical supplies
	Corrections cleaning/medical supplies
	P/T Contract Alternate Care Facility
	Lease and preparation Community Alt. Care Site Roseville
	COVID-19 rapid & widespread testing
	Community engagement/outreach contracts
	Secure and manage storage facility
	Environmental emergency response
	Scheduling/workforce management software
	Direct food assistance to tribal nations
	Isolation space for homelessness individuals
	Testing at long term care facilities

### **Appendix B:**

## **Legislative COVID-19 Response Commission Recommendations**

The Commissioner of Management and Budget submitted eight expenditure requests to the Legislative COVID-19 Response Commission for review and recommendation between April 30, 2020 and May 14, 2020. Upon submission of an expenditure request, the Commission has 24 hours to review and provide a positive recommendation, a negative recommendation, or no recommendation.

If a majority of commission members from the senate and a majority of commission members from the house of representatives provide a negative recommendation on a proposed expenditure, the commissioner is prohibited from expending the money. If a majority of the commission members from the senate or a majority of the commission members from the house of representatives make a positive recommendation or no recommendation, the commissioner may expend the money.

LCRC REQUEST #	Sen. Miller	Speaker Hortman	Sen. Gazelka	Rep. Winkler	Sen. Kent	Rep. Daudt	Sen. Rosen	Rep. Carlson	Sen. Cohen	Rep. Garofalo
11. Animal Carcass Disposal										
12. Community Engagement										
13. Storage Facility										
14. Gown Purchase; Flexibility										
15. Isolation Space										
16. Regional Mobile Testing										
17. Washable Gowns Purchase										
18. Testing Supplies – Swabs										
		Positive Recommend	dation		Negative Recomme			No Recommer	dation	

## **Appendix C:**

## **Legislative COVID-19 Response Commission Request Forms**

- LCRC-11 Animal Carcass Disposal
  - LCRC-11 Email providing supplementary information from Minnesota Department of Agriculture Commissioner Thom Petersen
- LCRC-12 Community Engagement and Outreach
- LCRC-13 Storage Facility
  - LCRC-13 Email providing supplementary information from Minnesota Department of Administration Alice Roberts-Davis
- LCRC-14 Gown Purchase; Flexibility for Critical Care Supplies
- LCRC-15 Isolation Space for Individuals Experiencing Homelessness
- LCRC-16 Regional Mobile Testing Teams: Long Term Care
- LCRC-17 Washable Gowns Purchase
- LCRC-18 Purchase of Testing Supplies Swabs



Please complete this form in accordance with the instructions

Agency/Program/Activity:  Minnesota Department of Agriculture, Office of Emergency Preparedness and Response							
Title of Request: Animal Carcass Disposal							
Date: 4/29/2020	Amount Requested: \$\frac{\$10,952,000}{}{}						
Request Funding Source:  Health Care Response Fund							
Brief Summary of Request: Summary must be complete on this page wit	th supporting information attached						
	s both in MN and SD because of COVID19, we are seeing a large volume of and disposed of. This creates a human and environmental health hazard that and their communities.						
of Morris, Minnesota for emergency service	MDA) has a contract with West Central Environmental Consultants (WCEC) out es and they have been a reliable partner in past events such as the 2015 I). We asked them to develop a cost estimate for a regional depopulation and pers below.						
County and nearby counties to discuss any a	near the JBS plant in Worthington and are currently in contact with Nobles available land they may have for composting. Once we have this site up and lites to help with other area farmers. The breakdown of costs is for ONE lation costs.						
sources, carcass staging, and site security. 1 between the rows. The acres for composting Daily Breakdown	need 20 acres to allow for staging – that includes traffic/equipment, carbon 180 acres will be needed for compost rows and does not include spacing g could be split amongst sites, if necessary.						
167 pigs per hour 16 hour days = 2,672 pigs per day							
40 semis of wood chips per day @\$1,250	\$50,000						
500 gallons of fuel/maintenance	\$1,500						
<ul><li>2 site managers</li><li>2 loaders and 2 skids with operators</li></ul>	\$2,500 `\$15,000						
Roto chopper with operator	\$5,000						
Total per day	\$74,000						
W/CEC actimates this will take 27 days to con	mplete disposal of this volume of pigs. The total for ONE regional site would						

WCEC estimates this will take 37 days to complete disposal of this volume of pigs. The total for ONE regional site would come to \$2,738,000. We'd like to have enough for the potential of multiple Roto Choppers at some sites and do at least four sites around the state. The time lines and volumes will vary and there will likely be the need for help with depopulation and for other species, particularly turkeys. Our ask is for \$10,952,000 out of the COVID-19 relief fund to help with this effort.

—A052B927 <b>DEFJärtment Head Signature</b>	Date
andrea Vaubel	5/1/2020

From: Frans, Myron (MMB)

To: <u>Kurt Daudt</u>; <u>Pat Garofalo (rep.pat.garofalo@house.mn)</u>

Cc: Melissa Hortman; Sen. Jeremy Miller; Paul Gazelka (sen.paul.gazelka@senate.mn); Ryan Winkler; Susan Kent

(sen.susan.kent@senate.mn); Lyndon Carlson; sen.julie.rosen@senate.mn; Pat Garofalo; Richard Cohen - Senate (senrichardcohen64@gmail.com); Sean Rahn; Craig Sondag; Susan Closmore; John Pollard; Eric Nauman; Bill Marx; Nancy Conley; Jessica Young; Meagan Rice; Laura Sparkman; Nicole Kaplan; Ruth Gredvig; Paul Cumings; Kalyn Schroeder; Rachel Bakke; Malcolm, Jan (MDH); Schmitter, Chris L (GOV); Nguyen, Hue (GOV); Hormann, Madeline L (GOV); Hedin, Emmet (GOV); Reitan, Britta (MMB); Vogt, Angela (MMB); Conboy, Marianne (MMB); Washington, Dominick (MMB); Connor, Elizabeth (MMB); Fahnhorst, Sean (MMB); Petersen, Thom (MDA);

Vaubel, Andrea (MDA)

Subject: RE: FOR IMMEDIATE REVIEW | Request to Legislative COVID-19 Response Commission

**Date:** Monday, May 04, 2020 2:51:54 PM

Attachments: <u>image004.png</u>

image005.png image006.png

Rep. Daudt -

I'd like to respond to some of the concerns you outlined to Commissioner Frans earlier today.

As you can imagine, this situation is like nothing we've seen before. The last thing we want to do is euthanize and dispose of hundreds of thousands of healthy market pigs. Our systems were not set up to deal with something of this magnitude so we had to act quickly. The state emergency response contract has been bid out (it is a 5-year contract and is actually being rewritten now for rebid sometime this summer). The two companies that can do full service work are West Central Environmental Consultants (WCEC) and Bay West. Both companies did HPAI work in 2015, but WCEC has been more interested in working with us on depop/disposal R&D issues over the years. WCEC has been on state contract for close to 20 years and is a trusted, reliable contractor that we work with quite a bit in ag chem and hazmat spills. The cost estimate we requested was based on the very limited information we had at the time and it's changing by the hour. This is our first regional site so we're learning what is needed as far as timeline and costs, otherwise we would've provided more specifics in our request.

Our initial recommendation for this proposal was for legislative action with a hearing. On Sunday morning, because of the need to dispose of pigs immediately, we proposed asking for the first \$2.7M – however, Senator Rosen strongly urged us to move forward with the entire package to ensure there was no delay on future site needs, and this was concurred on by Chair Carlson.

It seems a lot of your concerns center around what the site managers will be paid – as mentioned in my call to you yesterday, as far as hourly rate goes, what's built into that estimate is insurance, training, and overhead fees along with the regular state contractor salary rates. I think that's fairly standard. If I wanted to hire a handyman through Ace Hardware, they charge me \$100/hour. That doesn't mean the handyman is getting all that in cash.

I'd be happy to talk with you again about any of your questions and am grateful for the legislature's support of this urgent need.

Thom Petersen Commissioner



Agency/Program/Activity:	Request Form
Minnesota Department of Health/Health Protection/Infectious Disease	ase
Title of Request: Community Engagement and Outreach	
Date: 05/04/2020	Amount Requested: \$ 2,250,000
Health Care Response Fund Request (Laws 2020, Ch. 70, Art. 2)	COVID-19 Minnesota Fund Request (Laws 2020, Ch. 71, Art. 1, Sec. 7)

### **Brief Summary of Request:**

Summary must be complete on this page with supporting information attached.

The Minnesota Department of Health ("State") requests \$2.25 million to administer multiple contracts to community-based organizations and media vendors to ensure that all who reside in Minnesota and the 11 Tribal Nations that share its geography--including residents from communities of color, American Indian residents, LGBTQ communities and residents with limited English proficiency--have the opportunity to be 1) connected to resources and services addressing their COVID-19-related needs, and 2) fully informed with culturally relevant, linguistically appropriate, accurate, and timely messages related to COVID-19. With each week that passes, the incidence of the virus and the rate of hospitalization becomes more disproportionate. We need to enlist the support of community organizations and media vendors led by and serving communities of color and American Indians, given that these communities are often not reached by mainstream media or organizations and also experience significant disparities. Particularly given the anticipated increase in testing capacity, it will be critical to have diverse media vendors and community-led organizations helping to provide outreach and engagement to communities of color and American Indians and LGBTQ communities in MN.

MDH will issue a 'Request for Proposals' (RFP) to award \$1.5 million in multiple community engagement contracts for culturally relevant, linguistically appropriate, timely community engagement activities to aid the state in learning about community needs related to COVID-19, connecting communities to existing resources and services, and developing or adapting resources and services as needed. MDH will also issue an RFP to award \$750,000 for multiple media contracts for media services to aid the state in getting culturally relevant, linguistically appropriate, accurate, and timely messages related to COVID-19 to communities of color and American Indian communities and LGBTQ communities in Minnesota. Media services may include formats such as online, radio, print, social media, and television.

The primary audience(s) for both community-based organizations and media vendors include one or more of the following populations: African American, African immigrant, Latinx, Asian American, American Indian Minnesotans and LGBTQ communities in Minnesota.

Margaret Kelly

Digitally signed by Margaret Kelly Date: 2020.05.04 09:11:24 -05'00'

05/04/2020

**Department Head Signature** 

Date



Please complete this form in accordance with the instructions

Agency/Program, Minnesota Depar	<b>/Activity:</b> tment of Administration		
Title of Request:	Storage Facility		
Date: 5/6/2020		Amount Requested:	\$ 6,900,000
Request Funding	Source: ealth Care Response Fund Request	(	COVID-19 Minnesota Fund Request

### **Brief Summary of Request:**

Summary must be complete on this page with supporting information attached.

REQUEST: The Minnesota Department of Administration requests \$6.9 million to secure and manage a facility that can accommodate a surge in demand for the timely, dignified, and temporary storage of human remains. It is anticipated that this request will be reimbursable at 75% through the Federal Emergency Management Agency (FEMA).

COVID-19 is driving an increase in the number and rate of deaths in Minnesota. Based on modeling by the University of Minnesota and the Minnesota Department of Health (MDH), this pandemic could add up to 1,000 deaths per week during the peak with half of all projected deaths occurring within a four to five-week period.

The State Emergency Operation Center's (SEOC's) Fatality Management Branch includes staff from the Minnesota Department of Health, Minnesota Department of Human Services, Minnesota Funeral Directors Association, Ramsey and Hennepin County Medical Examiners, and Hennepin and Ramsey County Emergency Management. They surveyed funeral homes, medical examiner offices and hospitals across the state and determined surge capacity in the metro area would accommodate only 1,262 bodies. State-wide surge capacity would accommodate only 2,006 bodies. This survey will be conducted daily to determine what portion of the capacity is being used. Of those responding to the daily survey, 50% of available storage is already being used.

Existing state and federal mass fatality assets are ineffective in a pandemic situation. Those resources are focused on forensic analysis and identification of human remains, not providing storage. The Fatality Management Branch recommends consolidation at the state level because it achieves efficiencies otherwise unattainable by individual hospitals, medical examiners, or funeral homes. They also recommend purchasing additional capacity that can serve as a resource statewide and siting the facility in the metro area.

Minnesota has identified a facility that can accommodate anticipated needs. A 71,000 square foot facility on 5 acres in the metro area has been identified. It would add capacity for up to 5,100 bodies. The purchase price is estimated to be \$5.475 million. With \$1 million in projected building operating costs, \$425,000 of improvements, maintenance and other costs, the total need for resources is \$6.9 million. The Department of Administration will obtain an appraisal of the property and negotiate the purchase. The actual costs may vary from this estimate. Staffing and any specialty equipment costs are not included in this estimate.

Alice Roberts-Davis Digitally signed by Alice Roberts-Davis Date: 2020.05.06 17:45:22 -05'00'	5/6/2020
Department Head Signature	Date

From: Roberts-Davis, Alice (ADM) <alice.roberts-davis@state.mn.us>

Sent: Thursday, May 7, 2020 5:48 PM

To: Frans, Myron (MMB) < <a href="mailto:myron.frans@state.mn.us">myron.frans@state.mn.us</a> Cc: Waslaski, Wayne (ADM) < <a href="mailto:wayne.waslaski@state.mn.us">wayne.waslaski@state.mn.us</a>

Subject: Storage Facility - Rep. Daudt

Hello Commissioner Frans -

I just spoke with Representative Daudt with regard to the purchase of the cold storage facility proposed earlier today. He previously indicated that he was not supportive because he was unsure of what the building will be used for after the need for cold storage. We discussed the following facts:

- Leasing a building for this purpose is not feasible as landlords realize that after this particular use the building cannot be sold for its intended use as grocery storage/distribution. Landlords are not willing to risk the inability to sell or lease the space after our short term need.
- There are very few similarly suited buildings on the market at this time.
- The building may be used continuously for storage after this short term need. There is always a need for storage space.
- This building may be used for cold storage for the long term. In the event of other disasters or pandemics, this
  will be an amenity for the state.
- The building may be disposed of by the state if it is determined to be surplus property. We are not as concerned with the limitations of resale than the current owner who wants to preserve the right to sell it for grocery distribution.
- A portion of the building may be reimbursable by FEMA.

After our conversation, Representative Daudt indicated that he intends to change his vote to Yes.

Thanks! Alice





Alice Roberts-Davis | Commissioner 50 Sherburne Avenue, Suite 200 Saint Paul, MN 55155 651.201.2601 (office) 612.327.2729 (cell)



Please complete this form in accordance with the instructions

Agency/Program  Minnesota Depar	<b>/Activity:</b> tment of Health/Community Health,	Office of Emergency F	Preparedness
Title of Request:	Gown Purchase; Flexibility for Critic	al Care Supplies	
Date: 5/9/2020		Amount Requested:	\$ 21,550,000
Request Funding	Source: lealth Care Response Fund Request	(	COVID-19 Minnesota Fund Request

### **Brief Summary of Request:**

Form: 7265-01 (March 2020)

Summary must be complete on this page with supporting information attached.

REQUEST: The Minnesota Department of Health, working with the Critical Care Supply workgroup, requests \$21.55 million from the COVID-19 Minnesota fund to purchase an estimated 3,000,000 gowns. If we are not able to secure the quantity of gowns anticipated, we would use this funding for flexible critical care supply purchases described in Legislative COVID-19 Response Commission (LCRC) Action Order #8.

Gowns are a basic form of personal protective equipment (PPE) and are being used by healthcare professionals as protective equipment to contain the source of the Coronavirus. The Critical Care Supply workgroup forecasts that Minnesota's hospitals and long term care facilities will need about 4,900,000 additional gowns through August 2020. The Department of Administration has sourced an estimated 3,000,000 gowns, which, if secured, would bring the estimated need through August down to about 1,900,000.

These gowns need to be purchased today, 5/9/2020. If we are not able to secure the gowns today, we would continue to pursue other purchasing options for gowns as new sources become available. We are also requesting flexibility with these funds, similar to the pre-authorization flexibility in LCRC Order #8, for purchasing other needed critical care supplies if we are not able to secure the quantity of gowns identified in this request.

Margaret Kelly	Digitally signed by Margaret Kelly Date: 2020.05.09 16:44:49 -05'00'	5/9/2020
Denartmer	nt Head Signature	Date



Please complete this form in accordance with the instructions

Agency/Program	/Activity:	
Department of H	uman Services	
Title of Request:	Isolation Space for Individuals Experie	encing Homelessness
Date: 5/8/2020		Amount Requested: \$7,200,000
Request Funding	Source: lealth Care Response Fund Request	COVID-19 Minnesota Fund Request

### **Brief Summary of Request:**

Summary must be complete on this page with supporting information attached.

Recommendation: Appropriate \$7.2 million to the Department of Human Services to establish isolation spaces for people experiencing homelessness who are symptomatic or COVID-19 positive. County and Tribal governments would be eligible if (a) they either have established safe spaces for everyone experiencing homelessness who are at highest risk for severe COVID-19 illness, or 100 or more safe spaces, whichever is fewer, and (b) have at least one test-confirmed COVID-19 case among those experiencing homelessness. Funds will be used to cover leasing or rental of appropriate spaces, food, staffing including mobile behavioral health teams, and necessary personal protective equipment (PPE). DHS's distribution and management of these funds will be designed to maximize FEMA reimbursement for eligible expenses. The proposal includes two staff who will manage the distribution of these funds and the process for requesting FEMA reimbursement on eligible costs.

Rationale: Isolation spaces are needed for people experiencing homelessness who are symptomatic or confirmed to be infected with COVID-19, who do not require hospitalization. Since people experiencing homelessness cannot isolate at home during their illness, such spaces are critical to minimize transmission and address the health needs of people who become ill. Lack of access to appropriate isolation space undermines major state efforts to test and trace COVID-19 positive individuals. The Legislature recently appropriated \$15.206 million for the purpose of providing additional shelter options that promote health and safety. All of those funds have been expended or encumbered.

The total need for isolation space in Minnesota exceeds \$7.2 million. However, this proposal would support an initial effort to build capacity in targeted regions of the state and inform future isolation strategies. This proposal would fund the creation of an average of 730 isolation spaces for 45 days. Assuming an average isolation stay of 14 days, that translates to approximately 2,300 individuals served. Actual use of these funds is expected to ramp up as the number of COVID-19 cases among people experiencing homelessness grows and may be used in a variety of settings. The estimated costs per space are based on actual expenditures incurred to date by local governments.

While communities have created isolation spaces, some have expressed concerned about their resources and capacity to fully meet the demand needed. Many costs are anticipated to be eligible for reimbursement by FEMA at 75% federal share. However, local governments lack the resources to provide upfront funding for the initiative necessary to draw down federal reimbursement. Ensuring people who are experiencing homelessness can safely isolate has significant equity impacts, as there are significant racial and ethnic disparities in those who experience homelessness.

Departme	nt Head Signature	Date
Jodi Harpstead	Digitally signed by Jodi Harpstead Date: 2020.05.08 18:12:37 -05'00'	5/8/2020



Please complete this form in accordance with the instructions

Agency/Program	/Activity:		
MN Department	of Health		
Title of Request:	Regional Mobile Testing Strike Tear	ms for Priority Settings	
Date: 5/13/2020		Amount Requested: \$3,000,000	
Request Funding	Source: lealth Care Response Fund Request	COVID-19 Minnesota Fund Request	

### **Brief Summary of Request:**

Summary must be complete on this page with supporting information attached.

The Minnesota Department of Health is requesting \$3 million to implement regional mobile testing teams for priority COVID-19 testing settings in Long Term Care (LTC). The LTC Battle Plan that Governor Walz announced on May 7th placed a clear and urgent priority on expanded testing in LTC facilities, based on newly-released guidance for mass testing of all residents and staff within facilities that have a positive case or multiple symptomatic residents. Expanded testing in congregate facilities can present multiple challenges, as employees that test positive must be removed from duties, and many residents may require isolation and medical follow up.

Testing capacity is now becoming available for congregate care testing, with the expansion of lab capacity statewide as part of the MN Testing Plan. However, personnel for swabbing congregate facility residents and staff are not widely available in each region or through local public health, which means additional supports will be needed in order to effectively implement the testing components of the LTC Battle Plan. Mobile teams would be supplied with staff, supplies and vehicles to perform the following functions:

- Sample acquisition for testing (on-site swabbing of residents/staff based on clinical criteria)
- Personal Protective Equipment (PPE) education and mentoring for LTC facilities to avoid additional burden on the healthcare system
- On-call emergency staffing for situations where staff in a LTC facility test positive and need to be immediately isolated

Healthcare systems in each region of the state would be contracted for an initial 6-month period to provide the services, with more systems added as needed based on regional demand. Mobile testing teams would include 1-3 FTEs to do swabbing and report positive tests back to the facility or individual, and to provide emergency staffing support in cases where a staff member is identified as positive during or just before a shift. Contracted facilities could bill for up to 2 additional FTEs depending on regional needs for sample collection. The first round of contracts would cover up to 10 FTEs (usually RNs or equivalent) in the metro area and 4 FTEs in each of the other 7 regions.

While the most urgent need is in LTC, the Governor and MDH have also placed a priority on enhanced testing in other vulnerable congregate populations as well. An additional request for will be forthcoming to support clinical consultation / service provision to at-risk populations that are not currently affiliated with a healthcare system or provider or whose needs are otherwise not addressed. For the next request, a particular emphasis will be placed on the homeless population to assure clinical support is provided as required before, during, and after any testing strategies for this population.

Department Head Signature	Date
Margaret Kelly  Date: 2020.05.13 08:09:07 -05'00'	5/13/2020



Please complete this form in accordance with the instructions

Agency/Program, Minnesota Depar	<b>/Activity:</b> tment of Health/Community Health <sub>/</sub>	Office of Emergency F	Preparedness
Title of Request:	Gown Purchase		
Date: 5/13/2020		Amount Requested:	\$ 8,500,000
Request Funding	Source: ealth Care Response Fund Request	(	COVID-19 Minnesota Fund Request

### **Brief Summary of Request:**

Summary must be complete on this page with supporting information attached.

REQUEST: The Minnesota Department of Health, working with the Critical Care Supply workgroup, requests \$8.5 million from the COVID-19 Minnesota fund to purchase an estimated 520,000 washable gowns.

Gowns are a basic form of personal protective equipment (PPE) and are being used by healthcare professionals as protective equipment to contain the source of the Coronavirus. Following the successful purchase of 3,000,000 gowns from LCRC Action Order #14, the estimated additional need for gowns through August 2020 was brought down to about 1,900,000. The Critical Care Supply workgroup updated this forecast and now estimates that Minnesota's hospitals and long term care facilities will need about 2,000,000 additional gowns through August 2020.

The Department of Administration has sourced an additional 520,000 washable gowns. This order would fulfill projected needs for washable gowns through August 2020. The workgroup will continue to source for the remaining projected need of about 1,480,000 disposable gowns.

These gowns need to be purchased as soon as possible to secure the order.

This is a new, standalone Legislative COVID-19 Response Commission (LCRC) funding request for \$8.5 million. The remaining balance of flexible critical care supply purchases in LCRC Action Order #8 is not enough for this purchase (\$6.637 million remaining as of 5/13/2020) and will continue to be used for other supply needs.

Department Head Signature	Date
Margaret Kelly  Digitally signed by Margaret Kelly Date: 2020.05.13 14:03:56 -05'00'	5/13/2020



Please complete this form in accordance with the instructions

Agency/Program/Activity:				
Department of Health				
Title of Request:	Purchase of Testing Supplies - Swabs			
Date: 5/14/2020		Amount Requested: \$4	1,359,230	
Request Funding	Source: ealth Care Response Fund Request	•	COVID-19 Minnesota Fund Request	

### **Brief Summary of Request:**

This request is to purchase nasopharyngeal 3D printed swabs, which are a key component of the testing supplies needed to collect specimens from potentially COVID-19 infected persons. This request is to purchase up to 1,000,000 swabs. The swabs will be used by statewide reference laboratories and collection sites specified on the MDH website. In addition, they may be used in collections at long term care facilities or other mobile testing sites. This testing component is difficult to obtain in the marketplace and so it is important to act quickly to purchase these amounts when available or they are reallocated to other states.

Margaret Kelly	Digitally signed by Margaret Kelly Date: 2020.05.14 12:54:08 -05'00'

5/14/2020 Date

**Department Head Signature**