

## Department of Veterans Affairs

### American Rescue Plan, COVID Supplemental Requirements

as of 2/3/2021

\$ in thousands

Appropriation/Administration	FY 2021-2022	Notes
		Estimated cost of Veteran Care (in-house and community) above the base budget. Includes impacts of delays in care, more expensive care being needed, and greater reliance on VA due to economic impacts from the pandemic. Also includes the sustainment of CARES-supported staffing and service level expansions, including Suicide Prevention, State Veteran Home operations, and Women's Health
Veteran Care Costs due to COVID	\$ 8,900,000	
Homelessness	\$ 335,000	Sustain CARES-funded enhancements through FY 2022
Telehealth	\$ 100,000	Sustain CARES-funded equipment provided to Veterans in FY 2020 and FY 2021 with potential expansion
Readiness (requires OIT funding)	\$ 750,000	Improve readiness for supply distribution and emergency management equipment
Legislation	\$ 400,000	Support implementation of new legislation (ex. Women's Health, Mental Health, and State Veterans Homes)
DMLSS Acceleration (requires OIT funding)	\$ 150,000	Improve Supply Chain tracking in coordination with readiness preparations
Veterans Contact / Care (requires OIT Funding)	\$ 800,000	Enhance Clinical Hubs, Phone System Standardization, Contact Centers/Phone Hubs
Innovation (requires OIT Funding)	\$ 218,000	Enterprise wide innovation to include an expansion of 3D Printing capacity for PPE internal manufacturing
Equipment	\$ 750,000	Standardize High Cost High Tech equipment and updating equipment across the Administration - Allows for less training requirements as staff coordinate at alternate sites
Pandemic Data Tracking / Collection	\$ 50,000	Supports additional contracts for the analysis and data collection of Pandemic-related data for National tracking and planning
NRM (VHA facilities, 5 year funds)	\$ 2,250,000	COVID related projects updating VAMCs to better support supply chain improvements, patient flow, and pandemic readiness.
<b>VHA Total</b>	<b>\$ 14,703,000</b>	
<b>Research</b>	<b>\$ 25,000</b>	Covid and other research priorities
<b>OIT</b>	<b>\$ 1,700,000</b>	Sustain telework enhancements, accelerate Infrastructure readiness. Details forthcoming
Minor (VHA facilities, No year funds)	\$ 250,000	Accounts for footprint changes in regards to COVID related updates to medical centers
Major Construction (No year funds)	\$ 50,000	Accounts for footprint changes in regards to COVID related updates to medical centers
<b>Total Facilities</b>	<b>\$ 300,000</b>	
		reduce backlog generated by covid delays, help VBA transition to expanded telework, includes +Increased scanning efforts at the NPRC in St. Louis and College Park as a result of NARA facilities closings +overtime to address the C&P and Appeals backlog +Improvements to hearing scheduling process
<b>Veterans Benefits Administration</b>	<b>\$ 262,000</b>	+CRM/UDO Enhancements: Expanded functionality within the system to support outreach efforts, consolidated contact center activities, and improved efficiencies to increase capacity.
<b>Board of Veterans' Appeals (Board)</b>	<b>\$ 10,000</b>	to expand telehearing capacity and reduce appeals backlog
<b>Grand Total</b>	<b>\$ 17,000,000</b>	

**Assumptions**

+Covid supp will pass in March 2021

+Facilities funds will be no-year funding (VHA Medical facilities will be five year funds)

+Operational funds will be available FY 2021-2022 or 2023

+OMB funds FY 2022 at close to VA request level