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March 1, 2024

Senator Jonathan Dismang, Co-Chair Representative Frances Cavenaugh, Co-Chair Performance Evaluation & Expenditure Review Committee Arkansas Legislative Council State Capitol Building Little Rock, AR 72201

RE: FY 24 American Rescue Plan Act Request

### Dear Co-Chairs:

Pursuant to Section 36 (01) of Act 796 of 2023, I am forwarding the attached American Rescue Plan Act request(s) that have received my approval as Chief Fiscal Officer of the State.

- 1. Department of Commerce Workforce Services Division Unemployment Insurance \$1,739,000
- 2. Department of Health WIC Electronic Benefits Transfer Offline to Online \$8,182,041
- Department of Health Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases – Reallocation of Previously Approved Request
- Department of Health Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases – Reallocation of Previously Approved Request
- Department of Health Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases – Return of Overpayment to Centers for Disease Control \$540
- 6. Department of Health Epidemiology and Laboratory Capacity for Infectious Disease \$665,181
- 7. Department of Health Strengthening Infrastructure, Workforce and Data Processes for the Public Health System in Arkansas Reallocation of Previously Approved Request \$0
- 8. Department of Health Strengthening Infrastructure, Workforce and Data Processes \$978,329
- Department of Health STD Prevention Reallocation of Previously
   Approved Request



OFFICE OF THE SECRETARY

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Sincerely,

James L. Hudson

Secretary

Attachment(s)



				20110143	O OI ACI	755 01 2025				
Agency: De	partm	ent of Co	mmerce	- Division of V	Vorkforce	Services	Business Area Code: 0810			
Program Title: Ur	nempl	oyment	Insuran	се						
Granting Organiza	ation:	United S	States D	Department	of Labor		CFDA #: 17.225			
Effective Date of					7/1/202		Ending: 6/3	0/2024		
							thorough information):	41 '		
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Professional Fees									100,000	
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#### ARKANSAS DEPARTMENT OF COMMERCE – DIVISION OF WORKFORCE SERVICES

The Arkansas Unemployment Insurance (UI) program has made great strides to reduce the improper payment rate via new tools and new approaches to using existing tools. Arkansas' fraud risk management is a team effort that includes but is not limited to UI Administration and Claims Processing staff, Benefits and Contributions IT staff running data analytics, and Internal Audit and fraud prevention staff working with law enforcement and the Office of the Inspector General.

The use of funds made available via the Unemployment Insurance Program Letter (UIPL) 11-23, specifically the integrity grant in the amount of \$1,739,000.00 that was awarded to Arkansas, will go a long way to strengthen the UI system.

ADWS takes possible fraud identification seriously and uses data analytics on demographic information, including geographic information on each claim, as well as the Integrity Data Hub, to pull information reported by other states to recognize patterns used by fraudsters to obtain benefits.

The UI program implemented staff training designed specifically on identifying potential fraudulent claims and ID verification. These are completed in sprints and refreshed every six months.

#### **ADWS Current Utilization:**

- 1. Social Security crossmatch during the application process verifies:
  - a. Legal Name
  - b. Date of Birth
  - c. SSN
- 2. ADWS piloted and continues to utilize United States Department of Labor (USDOL) sponsored solutions Login.gov and a proofing program with the United States Postal Service (USPS) for ID verifications in addition to verifying IDs in person at local Arkansas Workforce Centers. Claimants filing their claim using the EZARC system (initial online claims system) are offered the three (3) options mentioned below for online ID verification. This allows compliance with UIPL 16-20 by not disenfranchising claimants who may have issues with the automated options for ID verification.
  - a. <u>Login.gov</u>: Arkansas participated in the Claimant Experience Pilot and was the first state to partner with USDOL to implement this version of ID verification. Login.gov increases equitable access to benefits and services while reducing fraud and protecting taxpayer dollars. Login.gov has helped over 70 million users access government benefits and services faster, easier, and more securely. This is done at the time of online application and does not require additional offline steps to verify identity. It is also the most convenient option for claimants.
  - b. <u>United States Postal Service (USPS):</u> Arkansas was the first state to participate in the "inperson proofing" pilot program launched through USDOL's partnership with USPS. This inperson option allows claimants to verify their identity by visiting a local retail post office. It The process takes approximately ninety (90) seconds to complete the process and obtain the barcode needed to take to the retail location with a copy of their government-issued photo ID. Once verified, proof of identity is reported back to the state, where the UI claims can be finalized with the assurance that the claim comes from a genuine resident in need.
  - c. <u>In Person Verification at Local Arkansas Workforce Centers:</u> ADWS continues to believe inperson ID verification is the most secure method, and functions as a "safety net" for those claimants that may have limited technical ability or issues getting though the first two more convenient options.

- 3. Systematic Alien Verification for Entitlement (SAVE) SAVE verifications are executed after the UI application is completed by the non-citizen claimants and while staff are processing the claim.
- 4. Department of Corrections and Department of Community Corrections Inmate roster crossmatches run each week against UI applications and weekly certifications.
- 5. Interstate Connections Network (ICON) All claims are checked though State Identification Subsystem (SIDI) and the Interstate Benefits Inquiry (IBIQ), to ensure there are no claims in other states for the same claim period or overpayments to be collected in other states utilizing the benefits offset process.
- 6. Internet Protocol (IP) Addresses are monitored, and multiple claims submitted by the same IP address (other than our workforce centers who are whitelisted) are monitored.
- 7. Data Analytics are used and no more than four (4) claims can have the same first line address, bank routing information, or e-mail address.
- 8. ADWS currently uses Geofencing to exclude foreign IP addresses.
- 9. Receives and uses examples from the Fraud Alert System as teaching tools.
- 10. ADWS currently uses the National Integrity Academy and encourages staff to complete modules in their career tract and to learn more about other positions and sections.
- 11. The Internal Audit section is currently utilizing the additional funds made available for researching federal program fraud and actively working with OIG on prosecutions.
- 12. ADWS utilizes Integrity Data Hub for:
  - a. Suspicious Actor Repository (SAR)
  - b. Multi-State Crossmatch (MSCM)
  - c. Identity Verification (IDV)
  - d. Bank Account Verification (BAV)
  - e. Fraud Alerts
  - f. Foreign Internet Protocol (IP) Address Detection
  - g. Suspicious Email Domains

ADWS has a two-pronged approach to increase the integrity of the UI system, while ensuring equitable access to Unemployment benefits for those deserving claimants.

### **Integrity Data Hub utilization:**

The Integrity Data Hub (IDH) is one tool ADWS is interested in fully utilizing, by leveraging the available funds to identify potential fraudulent claims earlier in the claims filing process. Currently ADWS utilizes the IDH by submitting a weekly paid claims file and staff working the resulting returns. This process was implemented during the pandemic when IT resources were actively attempting to locate and isolate fraud claims as they were already in pay status in the various pandemic related programs as well as traditional Unemployment insurance. This was an effective use as when we connected to the IDH most claims were already in pay status. This is a retroactive activity instead of proactive, which is not as efficient and is staff time heavy.

While processing and submitting the paid file was a step forward for ADWS, additional steps are being taken to utilize all available tools to their maximum potential and are planning on moving the IDH interaction during the claims filing processes, as opposed to waiting until the claim has been paid. This will allow timelier action and reduce the improper payment rate.

All claims, once submitted via EZARC, are sent to the INET system (used by UI staff to handle all aspects of the UI claim.) All claims are housed in a repository referred to as the "error que" which is utilized by staff to identify the most common risk factors for the UI claim:

- Employer not Found (to identify correct last employers)
- Out of state employer (to verify against the wage file and ICON systems)
- Non-citizen claimant
- Identification required (Not yet provided ID verification)
- Identification received with assurance level 2 (met all requirements for Online verification, must be visually checked by staff)
- O Stop Pay (Claim has a stop pay message with on the current of on a former UI claim)
- Severance or retirement pay (indicated additional pay that must be sent for a decision)
- Insufficient wages (Does not currently monetarily qualify, may need a misclassification of wages investigation)

Each common risk is listed as a link in the system to allow staff to quickly navigate to that information so additional actions will be completed. ADWS would like to add the score returned from the Integrity Data Hub to this same section of the system. In step with the current Login.gov and USPS ID verification system, where an IP call is made to the DOL site to fetch information if the requirements have been met, we would like to add the same process for IDH. Staff could then utilize the score assigned based on a custom search created by ADWS. Once staff click on the link created with the score, additional information would be accessible from the IDH query that would allow staff to verify the potential issue with the claim and act accordingly. For example, this may be:

- 1. Issuing a requirement to contact the service center and provide additional information.
- 2. Meet additional requirements for ID verification.
- 3. Provide additional supporting documentation.

We feel this will assist in further reducing the improper payment rate as we would be able to quickly identify a potential issue with the claim before it is in pay status since the JAVA rule requires states to issue a decision or keep the claim in pay status, which would continue to increase the potential overpayment to the claimant.

ADWS currently offers the option to set up Direct Deposit within the ARKNET (weekly certification system). This can only be updated by the claimant after the initial application has been processed by ADWS staff as described above. We would like to add the Direct Deposit option and capability to enter the bank account information as part of the EZARC (initial application) system so that data would be able to be included in the initial data transfer to the IDH to return the score before the claim is processed and potentially put in pay status.

This will require updates to EZARC, and INET systems. This will require the internal IT staff, UI program staff, and contracted staff via the Division of Information Systems (DIS) for designing, testing, and implementation in the backend database and front-end staff and public facing interfaces.

#### **Budget:** Integrity Data Hub Integration

Salaries	\$ 164,325.00
Personal Matching	\$ 62,443.50
Total Salaries / Matching	\$ 226,768.50
Indirect Costs	\$ 90,382.08
Operating Expense / Supplies	\$ 4,980.42
Total Operating Expense	\$ 95,362.50

Vendor / Contractual Costs \*

<u>Total Costs</u> <u>\$ 377,901.00</u>

#### Wage earnings Investigations:

As of the most recent information available, April 2022 through March 2023, Arkansas has an improper payment rate of 6.176%, in the top ten areas for lowest improper payment rates. While this is an improvement and moving in the right direction, we are continuing to strive for an even lower improper payment rate. Per this period, 25.111% of Arkansas overpayments are related to wage earnings issues.

55,770.00

Wage earnings investigations are backward looking based on the results of a crossmatch with the wage information provided by employers. Audit forms are sent to the employers that are shown to have paid wages to claimants in the same quarter in which the claimant received benefits. As Arkansas does not currently require electronic filing for employers, all wage reports are not fully processed until eight (8) weeks after the due date of the report. As the wage cross match is ran once per quarter in our current systems, considering the thirteen (13) weeks of the quarter, four (4) weeks until the report is due, eight (8) weeks to process those reports, becomes a possible total of twenty-five (25) weeks after the wages were earned, before they are identified by ADWS for action.

To correct this issue ADWS is proposing to use the available funds to modernize the wage crossmatch system inside the existing contributions system and encourage employer active participation as soon as possible by utilizing the forward dating of payments due with the quarterly reports. This has a great expectation to identify wage earnings sooner, which will decrease the improper payment rate.

Currently ADWS uses the BARTS (Benefits Audit Reporting and Tracking System) to detect and address potential earnings issues, on claims, using external data from the following sources and running cross matches with the following data:

- Tax21 existing wage records
- State New Hire Registry
- National New Hire Registry

Manual investigations can also be created from tips and leads from the public or staff recognizing common issues with claims, or the claimant self-reporting.

To reduce the number of weeks for the lookback and crossmatch activity, we will add ability to run the crossmatches daily as wages are added to the system by employers and identify all weeks requested by the claimant. This information would then be used to create a data form (either answered electronically or via paper by the employer.) An updated public facing data entry page for employers inside the Tax21 (contributions system) menu, to enter in the number of hours worked and the earnings for each of the weeks the claimant claimed UI benefits.

For those employers that do not utilize the electronic format for answering the wage audit request, an employee facing data entry screen is needed to be used by staff to enter information provided by employers on paper forms. We would then leverage the existing Adjudication system in INET for decisions and add the ability to Tax21 to send a file to the Open Pool for decisions to be made and imaging to both INET and Tax21.

This data would then be saved in a table and business rules applied to determine if a staff assisted decisions are needed or an auto decision can be issued. Business rules will be updated including but not limited to:

- Number of weeks that have a discrepancy.
- Dollar value of the discrepancy
- Number of years of education the claimant reported on their original claim.

After this system is up and running an intensive employer outreach will be held working with the State Chamber of Commerce, local area Chamber of Commerce, accounting professional organizations, human resource professional organizations, and continuing educations options for attorneys in the state. The employer handbook will also be updated to further encourage employers to fully participate in the employer interface by explaining the benefits to the employer and the employer community in general with lower rates.

This will be used to explain and encourage use of the new options for completing wage investigations, but also leverage the other employer functions that are available in the contributions systems:

- 1. Electronic Wage Reporting
- 2. New Hire Registry Requirements
- 3. Benefit notice responses
  - a. Notice to Last Employers
  - b. Notice to Base Period Employers
- 4. Charge protests
- 5. Report failure to participate in scheduled interview.
- 6. Failure to submit to or pass a pre-employment drug screen
- 7. Report a failure to appear for a scheduled job interview
- 8. Participate in the Short-Term Compensation Program.
- 9. Protest Rates

ADWS continues actively understands that the relationship with the employer community and actively engaging and educating is one of the most important validations to prevent UI fraud.

This project will require updates to the Contributions systems (Tax21) and Internal staff processing systems (INET). To complete these tasked internal IT staff, UI program staff, and contracted staff via The Division of Information Systems (DIS) to complete the designing, testing, and implementation in the backend database and front-end staff and public facing interfaces.

Travel costs will include mileage and hotel expenses when necessary for the employer outreach activities and training sessions on the system updates encouraging their active participation. Operating expenses and supplies will be used in the sessions and outreach activities and material production costs will include YouTube videos for the employer processes, and physical materials and directions to be created.

**Budget:** Wage Earnings Investigations

 Salaries
 \$ 372,355.00

 Personal Matching
 \$ 141,494.90

 Total Salaries/Matching
 \$ 513,849.90

Indirect Costs	\$	268,355.67
Operating Expense / Supplies	\$	5,010.78
Travel	\$	133,882.65
Total Operating Expense	\$	407,249.10
Vendor / Contractual Costs*	Ś	330,000.00
Material Production Costs	, \$	110,000.00
Total Vendor Costs	\$	440,000.00
Total Costs	<b>\$</b> 1	L.361.099.00

## **Overarching Budget**

Salaries / Wages	\$	536,680.00
Fringe Benefits	\$	203,938.40
<b>Total Personnel Cost</b>	\$	740,618.40
Equipment	\$	-
Supplies	\$	9,991.20
Travel	\$	133,882.65
Construction		-
Other	\$	110,000.00
Contractual*	\$	385,770.00
<b>Total Direct Costs</b>	\$ 1	1,380,262.25
Indirect Costs	\$	358,737.75
Total Budget	\$ 1	1,739,000.00

**C.2** 

				JEC110II J	O OI ACI	770 01 2025						
Agency:	Arkansas I	Department	of Health				Business Area	Code:	0645			
Program Title	<u>:</u>		WIC	C Electronic Ben	efits Transf	er Offline to Onlin	ne (WIONL-23-AR	(-1 <u>)</u>				
Granting Orga	nization:	USDA Foo	d and Nutr	rition Service			CFDA #10.55	7				
Effective Date	of Authori	zation:		Beginning:	5	/22/2023	_ Ending:		6/30/20	024		
On a national applying for the funding, the provide WIC provide WIC provide WIC provide would like to modernization better support appointment Certification approgram to recretifications to Offline technology will may provide a	Purpose of Grant / Reason for addition or change (include attachments as necessary to provide thorough information):  On a national level, the Women, Infants, and Children (WIC) Program is investing in technology in every step of the WIC process-applying for the program, interacting with staff, getting benefits, accessing nutrition education, and shopping. With WIONL-23-AR-1 funding, the ADH WIC Program will replace the current SPIRIT MIS which is outdated. An enhancement in technology is needed to provide WIC participants with a more modern and streamlined experience. Based on the 2021 WIC Participant Survey Arkansas conducted 86% of participants would like the option to schedule WIC appointments online, 73% would like a chat feature on the app, and 71% would like to be able to send in their required paperwork ahead of the appointment (much like doctors' offices operate today). These modernization efforts will allow Arkansas to focus more on connecting eligible families to WIC and strengthening our service delivery to better support maternal and child health outcomes. This grant will allow WIC to pursue advanced technology efforts which include online appointment scheduling, real time data and analytics, and the ability to allow participants to upload documentation prior to WIC Certification appointments. These upgrades will create a faster, more timely service and will make the WIC Program a more modern program to meet participants where they are. The WIC Program will utilize cloud-based technology which will also allow for WIC certifications to be done remotely. Finally, this upgraded Management Information System (MIS) will change WIC benefit issuance from Offline technology to Online technology which will align the Arkansas WIC Program with all other WIC State Agencies. Online WIC EBT technology will allow for remote benefit issuance similar to the way The Department of Human Services SNAP Program issues benefits and may provide an avenue to connect the two services in the future. It will also allow partic											
3			A	merican Rescu	ue Plan Ac	t Program Fund	ling			**		
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### Narrative Summary:

The pandemic changed the way WIC delivers services. The United States Department of Agriculture Food and Nutrition Service (USDA-FNS) granted multiple waivers to allow flexibility in WIC operations during the pandemic, which ensured safe delivery of services. However, the demand for WIC services has created a critical need to further automate and enhance the WIC program on a national level. Arkansas would like to replace the aging Management Information System (MIS) legacy system, SPIRIT, with a new web-based system that will include a change from Offline benefit delivery issuance to an Online benefit delivery system.

On a national level, the Women, Infants, and Children (WIC) Program is investing in technology in every step of the WIC process- applying for the program, interacting with staff, issuing benefits, accessing nutrition education, and shopping. With WIONL-23-AR-1 funding, the ADH WIC Program will replace the current SPIRIT MIS which is outdated. An enhancement in technology is needed to provide WIC participants with a more modern and streamlined experience. Based on the 2021 WIC Participant Survey Arkansas conducted 86% of participants would like the option to schedule WIC appointments online, 73% would like a chat feature on the app, and 71% would like to be able to send in their required paperwork ahead of the appointment (much like doctors' offices operate today). These modernization efforts will allow Arkansas to focus more on connecting eligible families to WIC and strengthening our service delivery to better support maternal and child health outcomes.

**C.3** 

Agency:	Arkansas	Department	of Health				В	usiness Area	Code:	0645	
Program Title	:		Ер	idemiology and	Laborator	y Capacity for	Infectious	Diseases (ELC	C)		
Granting Orga	anization:	Centers for	Disease C	ontrol and Prev	ention		C	FDA #:			93.323
Effective Date	e of Authori	zation:		Beginning:		7/1/2023		Ending:		6/30/20	24
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# **Epidemiology Laboratory Capacity (ELC) Grant Confinement - \$3,248,388** (FRP645V, AZ3)

 ELC Confinement Grant-Reallocation \$3,248,388. The Department of Health received the original approval for this appropriation by the Arkansas Legislative Council, ALC in September of 2022. The Department now requests to move the appropriation from subgrants and contracts to Operating Expenses to better align with planned spending. The program will spend funds to cover existing salaries and provide PPE and cleaning supplies to Jails and Prisons.

**C.4** 

				SECTION 3	6 OF AC	T 796 OF 2023			
Agency:	Arkansas [	Department	of Health				Business Area C	ode: <u>0645</u>	
Program Title:		Epidemiolo	gy and Lab	ooratory Capacity	y for Prevei	ntion and Control of	Emerging Infection	ous Diseases (ELC	)
Granting Orga	nization:	-80		ontrol and Preve			CFDA #:93.323		
Effective Date	of Authoria	zation:		Beginning:		8/1/2023	Ending:	6/30/20	24
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Approved by:	nor.	5000							
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Cabinet Secreta	ry/Agency [	Director	Date	Office	of Budget	Date	Office of	of Personnel Mgm	Date

## **Epidemiology Laboratory Capacity (ELC) Grant SHARP - \$2,926,479**

SHARP1-(Strengthening HAI & AR Program Capacity) reallocation \$2,926,479. The Department of Health received the original approval for this appropriation by the Arkansas Legislative Council, ALC on May 2023. ADH is now requesting to reallocate funds for this grant.

Epidemiology & Laboratory Capacity (ELC) - SHARP & STRIKE is requesting to reallocate funds from subgrants to travel expenses and operating expenses. We will utilize the funds in operating expenses to cover contracts and purchase of supplies in the Outbreak Section

**C.5** 

Agency:	Arkansas I	Department	t of Health			Business Area Code: 0645					
Program Title	e: Epidemiolo	ogy and Lat	ooratory Ca	apacity for Preve	ention and (	Control of Em	erging Infectio	us Diseases			
Granting Orga	anization:	Centers fo	r Disease (	Control and Prev	ention (CD	C)	CFDA #:			93.323	
Effective Date	e of Authori	zation:		Beginning:	7	//1/2023	Er	nding:	6/30/20	)24	
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						Progra	m Funding Am	ount			
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Extra Help										-	
Personal Serv	vices Matchi	ng								-	
Operating Expenses 540											
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Approved by:	1. 1.			24 Dal	ert Brech	02/29/24					
Cabinet Secret	ary/Agency [		2 -9 Date		of Budget	02/29/24 Date		Office of Personi	nel Mgmt	Date	

CRB 2/12/2024

**C.6** 

Agency:	Arkansas [	Busi	Business Area Code: 0645								
Program Title	:		Ер	idemiology and	Laboratory	/ Capacity	for Infectious Dis	seases (ELC)			
Granting Orga	anization:	Centers for	r Disease C	ontrol and Prev	ention		CFD.	A #:			93.323
Effective Date	of Authoriz	zation:		Beginning:	-	8/1/2023	3	Ending: _		6/30/20	24
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CRB 2/5/2024

### Epidemiology Laboratory Capacity (ELC) Grant Project C1:ETOR \$665,181

ADH is submitting a new request for appropriation for this award. The funds for this grant will be utilized to cover Existing Staff salaries at our Public Health Lab. It will also be used to cover existing IT contracts for our Public Health Lab — STARLIMS and the Lab Web Portal. The requests will be for salary, fringe, and operating costs.

Justification: STARLIMS is the public health lab's information management system. Annual maintenance is required to assure access to the STARLIMS Help Desk and to new releases of the software.

Justification: The public health laboratory continues moving away from paper-based processes for specimen submission and result reporting. The iConnect lab web portal enables electronic test ordering and reporting for submitters of specimens to the lab. The portal interfaces directly with the lab information management system and requires ongoing annual support.

**C.7** 

Agency:	Arkansas I	Department	of Health				Business Area C	ode:	0645	
Program Title	:	Strengtheni	ng the Infr	astructure, Wor	kforce, & D	ata Processes for t	he Public Health	System	in Arkans	sas.
Granting Orga	anization:	DHHS: Cer	nters for Di	sease Control &	Prevention	1	CFDA #: 93.967			
Effective Date	of Authori	zation:		Beginning:		2/1/2024	Ending:		6/30/20	)24
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Cabinet Secreta	ary/Ag <mark>e</mark> ncy [	Director	Date		of Budget B 2/12/20:	Date 24	Office o	f Personn	el Mgmt	Date

## Project Summary for A1 of the Strengthening U.S. Public Health Infrastructure, Workforce and Data Systems Grant (PHIG)

## Arkansas Department of Health NE110E000049 Arkansas Principal Investigator: Bala Simon, MD, DrPH

Note: Abstract and summary still apply with February 2024 reallocation request. Scope of work does not change, just the category of appropriation because of a mis-categorization.

#### A1 Workforce Abstract

The COVID-19 pandemic and its corresponding response highlighted some critical needs in the public health workforce in Arkansas. The Arkansas Department of Health (ADH), as the centralized authority on public health in the state, has identified several programs where additional staff is needed to meet changing demand. These programs include the Public Health Lab, where reporting is shifting to almost entirely online; the Arkansas Central Cancer Registry which continues to face challenges in staffing, only compounded by COVID-19 and staff redirection; and in hepatitis surveillance, as cases in the state have risen nearly 400% since the pandemic began. Further, the ADH has identified programs that currently have staff supported by other grants, primarily from the surge of COVID-19 related funds, that are vital to the work of the ADH and need continued funding. These include a number of epidemiologists positions, the Office of Performance Management, Quality Improvement and Evaluation, and the office of Health Equity. Further, the COVID-19 pandemic changed the landscape of employment broadly and employees are demanding more from employers in the form of professional development, training opportunities, enhanced workspaces, and flexible workspaces. The ADH will work to address each under the leadership of a Workforce Director, a position new to this grant. And lastly, the ADH must develop and support working partnerships statewide to maintain a robust public health system, and this is present throughout but highlighted with enhanced trainings for the state's County Health Officers, and a proactive approach to working with colleges and universities in the state to offer intern positions to expose more students to public health. In conclusion, the Arkansas Department of Health intends to address some of the workforce challenges heightened by the COVID-19 pandemic by hiring new staff and retaining current staff and partnerships through improvements to the workplace and opportunities offered like training, professional development, and improved workspaces.

#### Strategy A1 Workforce

#### A1 Background:

The last two and a half years of COVID-19 response highlighted some critical needs in the workforce of public health system of Arkansas and in the Arkansas Department of Health (ADH), and it reconfirmed the importance of a robust public health infrastructure and workforce in the state. Through the pandemic old partnerships were relied on, new partnerships were formed; staff were stretched to their limit in many cases, required to learn new skills and redirect their efforts to projects outside of their scope of work; many critical public health programs were stalled or limited in effort because of staff redirection; underserved communities faced greater challenges to their wellness; and a spotlight was cast on public health for what it was and was not doing. A commitment to hiring new staff and retaining current staff through improved support is a first step towards a robust public health system for Arkansas.

The isolation of individuals/families in the initial stages of COVID-19, combined with the closing or limited hours of many healthcare services, accelerated several challenging public health issues. At the

reopening of healthcare facilities, the ADH noted a 400% surge in new hepatitis C (HCV) cases in the state. Drug use by people who inject drugs (PWID), self-medication through drug use, and a mental health crisis were all seen during COVID-19 as risk factors contributing to the increase in HCV cases reported. As public health in the state begins to regain its footing, connecting with essential partners in communities of need across the state, staff is needed to support the work.

The Arkansas Central Cancer Registry (ACCR) at the ADH continues to face the challenge of limited Certified Tumor Registrars (CTR) in the state. The issue was compounded by the pandemic as reporting facilities faced staff shortages/redirections of cancer registry reporting staff, and many staff opted for other work from home jobs when offices opened again. According to the Arkansas CTR Association, there are only 50 CTRs in the state and this may include individuals who have retired or are no longer working in the profession. The addition of staff for the program through this grant will help to create a training program to assist students in the state with their practicum hours for their CTR certification. This position will be responsible for partnering with the University of Arkansas for Medical Sciences (UAMS) and other institutions, hospitals, and facilities to target potential students and to establish internships. The cancer support staff would also be included in the training program. They will work directly with the cancer registry with the goal of earning a CTR which will ultimately expand the capacity of the ACCR to provide CTR services and ensure compliance with national standards.

Retaining staff and hiring new staff is also needed in Arkansas's evolving Public Health Laboratory (PHL). The PHL has traditionally used paper forms, documents, and reports. COVID-19 highlighted the necessity of moving away from using and retaining copious amounts of paper documentation towards the implementation of electronic systems. Currently, the laboratory utilizes a contractor for on-going upgrades and support of the Laboratory Information Management System, StarLIMS. Since the use of StarLIMS has grown exponentially in the last several years, the laboratory needs a staff member to manage the on-going upgrades and troubleshooting. Additionally, the laboratory is expanding the use of the online test request and reporting platform - Lab Web Portal - for private submission of specimens to the laboratory. The Lab Web Portal has only been used for COVID-19 testing but is in the early stages of expanding to all clinical laboratory areas, including Newborn Screening. Lastly, the laboratory must retain documentation for accreditation purposes, some\_documents up to 25 years. In the past, this documentation was kept in the form of paper files. To better preserve this documentation, and to become more environmentally friendly, the laboratory is in the process of electronically archiving this paper documentation and updating workflows to become paperless. This on-going project is headed by the current Laboratory Logistic Specialist, which the laboratory would like to retain for the period of this grant opportunity. These staff members will be critical to the work of the Laboratory, working to meet the expectations of partners across the state.

Related, there is often the challenge within the public sector to retain and recruit new staff to perform necessary public health job functions, particularly for workforce associated with complex and technical skills, like for the ADH Office of Information Technology Services (ADH IT). Using a consulting firm that specializes in finding talent associated with these skills helps alleviate some of the struggle with recruiting high-performing individuals into these roles. The Office of Information Technology systems has maintained strong working relationships with TEK Systems and Orchestrate, two third party consulting firms that specialize in technology contracts and have ample experience recruiting high quality talent.

After a recent training needs assessment conducted in 2020 by the ADH Human Resources, the following recommendations were made: (1) increase high quality training opportunities for staff on effective

communication, community public health, outreach, and/or health improvement, professional development, diversity, and health equity; (2) support the development of program-specific trainings to enhance the orientation for new employees assigned to specific programs, and (3) establish a protocol that will allow employees to dedicate a certain amount of time per week/month to complete skillsbased and/or professional development training. It is vital that the ADH invest in skills for employees that are consistent with public health practice and will ensure that the state is prepared for the next disease outbreak/pandemic. Additionally, the ADH IT conducted an assessment and deemed the following skills as imperative to a well-trained workforce: soft skills like problem-solving, adaptability, critical thinking, teamwork, effective communication of data, dependability, empathy, and patience; and hard skills: SAS, R Studio, Python, Jasper Studio, Rhapsody, SQL, Artificial Intelligence, command line programming, and database management. And further, the COVID-19 pandemic highlighted failing disease surveillance infrastructure and limited applied technical skills to perform complex data management and transformation tasks. CDC ELC funding allowed the ADH to upskill staff, but the relatively young workforce still requires more training to ensure that they are effective at all of their job requirements. Most of the funding for training requested in this application will be aimed at helping Epidemiology staff gain the soft and hard skills listed above, while IT staff will utilize Rhapsody and database training to become more effective at data collection and management.

In addition to flexibilities and incentives, employees want to feel that their wellness is supported, particularly important for public health employees as they have committed to that work for all residents of this state. The ADH previously held a position for an individual who coordinated some wellness activities, but it did not have an associated budget. COVID-19 highlighted the importance of physical and mental wellness and the ADH is committed to providing spaces and opportunities that support that.

As high blood pressure, both diagnosed and undiagnosed, is a major risk factor for heart attacks and strokes, free-standing Blood Pressure Kiosks will be placed in the waiting rooms of ADH's local health units located throughout the state. These kiosks have digital health trackers and are handicapped accessible allowing ADH staff and ADH clients to check their blood pressure, access their blood pressure histories online, and share this information with their medical providers to improve blood pressure control. This intervention will help reduce inequities with self-measured blood pressure and uncontrolled hypertension and have a significant impact on disparities in deaths and disability due to heart disease, stroke, diabetes, and kidney disease in Arkansas.

To cultivate the future generation of public health workforce, the ADH must be more proactive in working with all colleges and universities in the state to offer such placements to expose more students to public health activities. Experience has shown that students exposed to public health earlier in the studies and careers are more likely to choose careers in public health. There were many students at the Fay W Boozman College of Public Health (COPH) who got involved in the early stages of case investigation and contact tracing, leading to more exposure to this work and ADH activities during the pandemic. Some of these students got involved in analytic projects with COPH faculty. And generally, there is a lot more interest from students wanting to do projects at the ADH, and that has been increasing over time.

In a similarly important partnership, Arkansas has 75 County Health Officers (CHO)—one in each county in the state. The CHOs are medical professionals, almost all in private practice. These CHOs function as volunteers with no compensation from the ADH, and almost none has any public health training. However, they are expected to represent the ADH in several public health functions and emergencies, developing and maintain relationships with all facets of the communities they serve, including through

the COVID-19 response, and have carried out these duties diligently. They are a vital part of the public health infrastructure and should have the opportunity for formal public health training.

Many people learned more about public health than ever before in the last few years, and consequently there is an increased need for continued transparency and commitment to quality improvement. The ADH created the Office of Performance Management and Quality Improvement and Evaluation as the need for an organized approach increased. This office is vital to the development and maintenance of working partnerships on all levels as all Arkansans have shown interest in this work---from individual community members to state legislators to the media. Similarly, as an Academic Health Department, the ADH staff are encouraged to participate in research activities, particularly in collaboration with our academic partners. Over the past few years, ADH staff are producing many more scientific papers, abstracts and poster for publication, and many of these get accepted for presentations at state and national conferences, requiring a specialized printer.

**C.8** 

Agency:	Arkansas I	Department	of Health				Business Area Co	de:	0645	
Program Title	:	Strenghten	ing the Inf	rastructure, Wo	rkforce & D	ata Processes for	the Public Health	System	in Arkans	sas
Granting Orga	anization:	DHHS: Cer	nters for D	isease Control a	nd Preventi	on	CFDA #: 93.967			
Effective Date	of Authori	zation:		Beginning:	1	2/1/2023	Ending: _		6/30/20	)24
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Regular Salari	ies									340,982
Extra Help										
Personal Servi	ices Matchi	ng								112,824
Operating Exp	oenses									432,854
Conference &	Travel Exp	enses								
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Capital Outlay	,									
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Other:										
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Anticipated Du	uration of F	ederal Fun	ds:		1/30/24		gary	zhou		2/26/2024
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Unit	Area	SubArea	Center	Number	Item	Position	n Title	Code	Grade	Maximum *
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State funds v			eplace fed	eral funds whe	en such fun	ds expire, unless	appropriated by	the G	eneral A	ssembly and
Approved by:	dela		2-8-	24 R	bert Brec	<b>h</b> 2/29/24				
Cabinet Secreta	ary/Agency D	Director	Date	_ \	of Budget	Date	Office of	Personne	el Mgmt	Date

CRB 2/13/2024

# Project Summary for A3 Data Modernization Core Year 2 of the Strengthening U.S. Public Health Infrastructure, Workforce and Data Systems Grant (PHIG) Arkansas Department of Health NE110E000049 Arkansas

Principal Investigator: Bala Simon, MD, DrPH

This is for A3 Core Data Modernization Initiative (DMI) Year 2 of the grant for \$978,329. The Arkansas Department of Health (ADH) is continuing a comprehensive initiative to advance data modernization activities within the organization. Recognizing the critical role of data in improving public health outcomes, the ADH has appointed a Data Modernization Director who will lead the assessment, planning, and implementation of data modernization activities based on the guidance provided by the PHIG.

Arkansas Department of Health (ADH) intends to utilize the A3 DMI Core Year 2 funding in the 12-month project period in the following ways. Firstly, five salaried employees will move from A1 to A3 DMI Core Year 2, as their job duties are directly related to DMI Core activities. They include 4 epidemiologist, one epidemiologist supervisor, and the DMI Director. These individuals will lead infectious disease reporting, maintain the reporting capacity of NBS to local, state, and federal partners and ensure compliance and sustainability of the NBS system. Additionally, oversee NBS contract with Inductive Health to ensure completion of documented milestones. Further, they will work to coordinate the analytical capacity of the ADH Informatics program overall, including the allocation and completion of various DMI trainings included in the budget. This totals to \$340,982 in salaries, plus \$112,824 in fringe benefits. Then, \$91,669 in Indirect Costs. And \$41,200 in trainings and certificates for the program.

The funds will also be used to begin a contract for a Data Governance Plan. The program has already begun discussions with an existing state contractor for these services. The expected deliverables for the entire project will be a Data Governance Plan that can be submitted to the CDC as well as utilized by the ADH Office of Information Technology Services to operationalize the Data Warehouse following its completion. While the total project is expected to cost close to \$1M, this funding will be utilized to begin the project at \$391,654. With this first amount of money, planning deliverables include development of a Project Charter, assessment of current Governance Structure (including conducting assessment and disseminating results), development of plan for building including quality, privacy/security and monitoring frameworks, standards and guidelines, sharing and collaboration policies, training and capacity building, risk management, communication and implementation planning.

**C.9** 

Agency: Arkansas Department of Health				Business Area C	ode:	0645	
Program Title: St	rengthening STD	Prevention-	Coronavirus Dise	ase Supplementa			
Granting Organization: DHHS Centers for Di	sease Control		<u>u</u>	CFDA #: 93.977			
Effective Date of Authorization:	Beginning:	12,	18/2023	Ending:		6/30/20	)24
Purpose of Grant / Reason for addition or char Re-allocation of appropriation from salary, frin	- '			-	n):		
This is year 3 funding that the Arkansas Depa Control and Prevention (CDC) for its Sexually for funding to be used to continue activities fo through the STD Prevention Program's curr treatment; conducting client interviews; partner	Transmitted Diser statewide implerently funded su	eases (STD) mentation of b-recipient	Prevention Programments Find Programment P	ram. The CDC ha bedded Disease I ne CEDIS perfori	as grante Intervent m linkag	ed expand ion Speci	ded authority alist (CEDIS)
Func. Area: HHS	merican Rescue Fund Code: er/WBS Element:	FRP645J	Program Fundi	ng -		Funding: State: inuation:	X
*			Program Fu	Inding Amount			
Regular Salaries							(191,980)
Extra Help							(151,500)
Personal Services Matching			3				(70,683)
Operating Expenses							860,288
Conference & Travel Expenses							-
Professional Fees							-
Capital Outlay							-
Data Processing							(a)
Grants and Aid (CI: 04)							(521,715)
Other: 5900046							(75,910)
Other:							
Total	\$						æ
Anticipated Duration of Federal Funds:	01	/31/2026					
		,02,2020		DFA IGS State Te Items requested for compliance with Teo IGS State Technolog	informatio chnology Pl	n technolog ans as sub I.	mitted to DFA
Org Pers Pers Cost	Position	Cmnt			Class		ied positions only Line Item
Unit Area SubArea Center	Number	Item	Position	n Title	Code	Grade	Maximum *
State funds will not be used to replace fer authorized by the Governor.	deral funds whe	n such fun	ds expire, unles	s appropriated b	y the G	eneral A	ssembly and
Approved by:	2					20	
(abinet Secretary/Agency Director Date		of Budget	02/29/24 Date	Office o	f Personn	el Mgmt	Date

CRB 2/6/2024

# Arkansas STD Prevention Program Strengthening STD Prevention and Control for Health Departments CDC-RFA-PS19-1901 CDC DIS Workforce Supplement

The Arkansas Department of Health, Center for Health Protection, Infectious Disease Branch has been awarded funding from the Center for Disease Control (CDC) to support the governmental public health response to infectious diseases. Awarded workforce supplemental funding from years 1-3 received by the Arkansas STD Prevention program between 1/1/2021-1/31/2022, is available for continued utilization through "expanded authority" until January 31, 2026.

Supplemental funding will be utilized by the Infectious Disease Branch, STD Prevention Program for supporting salary and fringe of existing program staff, continue activities to support an increase in workforce efforts through statewide utilization of Community Embedded Disease Intervention Specialist (CEDIS). CEDIS aid persons diagnosed with an infectious disease for accessing care and treatment; conducting client interviews; partner notifications; and perform outbreak response activities.

The Infectious Disease Branch, STD Prevention Program has awarded a sub-recipient organization for hiring, training, and retaining CEDIS personnel. The CEDIS personnel will conduct prevention and linkage case activities for STD, TB, Hepatitis C, and other infectious diseases of public health concern. The efforts performed will include linkage to prevention, treatment, and outbreak response. The sub-recipient is awarded a one-year sub-grant with six renewal options.

Efforts of sub-recipients will be statewide and serve an estimated number of 200,000 persons.