# ARPA Project Name: Department of Health Community Health Center ARPA Funds: \$20,000,000.00

1.8	Other	Covid-	19 Public Health Expenses	\$20,000,000.00

#### **Healthcare Sector**

Timeline to implementation: 6 months to 18 months

#### Overview

American Samoa has only one acute medical facility serving nearly 50,000 residents in American Samoa. The lone hospital is aging facility and limited capabilities to provide adequate healthcare for the entire population is highly concerning, especially in the event of community spread of the COVID-19 virus. The single acute medical facility means long travel time for patients living in far remote villages and outlying islands to reach the hospital. Covid-19 public health emergency has highlighted the territory's limited response capability to respond effectively to the COVID-19 pandemic and the public health emergency declaration. The COVID-19 pandemic has exacerbated the disparity in access to adequate healthcare and shown the urgency and immediate actions necessary to address the local healthcare needs and services. The establishment and expansion of DOH community health centers in American Samoa will help enhance capacity and improve access to medical and public health services. This investment will help prepare and support efforts to mitigate and prevent the spread of Covid-19. The border shutdowns, controlled flight travels and the limited transportation between the islands of Aunuu, Manu'a and Tutuila all pose immediate danger and high risk to American Samoa. The call to action is now to build and expand DOH community centers and its services at remote villages and outlying islands. This is the best opportunity to use ARPA resources to strengthen local healthcare sector, provide immediate access to medical and public health services and lessen the time for patients to reach medical assistance. These improvements will better prepare American Samoa for addressing the negative impacts exacerbated by the pandemic and help promote a healthy and stronger community.

#### PROJECT BACKGROUND

The COVID-19 Public Health Emergency has had a great impact on American Samoa's public health infrastructure and services, as well as the local economy. The projects identified in this document are to be funded using American Rescue Plan Act (ARPA) funds from the federal Government in accordance with the requirements of the Act.

American Samoa remains the only part of the United States of America and its Territories that has been blessed with zero cases of locally transmitted COVID-19 virus. While we are grateful for this blessing, it was not accidental that American Samoa has remained COVID-19 free. It required tremendous sacrifice by the people of American Samoa to keep their loved ones safe and protected. We are fortunate to have the support and federal assistance of the various COVID-19 relief and recovery funds to help meet the challenges as a result of the COVID-19 pandemic and the public health emergency declaration.

Our leaders drew upon the lessons of our history, specifically the 1918 Spanish pandemic that decimated our neighbors 80 miles to the West that lost an estimated 20% of their population as their borders remained open during the critical early stages of the spread. As a result of the first

Public Emergency Declaration in March 2020, American Samoa closed its borders as part of its strategy to mitigate the transmission of the Coronavirus that had grown to become a global pandemic. Our borders remain closed to regular commercial travel and all authorized travel by air or sea follow careful protocols to minimize the risk of exposure or transmission of the COVID-19 virus.

The Department of Health community health centers play a critical role in delivering basic healthcare services to the remote villages and the outer islands of Manu'a and Aunu'u. The COVID-19 pandemic and the public health emergency declaration and the resulting border closure highlighted the limited access to healthcare services, especially in the outer islands. Limited and restricted air and sea travel demonstrated the importance and urgent need to improve the access to healthcare services and treatment available through the DOH community centers, in the remote villages and outer islands.

The limited transportation between the main island of Tutuila and Manu'a and Aunu'u, and restricted travel on the main island of Tutuila in the event of a local outbreak necessitates the urgent need to improve the DOC community health centers services and response capabilities to a local outbreak of the COVID-19 Pandemic. The DOH community health centers provide crucial healthcare service and support for vulnerable population in American Samoa Islands.

#### **KEY STAKEHOLDERS**

DOH Community Center project is to be developed and designed by the Department of Health (DOH) management with all key stakeholder(s) input and contribution

- DOH
- LBJ
- DHSS
- Medicaid
- Treasury
- Other branches of Government (Legislative representation)
- Non-profit
- NGO's
- Healthcare professionals
- Private sector representation
- ARPA Oversight Office

## (a) COMMUNITY ENGAGEMENT

Community engagement is an essential aspect of ARPA funded projects. The intent of the US Treasury in fostering public participation is to maintain transparency and provide opportunities for feedback to ensure that funds are used in the most beneficial manner.

In keeping with the intent of the US Treasury, the American Samoa ARPA Oversight Office has adopted the following notice and comment timeline for proposed projects:

 A Notice of Proposed Project will be published online, in local newspapers, and via television or radio broadcasts. The Notice will specify that there will be thirty (30) days for the public to provide comment either in writing or by attendance at scheduled public hearings.

- Concurrent to the publication of the Notice, a draft proposal and scope of work will be published on the ARPA website for the public to review.
- General meetings with the public will be scheduled and publicized within the thirty (30) days Notice period. Email comments will also be accepted.
- Presentations to the Legislature will be conducted during the Notice period, as needed.
- At the close of the public comment period, the agency will have 20 days to revise the project as appropriate and submit the Final Draft to the ARPA Oversight Office.
- The Final Draft of the Project will be posted for public review once completed and certified by the ARPA Oversight Office.

It is the responsibility of the agencies in charge to publicize notices and adhere to the state
timelines. For the Infrastructure broadband project, the anticipated date for the Notice of
Proposed Project will be, 2021.

#### (b) TIMELINE ON PROJECT LAUNCH

ARPA Funds are required by federal statute to be encumbered by December 31, 2024 and spent by December 31, 2026. This mandate makes the need for a definite timeline for completion of projects of critical importance.

The DOH Community Health Center project must identify the proposed start date, the completion dates of each phase of the project, inclusion of any notice/bid periods for procurement purposes, and an estimated date of completion, along with any other dates relevant to the project progress.

## (c) SCOPE of Project (DOH Community Health Center)

Each proposed project must be submitted to the ARPA Office with a cover letter addressed to the Executive Director. Submittals must include the proposed plan as detailed below. ARPA will review of eligibility and compliance to the American Samoa ARPA Spending Plan.

Once approved, an award certified letter will be provided verifying the project description and project lead.

Project Leads (Department of Health) must provide the following:

- 1. Project Description and/or Business Plan
- 2. Completed Eligibility Analysis
- 3. Scope of Work
- 4. Implementation Plan & Timeline
- 5. Proposed itemized budget
- 6. Project Lead

Define scope of project based on response to Covid-19 pandemic and the public health emergency declaration:

- Project must meet statutory requirements for eligibility:
  - 1. Project must be in response to disease itself or harmful consequences of the economic disruptions exacerbated by Covid-19
  - 2. Project should enhance health care capacity
  - 3. Project should support underserved areas and vulnerable populations to access medical or public health services
  - 4. Programs, services and efforts should help mitigate and prevent the spread of Covid-19.
  - 5. Project should meet pandemic operational needs to implement pandemic mitigation tactics
  - 6. Project should support medical care efforts
  - 7. Programs and services should address disparities in public health outcomes exacerbated by the pandemic
  - 8. Project should support isolation and guarantine efforts
  - 9. Project should improve ventilation in health care settings
  - 10. Project must promote equity in the underserved, marginalized and disadvantageous areas in the territory
- Describe the project and how it responds to the negative impacts of Covid-19 public health emergency.
- Describe the programs and services and how they will address the negative impacts of Covid-19 public health emergency.
- Describe the project and how it will help mitigate and prevent the spread of Covid-19.
- Describe the programs and services and how they will help mitigate and prevent the spread of Covid-19.

## Questions to consider to ensure project, services and programs meet eligibility:

Does this project enhance health care capacity?

- Does the project meet pandemic operational needs to implement pandemic mitigation tactics?
- Does this project address disparities in public health outcomes?
- Does the project support medical care efforts?
- Does this project support underserved areas and vulnerable populations to access medical and public health services?
- Does the project promote equity in the underserved, marginalized and disadvantageous areas in the territory?

# **Proposed Budget**

Your budget plays a key role in putting your strategy into action in the effectiveness of resources and achieving overall project goals within specified timelines. Your overall budgeting allocation should align with the ASG BUD202 primes format and itemized further to connect to your project's plan.

Your itemized budget should support and outline your projects phases or goals and include all related activities during the project's life and its expenses as well as any income if applicable. It should also highlight limitations and constraints your office predicts and allocate some funds towards this to mitigate these risks and budget for unforeseeable situations.

# (d)Conflicts of Interest

ARPA requires that a conflict of interest policy must be maintained pursuant to 2 C.F.R. § 200.318(c) and such policy is applicable to each activity funded under this award. Disclosure in writing must be provided for any potential conflict of interest affecting the award in accordance with 2 C.F.R. § 200.112

# (e) Adherence to ASG Procurement Process

ARPA funds are subject to the Uniform Administrative Requirements, Cost Principles, and Audit Requirements of Federal Awards (2 CFR Part 200). Specifically, these regulations require ASG to follow local procurement laws in using these funds. 2 CFR 200.317. The lead agency for each project (in the case of the new mental health facility and services, this will be DOH) will work in concert within its established Procurement procedures to ensure that all procedures and requirements are followed and documented. All agencies are reminded that ARPA funds will be subject to federal audits.

CLAUSE	REQUIRED BY	APPLIES TO
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	AMERICAN SAMOA ADMINISTRATIVE CODE	
EQUAL OPPORTUNITY	10.0250(d)(3), 10.0260(c)	All Contracts in excess of \$10,000
DAVIS BACON ACT	10.0250(d)(5)	Construction contracts that exceed \$2,000 and when required by federal grant program legislation
CONTRACT WORK HOURS AND SAFETY STANDARDS ACT	10.0250(D)(6); 10.0260(D)	Construction contracts in excess of \$2,000 or contracts in excess of \$2,500 which involve employment of mechanics or laborers
CLEAN AIR AND WATER	10.0250(d)(7); 10.0260(f)	All contracts over \$100,000 (unless requirement has been waived by EPA)

In addition to the above required clauses, ASG Procurement Rules give preference to local bidders in construction projects. For contracts valued at \$50,000 or less, only local bidders are allowed to participate. For those greater than \$50,000, local bidders are given specified add-on percentages. This local preference leads to a greater number of local employees and overall income that is much needed in the Territory. This policy has a direct effect on local stimulation of the economy.

# (f) Reconsideration Process

In accordance with Executive Order 03-2021, the ARPA Oversight Office reserves the right to determine which projects will receive funding based on a number of factors including but not limited to ensuring compliance with all federal requirements. The Office, however, recognizes that some of these determinations may adversely affect interested parties. For the purposes of this section, an interested party will be limited to applicants for direct funding opportunities for projects.

A process for reconsideration of denied projects is hereby implemented. For clarity, this process is separate and apart from any procurement disputes subject to the jurisdiction of the Office of the Administrative Law Judge. ASCA 4.0604(f).

#### Covered Disputes:

The dispute resolution process will be limited to ARPA Oversight Office denials of project awards. As an office of limited purview, the covered disputes identified above shall not be considered final agency decisions for the purpose ASCA 4.0604.

#### Reconsideration Requests:

Interested parties will have 5 business days from the announcement of awards by the ARPA Oversight Office to file a "Reconsideration Request" with the Director. The announcement of awards will mean each project is "provisionally awarded" the requested ARPA funds.

The request will detail the basis for reconsideration including the project award denial being challenged, how the decision adversely affects the party, how the requested change would benefit the objectives of the American Rescue Plan Act.

A hearing shall be held within 5 days of filing the Reconsideration Request with the Director. The Director shall issue a notice of hearing to the filing party.

The hearing will be conducted by a three-member panel headed by the Director. Panel members will be selected by the ARPA Oversight Office. The panel will have an advisory role, but the ultimate decision-making authority shall be the Director's.

Parties to the dispute may present evidence, materials, and witnesses in support of their claims. The Director will have discretion to limit presentation of evidence, materials, or witnesses.

Upon completion of the hearing, which shall not exceed two hours, the panel will consider arguments and evidence presented in the Reconsideration Request and at the hearing. The Director shall be responsible for rendering a decision on the issues presented within three (3) business days of the conclusion of the hearing. "

# (q)Local Certification/Licensing/Permitting

Each project will require adherence to applicable local licensing, certification, and permitting laws. DOC will be responsible for obtaining each necessary approval prior to the start date. A list of these documents as well as copies should be submitted to the ARPA Oversight Office.

#### (h) ARPA Reporting Requirements

ARPA requires monthly, quarterly and annual reporting to be submitted by the sub-recipients on projects progress and expenditures. The American Samoa ARPA Oversight Office will, therefore, be requesting information from relevant agencies in order to meet the strict deadlines set forth in the US Treasury's Reporting and Compliance Guide. Each agency must provide the requested information or an explanation as to why information is not available by the time specified by ARPA Oversight Office staff. Failure to do so could jeopardize future funding opportunities.

All ARPA infrastructure funding sub-recipients are required to submit Project and Expenditure Reports.

# 1. Monthly and Quarterly Reporting

- Monthly reports will cover one calendar month and must be submitted to ARPA on the 10<sup>th</sup> of the month or next business day
- Quarterly reports will cover one calendar quarter and must be submitted to Treasury within 30 calendar days after the end of each calendar quarter.
- The table below summarizes the quarterly report timelines for sub-recipients:

Report	Year	Quarter	Period Covered	Due Date
1	2021	2 - 4	Award Date – December 31	January 10, 2022
2	2022	1	January 1-March 31	April 10, 2022
3	2022	2	April 1-June 30	July 10, 2022
4	2022	3	July 1-September 30	October 10, 2022
5	2022	4	October 1-December 31	January 10, 2023

6	2023	1	January 1-March 31	April 10, 2023
7	2023	2	April 1-June 30	July 10, 2023
8	2023	3	July 1-September 30	October 10, 2023
9	2023	4	October 1-December 31	January 10, 2024
10	2024	1	January 1-March 31	April 10, 2024
11	2024	2	April 1-June 30	July 10, 2024
12	2024	3	July 1-September 30	October 10, 2024
13	2024	4	October 1-December 31	January 10, 2025
14	2025	1	January 1-March 31	April 10, 2025
15	2025	2	April 1-June 30	July 10, 2025
16	2025	3	July 1-September 30	October 10, 2025
17	2025	4	October 1-December 31	January 10, 2026
18	2026	1	January 1-March 31	April 10, 2026
19	2026	2	April 1-June 30	July 10, 2026
20	2026	3	July 1-September 30	October 10, 2026
21	2026	4	October 1-December 31	March 10, 2027

# 2. Annual Reporting

 The initial Project and Expenditure Report will cover from the date of award to September 30, 2021 and must be submitted to Treasury by October 31, 2021. The subsequent annual reports will cover one calendar year and must be submitted to Treasury by October 31. The table below summarizes the report timelines for subrecipients

Report	Period Covered	Due Date
1	Award Date – December 31	January 10, 2022
2	January 1, 2022 – September 30, 2022	October 10, 2022
3	October 1, 2022 – September 30, 2023	October 10, 2023
4	October 1, 2023 – September 30, 2024	October 10, 2024
5	October 1, 2024 – September 30, 2025	October 10, 2025
6	October 1, 2025 – September 30, 2026	October 10, 2026
7	October 1, 2026 – December 31, 2026	January 10, 2027

# 3. Required Information

- A. Project Status
- a) The project name,
- b) Identification number (created by the recipient),
- c) Project expenditure category (see Appendix 1, Compliance and Reporting Guidance),
- d) Project expense allocation to budget
- e) Description, and status of completion.
- Not started
- Completed less than 50 percent
- Completed 50 percent or more

## Completed

Project descriptions must describe the project in sufficient detail to provide understanding of the major activities that will occur, and will be required to be between 50 and 250 words. Projects should be defined to include only closely related activities directed toward a common purpose.

- B. Project Expenditures
- Current period obligation
- Cumulative obligation
- Current period expenditure
- Cumulative expenditure
- C. Subawards

The following information is required for Contract, Grant, Loan, Transfer, or Direct Payment greater than or equal to \$50,000:

- a) Subrecipient identifying and demographic information (e.g., DUNS number and location)
- b) Award number (e.g., Award number, Contract number, Loan number)
- c) Award date, type, amount, and description
- d) Award payment method (reimbursable or lump sum payment(s))
- e) For loans, expiration date (date when loan expected to be paid in full)
- f) Primary place of performance
- g) Related project name(s)
- h) Related project identification number(s) (created by the recipient)
- i) Period of performance start date
- j) Period of performance end date
- k) Quarterly obligation amount
- I) Quarterly expenditure amount
- m) Project(s)
- n) Additional programmatic performance indicators for select Expenditure Categories (see below) Aggregate reporting is required for contracts, grants, transfers made to other government entities, loans, direct payments, and payments to individuals that are below \$50,000. This information will be accounted for by expenditure category at the project level.
- D. SAM.gov
- Subrecipients must be compliant with registering and maintaining an active profile on the System for Award Management System (SAM) (https://www.sam.gov)
- All entities wishing to do business with the Federal Government must have a unique entity identifier (UEI). Currently, the DUNS number, which is a unique nine-character identification number is the official UEI.
- In registering on SAM.gov you will complete the following steps (details are available on SAM.gov):
  - i) Request a DUNS number
  - ii) Prepare your data
  - iii) Get a Login.gov Account
  - iv) Submit and Finish