

State of Vermont, Agency of Administration State Fiscal Recovery Fund Questionnaire

INTRODUCTION

The Agency of Administration has established the COVID-19 Financial Office (CFO) to oversee the distribution of money for the State Fiscal Recovery Fund (SFR). The CFO is charged with warranting Vermont’s compliance with the federal and state eligibility, documentation, and auditing conditions of COVID-19 federal funding.

This questionnaire is intended to gather information from Vermont agencies/departments with SFR appropriations or excess receipts spending authority for COVID-19 response and recovery. The CFO requires that all entities expending SFR complete this questionnaire and receive approval for their proposed uses of funds prior to expending funds or launching programs, to ensure alignment with Treasury guidelines. If you plan to provide SFR to a subrecipient that will help administer funds, please gather the needed information from your subrecipient to help complete this questionnaire. Agencies/departments are required to consult with their Governor's Office liaisons to align on SFR programs and external-facing contracts, prior to completing a questionnaire. This requirement does not apply to the use of SFR for the agency's own operating expenses.

Please return this completed questionnaire to ADM.COVID@vermont.gov a minimum of two weeks prior to expending funds or launching your program.

Roadmap for Completing the Questionnaire

Step 1: Identify all SFR appropriations and ERRs for your agency/department.

Step 2: For each appropriation, identify whether it will be used to launch a grant/beneficiary program and/or to cover the agency/department’s expenses.

Agency/department expenses include the agency/department’s own costs and contracts. For example, if you plan to use SFR for a technical assistance program, this would count as an “expense” rather than a grant/beneficiary program, since the State would not be providing funds to a third party subrecipient or beneficiary.

Step 3: In Section 1, identify the legislative appropriations and ERRs that the questionnaire is intended to describe.

For grant/beneficiary programs, please include no more than one program per questionnaire and identify the appropriation(s) for this program in Section 1, question 4. For expenses, you can combine expenses that fall within multiple appropriations, as long as these appropriations are identified in Section 1, question 5.

Step 4: Complete Section 2 only if you indicated an appropriation for a grant/beneficiary program. Complete Section 3 only if you indicated appropriations that include agency/department expenses. All agencies/departments are required to complete Section 4 and Section 5 to describe the use of funds for the appropriations outlined in Section 1, including the outlined grant/beneficiary program and/or expenses.

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To ensure proper form data entry and submission, please open the questionnaire in a desktop version of Acrobat 7.0 or later. It is advised that you not edit the form in a browser as form functionality may be lost.

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SECTION 1: GENERAL INFORMATION

1. Vermont agency/department name:
2. Contact name:
3. Contact email:
4. Legislative appropriation (Act, Section number) or ERR # for grant/beneficiary program, if applicable:
5. Legislative appropriation (Act, Section number) or ERR # for State expenses, if applicable:
6. Total amount for appropriations and ERRs listed above, broken down by appropriation/ ERR:

SECTION 2: GRANT/BENEFICIARY PROGRAM DESIGN

Please complete this section only if you indicated an intended use of SFR to launch a grant/ beneficiary program.

1. Grant/beneficiary program name:
2. Please describe your grant/beneficiary program, outlining how it addresses a COVID-19 need (3-4 lines).
3. Entities/individuals receiving funds from the program (select all that apply):

Government entities	Component units	Non-profit entities
For-profit entities	Individuals	Other:
4. Relationship between Vermont agency/department and the entity/individuals receiving funds:
For assistance in determining the relationship, please complete the [Federal Award Classification Checklist](#).

Subrecipient	Contractor	Beneficiary (requires CFO approval)
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5. Will the program require an application from the entity receiving funds? Yes No (skip to Q. 8)
6. Please provide the following information for the grant/beneficiary program:
 - a. Launch date:
 - b. Application deadline:
 - c. Date of notification:
 - d. Expected date of award issuance:

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e. Minimum award (if applicable):

f. Maximum award (if applicable):

7. If there are multiple application rounds, please provide the intended timelines for each round.

8. Please confirm that you will include required [SFR assurances](#) in the program application and/or award.

Yes

No

9. Please confirm that you will adopt processes to prevent duplication of benefit by verifying that applicants have not applied for/received any other federal funds for the same expenses included in their SFR award.

Yes

No, explain

10. Will the grant/beneficiary program award cover (select all that apply):

Costs

Revenue Loss

Economic support

a. What supporting documentation will applicants be required to provide to verify their costs/revenue losses?

Invoices

Proof of Payment

Expenditure Detail

Income statements

Other:

b. What formula will be used to determine the award amount?

c. How will the program validate that the award addresses a COVID-19 need?

11. Do you have explicit authorization to use part of the SFR appropriation for program administrative expenses?

Yes

No (skip to Section 3)

a. Unless otherwise noted in Vermont statute, administrative expenses are capped at 5%. Please confirm that your administrative expenses do not exceed 5%.

Yes

No, explain

b. Which type of administrative expenses? Please select all that apply.

Direct expenses

Indirect expenses

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SECTION 3: AGENCY/DEPARTMENT EXPENSES

Please complete this section if you indicated an intended use of SFR for your agency/department's own expenses.

1. Type of SFR expenses (select all that apply):

Agency/department's operating costs

Contract(s) to perform State-commissioned work, in compliance with [Bulletin 3.5](#).

- a. Do you plan to issue a Request for Proposal (RFP) or a Request for Quote (RFQ) using these SFR dollars? If yes, please attach a copy of the RFP/RFQ. Yes No
- b. If you intend any other kind of procurement to use these SFR dollars, please describe your procurement process.

2. Please describe the COVID-19 need that your expenses address:

SECTION 4: USE OF FUNDS

Please complete this section to describe your intended use of SFR for the appropriations and ERRs identified in Section 1, reflecting the categories of SFR use that best describe your identified program and expenses.

1. Please select the categories that best describe your intended use of SFR (select all that apply).

COVID-19 Public Health and Economic Impacts (*Complete subsection 4A*)

Premium Pay to Essential Workers (*Complete subsection 4B*)

Investments in Infrastructure (*Complete subsection 4C*)

4A: COVID-19 Public Health and Economic Impacts

2. Do you plan to use SFR for the following COVID-19 response and prevention areas (select all that apply)?

Expenses related to vaccination programs and sites

COVID-19-related expenses of public hospitals, clinics, and similar facilities

COVID-19-related expenses in congregate living facilities, including skilled nursing facilities, long-term care facilities, incarceration settings, homeless shelters, residential foster care facilities, residential behavioral health treatment, and other group living facilities

Establishing temporary public medical facilities and capital investments in public facilities to meet pandemic operational needs

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Costs of COVID-19 testing and monitoring, contact tracing, monitoring of case trends, and genomic sequencing for variants

Emergency medical response expenses, including emergency medical transportation

Expenses for establishing/operating public telemedicine capabilities for COVID-19 treatment

Public communication efforts related to vaccination programs and enforcement of public health orders

Medical and protective supplies (PPE)

Disinfection of public areas and other facilities

Technical assistance to local authorities or other entities regarding COVID-19 mitigation efforts

Support for isolation or quarantine

Providing public employees with paid sick, family, and medical leave to comply with COVID-19 precautions

Treatment of long-term symptoms or effects of COVID-19

Improvement of ventilation systems in congregate settings or public facilities

Establishment or enhancement of public health data systems

Mental health treatment, substance misuse treatment, and other behavioral health services

Other:

3. Do you plan to use SFR to cover payroll expenses for public health and safety staff?

Yes No (skip a)

a. Please confirm that SFR will only be used for payroll and benefits of public safety, public health, health care, human services, and similar employees to the extent that their services are devoted to mitigating/responding to COVID-19 or using the administrative convenience below.

Yes No

Administrative convenience: Public health and safety employees may be considered entirely devoted to mitigating/responding to the COVID-19 emergency if the employee, or their operating unit or division, is primarily dedicated to responding to the COVID-19 emergency. You may consider other presumptions for assessing the extent to which an employee, division, or operating unit is engaged in COVID-19 activities, provided that you reassesses periodically and maintain records to support your assessment. Examples

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include payroll records, attestations from supervisors or staff, or regular work product or correspondence demonstrating work on the COVID-19 response.

- 4. Do you plan to use SFR to cover payroll and benefits of employees corresponding to time spent on administering COVID-19 funds?** *This includes, but is not limited to, costs related to disbursing payments of Fiscal Recovery Funds and managing new grant programs established using Fiscal Recovery Funds.*

Yes No

- 5. Do you plan to use SFR to improve design and execution of health, public health, or economic relief programs?** *This may include expenses for planning, analysis, targeted outreach, improvements to data or technology infrastructure, impact evaluations, or data analysis, in relation to these programs.*

Yes No

- 6. Do you plan to use SFR to address COVID-19 economic impacts (select all that apply)?**

Assistance to households economically impacted by COVID-19

(Presumptive eligibility: Households may be presumed to be impacted by COVID-19 if they experienced unemployment or increased food or housing insecurity, or if they are low-or moderate-income)

Assistance to impacted small businesses and non-profits to adopt safer operating procedures, weather periods of closure, or mitigate financial hardship resulting from the COVID-19 public health emergency

Aid to tourism, travel, and hospitality services industries for safe reopening and/or a planned expansion or upgrade of tourism, travel, and hospitality facilities delayed due to the pandemic

Payroll expenses for increase in State employees up to pre-pandemic level (i.e. increase to match the number of employees as of January 27, 2020), with supporting documentation

Contributions to State unemployment insurance trust funds

(up to the level needed to restore the pre-pandemic balances of such account as of January 27, 2020, or to pay back advances received for the payment of benefits between January 27, 2020 and the date when the Interim Final Rule is published in the Federal Register)

Other:

- 7. Do you plan to use SFR to address COVID-19 public health disparities and outcomes in any of the following areas (please select all that apply)?**

Programs/services that facilitate access to health and social services, including remediation of lead hazards and community violence intervention programs

Programs/services for supportive housing or services to improve access to stable, affordable housing among individuals who are homeless

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Development of affordable housing

Housing vouchers and assistance relocating to neighborhoods with higher levels of economic opportunity

Programs/services that address disproportionate COVID-19 impacts on education, including new or expanded early learning services; assistance to high-poverty school districts to advance equitable funding across districts and geographies; and educational and evidence-based services to address the academic, social, emotional, and mental health needs of students

Establishing new or expanded childcare

Home visitation programs by health professionals, parent educators, and social service professionals to individuals with young children to provide education and assistance for economic support, health needs, or child development

Services for child welfare-involved families and foster youth

Other:

a. Will these programs/services be provided exclusively in Qualified Census Tracts (QCTs)¹?

Yes No

b. Will these programs/services all be provided in Difficult Development Areas¹?

Yes No

c. For programs/services that will serve any individuals/areas outside of QCTs, please describe how the populations or areas you will serve are disproportionately impacted by the pandemic. Treasury requires that the State maintain supporting documentation for the determination of disproportionate COVID-19 impact to these populations, households, or geographic areas.

4B: Premium Pay

8. Will you provide premium pay to essential workers directly or to employers of essential workers?

Directly Third Party Employers

¹ U.S. Department of Housing and Urban Development (HUD), Qualified Census Tracts and Difficult Development Areas, <https://www.huduser.gov/portal/datasets/qct.html> (last visited Apr. 26, 2021);

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Source rehabilitation and decontamination

Storage, consolidation, and new systems development

Other water and sewer infrastructure projects aligned with eligibility guidelines of the Environmental Protection Agency's (EPA) Clean Water State Revolving Fund (CWSRF) or Drinking Water State Revolving Fund (DWSRF), as confirmed by the Vermont Department of Environmental Conservation

13. Do you plan to use SFR for broadband infrastructure projects?

Yes No (skip to Section 5)

a. Please confirm that the broadband project is targeting an unserved or underserved location.

Yes No

Note: The Interim Final Rule treats users as being unserved or underserved if they lack access to a wireline connection capable of reliably delivering at least minimum speeds of 25 Mbps download and 3 Mbps upload.

b. Will the service, upon completion, reliably meet or exceed symmetrical upload and download speeds of 100 Mbps?

Yes No (Please explain below)

Note: Eligible projects are expected to be designed to deliver service that reliably meets or exceeds symmetrical upload and download speeds of 100 Mbps. Exceptions exist when geography, topography, or excessive costs associated with a project impact the project's ability to meet this speed. In these instances, affected projects would be expected to be designed to deliver service that reliably meets or exceeds 100 Mbps download and between at least 20 Mbps and 100 Mbps upload speeds and scalable to a minimum of 100 Mbps symmetrical for download and upload speeds.

SECTION 5: RESTRICTIONS ON USE

1. Please confirm that:

SFR will not be used for deposits into pension funds (distinct from recurring payroll contributions to pension funds)

SFR will not be used for general infrastructure projects that are neither necessary in response to the COVID-19 public health emergency nor relate to water, sewer, or broadband.

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SFR will not be used for general economic development or general workforce development.

SFR will not be used as non-federal match for other Federal programs whose statute or regulations bar the use of Federal funds to meet matching requirements – e.g. State share of Medicaid and matching requirements of CWSRF and DWSRF.

SFR will not be used to replenish a budget stabilization fund, rainy day fund, or similar reserve account.

SFR will not be used to cover expenses under or pursuant to a settlement agreement, judgment, consent decree, or judicially confirmed debt restructuring plan in a judicial, administrative, or regulatory proceeding, except to the extent the judgment or settlement requires the provision of services that would respond to the COVID-19 public health emergency.

Your agency/department will not use funds for tax anticipation notes or to finance debt, including the payment of interest, principal, or fees associated with outstanding or new debt.

Excluding payments made to beneficiaries (as approved by the CFO), your agency/department will not provide advance payments to subrecipients and will instead fund expenses on a reimbursement basis only.

Your agency/department will use SFR in accordance with [Bulletin 5](#) and Uniform Guidance (2 CFR part 200), including cost principles and restrictions on general provisions for selected items of cost.

Your agency/department will maintain financial records and supporting documents related to the SFR award for a period of five years after all funds have been expended or returned to Treasury, whichever is later.

Your agency/department will obligate funds between March 3, 2021 and December 31, 2024, with a period of performance that can run up to December 31, 2026.²

2. If you left any of the boxes in this section unchecked, please provide additional justification.

3. Please provide any additional comments or information that you think may be relevant to our review if they have not been covered by other parts of this questionnaire.

² The Interim Final Rule defines an “obligation” as “an order placed for property and services and entering into contracts, subawards, and similar transactions that require payment.” (p. 134, accessed May 26, 2021).