



The Time is Now

Congress has made significant federal investments in the aging and disability network during the COVID-19 pandemic. [The Centers for Disease Control and Prevention has also invested in ADRCs.](#) The challenge is to **leverage this funding to drive evolution of our networks**, and to demonstrate accountability by telling our story through smart data collection.

1. **How can you seize this moment to build out your NWD System?** See [Opportunities to Leverage ARP Funds to Grow NWD Systems.](#)
2. **How can your NWD System help coordinate key partners for a thoughtful, data driven, collaborative response to COVID-19 and future emergencies?** See [Forming Lasting Partnerships](#) and [Strategies for Coordinating on Vaccine Outreach](#) for ideas!



Get Creative! Check Out Innovations from Your Peers on the Vaccine Outreach Discussion Board

- [Montana:](#) Leveraged friends, family, and faith-based leaders
- [D.C. and Louisiana:](#) Initiated door knocking campaigns
- [Michigan:](#) Launched in-home vaccinations in collaboration with several partners
- [Virginia:](#) Provided support to local ADRCs to encourage proactive outreach
- [American Samoa:](#) Targeted college students by waiving registration fees and have a jingle competition
- [Delaware:](#) Set up a warm transfer process from the state vaccination hotlines to the ADRC
- [Wisconsin:](#) Held monthly forums about health equity
- [Massachusetts:](#) Coordinated vaccination clinics for the Haitian community with staff who are fluent in Haitian Creole



Ideas to Get Funds Out Quickly

Georgia contracted with one AAA that serves as fiscal intermediary (FI) for the 12 AAAs and 9 CILs that received federal COVID-19 funding. The AAAs and CILs submitted all activities in a single invoice. The SUA reviewed the activities and forwarded approved invoices to the FI. **While issuing 21 contracts would have taken over 60 days, using one contract allowed quick access to funds.**

New Hampshire was able to distribute COVID-19 response grant funds quickly by amending an existing contract. Otherwise, acceptance of grant funds would have required both governor and legislative approval. The SUA reviewed and approved all plans with distribution based on infection rate, diversity, and health equity in each service area.

Oregon created a simple application process for local sites to encourage innovation. See the language they used and ACL guidance on the use of incentives [here.](#)



NWD Governance Matters. Blending and Braiding of Funding

Having a strong NWD governance structure in which state agencies responsible for aging, disability, and Medicaid coordinate together **allows for leveraging different funding sources by blending and braiding** funds to advance a state's access system.

Through such coordination, it is possible to leverage federal COVID-19 funding combined with other state, local, and federal sources to expand the reach of vaccine access efforts and for broader services and supports. For example, funds could grow community outreach staff, support building or enhancing information technology systems, initiate care transitions programs, or support coordination of state Medicaid programs. **Blending funds across programs or grant types can allow the NWD System to serve individuals of all ages and the full range of individuals with disabilities.** This also increases opportunities to sustain these efforts by leveraging Medicaid administrative funds or considering potential local hospital matching funds, for example.