

****This plan was presented to the SPARK Executive Committee at the September 10, 2021, meeting. SPARK approved this plan, but modified the distribution of funding from two tranches to one tranche of \$50M.**

SPARK Frontline Hospital Employee Retention Plan

Amount of Funding

\$30 million made available immediately pursuant to the State Finance Council's total appropriation of \$50 million. The additional \$20 million to be made available post SPARK review of implementation reports from recipients (see below).

Qualified Facilities

Any general or critical access hospital with an emergency department as defined under KSA 65-425.

Funding Allocation

Hospitals to apply for and receive funding based on their imputed percentage of total nursing resources among Qualified Facilities multiplied by \$30 million. The imputed percentage to be determined based on the following quotient:

FNR / TNR, where:

FNR equals the sum of (i) the number of licensed non-ICU beds divided by six and (ii) the number of ICU beds divided by two; and

TNR equals the sum of all the FNRs for Qualified Facilities in the state

Where hospitals have leased rated beds to other institutions that meet the definition of a Qualified Facility, the lessee shall be entitled to the funding allocation associated with the leased beds. In the event that the lessee is not a Qualified Facility, the rated beds shall be disregarded for the purposes of the FNR calculation for the lessor.

Once the funding allocation for a Qualified Facility is determined the Kansas Department of Health and the Environment (KDHE) is authorized to advance the funding to the Qualified Facility, subject to recoupment if it is not spent pursuant to this program including the compliance requirements defined below. KDHE shall be allocated up to 1% of the program amount to cover program administration. Such amount shall be deducted from each Qualified Facility's allocation.

Funding Utilization

The Qualified Facilities may use the funding for either Premium Pay as defined in ARPA or for funding a program designed by the Qualified Facility to improve the retention of nursing resources and support personnel at their Qualified Facility (a "Custom Retention Program").

Premium Pay may be distributed by the Qualified Facilities to frontline employees in the manner that they believe is most appropriate to ensure the retention of critical resources and the maintenance of staffed hospital beds.

Funding Restrictions

Funding under this program may only be utilized by the Qualified Facility to retain existing clinical staff (including nurses, and other frontline care employees), re-hire retirees who have retired since March 1, 2020 and are not working in a similar capacity at another healthcare institution in Kansas, and nurses and support personnel who are hired by the Qualified Facility as their first healthcare employer in Kansas (all such groups "Qualified Employees"). Nursing students who previously worked part-time or otherwise engaged in practicum-type experiences at a Kansas hospital who are subsequently hired by a Qualified Facility upon completion of their education shall not be excluded from the definition of Qualified Employees.

Funding is limited to up to \$13 per hour of work by a particular employee from September 1, 2021 and may not be applied retroactively prior to that date. Funding under this program must be spent by February 28, 2022. Individual payments cannot exceed \$25,000 in total.

Funding in Custom Retention Programs must be spent on pay and associated benefits of Qualified Employees.

Funding in both Premium Pay and Custom Retention Program must be spent in a manner that is additive to existing pay and benefit programs in place as of August 31, 2021.

Implementation Reporting

By October 31, 2021 and for each month thereafter, all Qualified Facilities receiving funding shall report the following to the Office of Recovery and the SPARK Committee:

1. The number of nurses on a full-time equivalence basis staffing ICU beds and non-ICU beds as of the most recent pay period ending prior to September 15, 2021, broken out by contract nurses and employees.
2. The number of nurses on a full-time equivalence basis staffing ICU beds and non-ICU beds as of the most recent pay period ending prior to or on October 31, 2021, broken out by contract nurses and employees.
3. How much of the money received by the Qualified Facility has been earned under the program to date.
4. The number of weeks the Qualified Facility has had the program in place.
5. The number of frontline clinical employees and nurses who left the employment of the Qualified Facility during the period from 6-1-2021 to 8-31-2021.

6. The number of frontline clinical employees and nurses who left the employment of the Qualified Facility during each month from September 1, 2021 to February 28, 2022.
7. For any terminations of clinical frontline workers and nurses from September 1, 2021 through February 28, 2022, the number of such terminations and the reason given for all voluntary and involuntary terminations.
8. All current Covid-related policies, e.g. testing policies, quarantine policies, and vaccine policies, and any changes thereto with the date such changes were announced and implemented.

ARPA Compliance

Each Qualified Facility shall be required to meet the compliance requirements as defined by ARPA and subsequent regulatory guidance. It should be noted that compliance requirements under a Custom Retention Program may be greater. Recipients electing to develop Custom Retention Programs should discuss compliance requirements in advance with the Office of Recovery to ensure appropriate ongoing data collection is taking place to meet the compliance requirements as defined by ARPA, 2 CFR Part 200, and subsequent regulatory guidance.