

LEGISLATIVE SUMMARY

Key Provisions of the COVID-19 Stimulus Packages

Throughout the month of March, Congress passed three stimulus packages in response to COVID-19. The Coronavirus Preparedness and Response Supplemental Appropriations Act, the Families First Coronavirus Response Act, and the Coronavirus Aid, Relief, and Economic Security (CARES) Act all have specific provisions to assist public health efforts and health care providers. NFPRHA has developed the following document to highlight provisions that are most likely to directly impact NFPRHA members.

FUNDING

- \$100 billion for reimbursement of health care entities for COVID-19 response (this includes public entities and Medicare- or Medicaid-enrolled providers).
 - Providers can be reimbursed for anything used to prepare for, prevent and respond to COVID-19. Funds can be used for: building temporary structures, medical supplies, PPE and testing supplies; increased workforce and trainings; and emergency operation centers.
 - Providers can apply on a rolling basis and will have to include a justification as to why they are applying for funds.
- \$1.3 billion in additional funding for federally qualified health centers (FQHCs) in response to COVID-19.
- \$350 billion in Small Business Administration (SBA) loan assistance for a Paycheck Protection Program (capped at 4% interest). All loans to small businesses would be forgiven if payrolls are maintained.
- Temporary 6.2% increase in federal payments to Medicaid for the states. This increase is available from when the public health emergency was declared on January 31, 2020 and last through the end of the quarter.

TELEHEALTH

- Relaxing Medicare (but not Medicaid) telehealth requirements to allow providers to treat their patients using e-visits with both video and/or audio for the duration of the public health emergency. The CARES Act also strikes down the requirement of a pre-existing relationship in order to facilitate Medicare telehealth services.
 - Given that Congress has not yet taken similar actions with Medicaid, NFPRHA is working with congressional champions to ensure parity between Medicaid and Medicare in emergency provisions put into place in the first three packages.
- FQHCs can now bill for telehealth services and will be paid based on payment rates that are similar to national average payment rates of the Medicare Physician Fee Schedule.
- If health care facilities wish to expand their telehealth services, the CARES Act reauthorizes HRSA grant programs that promote the use of telehealth technologies for health care delivery. This bill also reauthorizes HRSA grants to strengthen rural community health.

COVERAGE

- Coverage with no cost-sharing for COVID-19 testing in Medicare, Medicaid, and almost all private insurance plans including grandfathered plans. Short-term limited duration plans are not required to include this coverage.
- Hyde amendment abortion coverage restriction language was extended to some of the COVID-19 resources in the bill, including a state stabilization fund designed to help states and tribal organizations during the pandemic. This prevents the federal funding of this package from being used on abortions.

As of the release of this document (April 7, 2020), Congress has already committed to working on at least two more stimulus packages to support COVID-19 response and relief. The Senate has announced that it anticipates providing at least an additional \$200 billion, which could be voted on in the coming days for the Paycheck Protection Program. NFPRHA will continue to update this document as Congress passes additional stimulus legislation to support COVID-19 response and relief. If you have any questions or need additional information, please contact Mindy McGrath at mmcgrath@nfprha.org.