Legislative Response to COVID-19



Four new laws authorize and fund activities to respond to the short-term and long-term impacts of the COVID-19 pandemic on the health and well-being of American communities.

PHASE 1: EMERGENCY

On March 4, the House of Representatives passed H.R. 6074, the Coronavirus Preparedness and Response Supplemental Appropriations Act. The bill was passed in the Senate on March 5 and signed into law on March 6.

- **Centers for Disease Control and Prevention:** \$2.2 billion to support federal, state and local public health agencies, including:
 - o \$950 million for states, local governments, territories and tribes to conduct case monitoring and identification and other epidemiologic activities.
 - o \$300 million to replenish existing emergency funds.
 - o At least \$300 million for global disease detection and emergency response activities.
- **New Drugs and Vaccines:** Over \$3 billion to support research and development of new drugs and vaccines, including \$826 million for the National Institutes of Health.
- **Food and Drug Administration:** \$61 million to support the review and approval of new drugs and vaccines and to prevent potential shortages.
- **Community Health:** \$1 billion for local health agencies and community health centers to purchase medical supplies.
- **Worker Safety:** \$10 million for safety training for hospital employees and first responders.
- **Small Businesses:** \$1 billion in loans to support small businesses and non-profit organizations.
- **Economy and Security:** \$250 million to prevent economic and security impacts of COVID-19.
- **Global Health:** \$735 million for global prevention, response and humanitarian needs.

PHASE 2: MITIGATION

On March 14, the House of Representatives passed H.R. 6201, the Families First Coronavirus Response Act. This bill was passed by the Senate on March 18 and signed into law the same day.

- Supporting Nutrition Programs: \$1.15 billion for the Special Supplemental Nutrition Program for
 Women Infants and Children, the Emergency Food Assistance Program and the Senior Nutrition
 Program. Waives certain requirements of SNAP, WIC and the National School Lunch Program to
 expand access to nutrition services.
- Free Testing: Private health insurance, Medicare, Medicaid, TRICARE and Indian Health Service
 plans must offer COVID-19 testing at no cost-sharing to the consumer. Provides \$1 billion for
 National Disaster Medical System to reimburse for diagnostic tests administered to uninsured
 individuals.
- Medicaid Federal Matching Funds: Temporarily increases federal medical assistance by 6.2% for state Medicaid programs.
- Paid Sick and Family and Medical Leave: Requires government employers and small employers (less than 500 employees) to provide employees two weeks of paid sick leave. These eligible employees can take 12 weeks of job-protected paid leave for quarantine or care purposes. Creates a refundable tax credit for employers that offer paid sick leave and paid family leave and for self-employed individuals who need paid sick and family leave.
- Unemployment Benefits: Provides \$1 billion for states to process and provide unemployment benefits.
- Telehealth Services: Expands access to telehealth services under Medicare and waives some restrictions and requirements on such services.

PHASE 3: RECOVERY

On March 25, the Senate passed H.R. 748, the Coronavirus Aid, Relief and Economic Security Act. The bill was passed in the House on March 27 and signed into law the same day.

- Public Health Response: \$4.3 billion for CDC, including \$1.5 billion for state, local, tribal and
 other health agencies for surveillance, epidemiology, laboratory capacity, infection control and
 other preparedness and response activities. Includes \$300 million for the Infectious Disease Rapid
 Response Reserve Fund, \$500 million for global disease detection and \$500 million for CDC public
 health data surveillance and analytics infrastructure modernization activities.
- **Supporting Hospitals:** \$100 billion for hospitals, with an additional \$40 billion for providing personal and protective equipment for health care workers, testing supplies, increased workforce and training, accelerated Medicare payments, and supporting the CDC.
- Medical Supplies: \$16 billion for the Strategic National Stockpile and \$3.5 billion for the Biomedical Advanced Research and Development Authority, or BARDA, to manufacture, produce and purchase vaccines, therapeutics and diagnostics.

- **Unemployment:** \$250 billion expansion of unemployment benefits that expands eligibility and offers workers an additional \$600 per week for four months.
- **Supporting Small Businesses:** \$350 billion in assistance and emergency loans for small businesses. Businesses using these funds to pay employees are eligible for loan forgiveness.
- **Direct Payments:** Taxpayers will receive payments of \$1,200 (\$2,400 for couples) with an additional \$500 per child. Benefits begin to phase out at \$75,000 in individual earnings.
- **Industry Bailout:**\$425 billion in a Federal Reserve fund for industry bailouts with strict oversight of how these funds are dispersed.
- **Disaster Relief:** \$45 billion for FEMA disaster relief fund.
- Tax Relief: Offers individuals an option to delay 2020 payroll taxes until 2021 or 2022.

PHASE 3.5: CONTINUED RECOVERY

On March 25, the Senate passed H.R. 748, the Coronavirus Aid, Relief and Economic Security Act. The bill was passed in the House on March 27 and signed into law the same day.

- **Supporting Hospitals:** \$75 billion to reimburse hospitals and medical providers for COVID-19 related expenses and lost revenue.
- **Testing:** \$25 billion to research, manufacture, purchase and expand COVID-19 testing capacity. This includes: \$11 billion for states, local and tribal governments to administer tests and contact tracing; \$2 billion provided to states through Public Health Emergency Preparedness grants; \$1.8 billion provided to NIH for testing research and development; \$1 billion provided to CDC for surveillance, epidemiology, contact tracing, and other activities to support testing; \$1 billion for BARDA to research, develop and purchase tests; \$1 billion to cover the cost of testing for uninsured individuals; \$825 million for community health centers; and \$750 million provided to tribes and tribal organizations for diagnostic testing.
- **Small Businesses:** Replenishes the Paycheck Protection Program created in the CARES Act with an additional \$310 billion in loans to help small businesses cover payroll and other expenses.

APHA stands ready to work with Congress and the administration to support additional funding and resources to protect the health of all our communities from the COVID-19 pandemic.

