

H.R. 6800 – The HEROES Act

Summary of Key Policies

Strengthens our Nation’s Comprehensive Testing and Contact Tracing Infrastructure.

- Provides \$75 billion in grants to state, local, Tribal, and territorial health departments to support testing, contact tracing, and isolation or quarantine with special consideration for a grantees burden of disease, need for surge mitigation, and intention to serve populations experiencing disparities.
- Requires the Centers for Disease Control and Prevention (CDC) to coordinate with states and public health jurisdictions to establish a coordinated, evidence-based testing system that ensures equitable access across race, ethnicity and geography. The updated strategic testing plan must include specific plans and benchmarks with clear timelines.
- Requires that public health jurisdictions establish culturally competent and multilingual contact tracing strategies.
- Encourages engagement with community-based organizations to support the recruitment, training and placement of individuals in COVID-19 contact tracing and related positions, with a focus on recruiting from impacted local communities, building a culturally competent workforce.
- Creates centralized, national reporting of testing capacity and results and mandates state-level transparency into testing plans and available test sites.
- Supports multilingual and culturally appropriate public awareness campaigns and research, including a focus on health disparities and populations experiencing inequity.

Provides Stable and Affordable Health Coverage for Millions of Americans.

- Provides subsidies for the cost of COBRA premiums to allow workers to maintain their employer-sponsored coverage if workers lose employment or been furloughed as a result during this economic downturn.
- Allows State Medicaid programs to cover COVID-19 treatment for uninsured patients.
- Establishes special enrollment periods for Medicare beneficiaries and individuals seeking coverage through the Affordable Care Act (ACA) exchanges.

Ensures All Americans Can Access COVID-19 Treatment Without Concern for Cost.

- Eliminates cost sharing for COVID-19 treatment for Medicaid and Medicare beneficiaries as well as those covered by private health insurance.
- Requires coverage of items and services related to the treatment of COVID-19 in group and individual market health plans and waives cost-sharing requirements for consumers.
- Establishes zero cost sharing for COVID-19 treatment for TRICARE, Veterans and Federal Civilians.
- Mandates coverage of the COVID-19 vaccine with no cost-sharing for beneficiaries under the Medicaid program, to align with free coverage of the vaccine in private insurance and in the Medicare program established in the CARES Act.

- Requires that Part D drugs intended to treat COVID-19 are covered for Medicare patients without cost-sharing or utilization management requirements.

Stabilizes and Reinforces America's Public Health System.

- Makes important supply chain improvements, such as strengthening reporting requirements for device and drug manufacturers to help respond to critical supply shortages.
- Invests in vaccine manufacturing capacity and requires the Department of Health and Human Services (HHS) to create a plan to distribute and administer vaccines to stop the spread of COVID-19 once such vaccines are developed and authorized.
- Improves strategic national stockpile management, maintenance and oversight as well as financial stability.
- Authorizes additional funding for the Medical Reserve Corps (MRC) which is a national network of local volunteer units who engage their local communities to strengthen public health, reduce vulnerability, build resilience, and improve preparedness, response, and recovery capabilities.
- Establishes a loan repayment program to enhance recruitment and retention of state, local, tribal, and territorial public health department workforce.

Supports our Hospitals and Frontline Health Care Providers.

- Appropriates an additional \$100 billion into the provider relief fund and includes clear guidance to ensure that funds are distributed to providers in the most equitable and efficient way. Providers will be reimbursed on a quarterly basis for all COVID-19-related expenses and a portion of their lost revenues.
- Increases payments to facilities that serve a high proportion of Medicaid patients through September 30, 2021.
- Improves the Accelerated and Advance Payment Program that has been critical to keeping providers afloat for the past few months. This bill would lower the loans interest rate, extend the payment period, and lower the amount of per claim recoupment. It also ensures that Part B premiums are not negatively impacted by this program.
- Provides enhanced traditional Medicare payments to cover excess costs hospitals incur for more expensive COVID-19 patients.
- Allows early Medicaid enrollment for individuals that are soon to be released from prison, some of the most hard-hit facilities in the pandemic, so that individuals can have access to healthcare upon release.

Supports State Governments and Their Medicaid Programs.

- Increases the Federal Matching Assistance Percentage (FMAP) by 14 percentage points through June 30, 2021. At a time of financial instability, this would ensure State governments have the resources they need to continue providing critical services.
- Delays the implementation of the Medicaid Financial Accountability Rule (MFAR).

- Increases the FMAP by 10 percentage points for State Medicaid services that keep patients in home and community-based care and not in crowded facilities.

Protects Our Nation’s Vulnerable Nursing Homes.

- Creates incentives for the establishment of COVID-19-specific nursing home facilities and provides new safety and quality protections for patients.
- Improves care at nursing facilities by directing HHS to allocate money to the states to create strike teams to help facilities manage outbreaks when they occur.
- Requires Medicare’s Quality Improvement Organizations to provide infection control support to nursing homes struggling with COVID-19 outbreaks.
- Ensures skilled nursing facilities have a means for residents to conduct “televisitation” with loved ones while in-person visits are not possible during the COVID-19 emergency.
- Requires HHS to publicly report demographic data on COVID-19 cases in nursing homes on *Nursing Home Compare*.