Coronavirus Aid, Relief, and Economic Security Act (CARES)

- The <u>CARES Act</u> was passed by Congress with overwhelming, bipartisan support and signed into law on March 27, 2020.
- Over \$2 trillion is authorized to protect the American people from public health and economic impacts of COVID-19.
- Learn more about the Act and link to further information.

Health-Related Provisions of the CARES Act

The CARES Act appropriations are divided into two Divisions: A and B. Division A contains appropriations that authorize programs and specify mandatory spending. Division B lists discretionary funds available for emergency use.





Extensions and changes to Health and Human Services programs including Medicare, Medicaid, CCBHCs, and others.

Expansion of telehealth services.

Relief funds to territories and tribes.

emergency funds include:

- Substance Abuse and Mental Health Services Administration
- Centers for Medicare & Medicaid Services
- Administration for Community Living
- Office of Special Needs
- Veterans Health Administration

Division A Health-Related Provisions



The CARES Act includes several provisions to encourage broader use of <u>telehealth services</u>, including:

- \$29 million annually from 2021-2025 for telehealth network and telehealth resource centers grant programs to fund technology in medically underserved and rural areas, and reduce limiting requirements for grants (section 3212).
- \$79.5 million annually from 2021-2025 for rural community health (section 3213).
- Coverage of telehealth services before the deductible is met in certain highdeductible health plans (section 3701).
- Increases in Medicare telehealth flexibility during this emergency period (section 3703).
- Improvements to Medicare telehealth services for FQHCs and rural health clinics (section 3704).
- Contracts and short-term agreements with telecommunications providers to expand telemental health services for veterans during this public health emergency (section 2004).

Medicare

Provisions regarding Medicare in the CARES Act:

- Appropriates \$20 million for FY 2020 to extend funding for health care quality measurement and performance improvement activities (section 3802).
- Extension of funding for outreach and assistance programs serving low-income individuals (section 3803) including:
 - \$13 million for State Health Insurance Programs
 - \$7.5 million for Area Agencies on Aging
 - \$5 million for Aging Disability and Resource Centers
 - \$12 million for the National Center for Benefits and Outreach Enrollment
- Other changes including elimination of some requirements related to face-to-face encounters and delays in certain scheduled payment reductions.



Medicaid

- Extension and expansion of the Certified Community Behavioral Health Clinics (CCBHC) Demonstration Program through November 30, 2020, and authorization for HHS to fund two additional states (section 3814).
- Delay of reduction in state Medicaid DSH allotments (section 3813).

Other notable provisions:

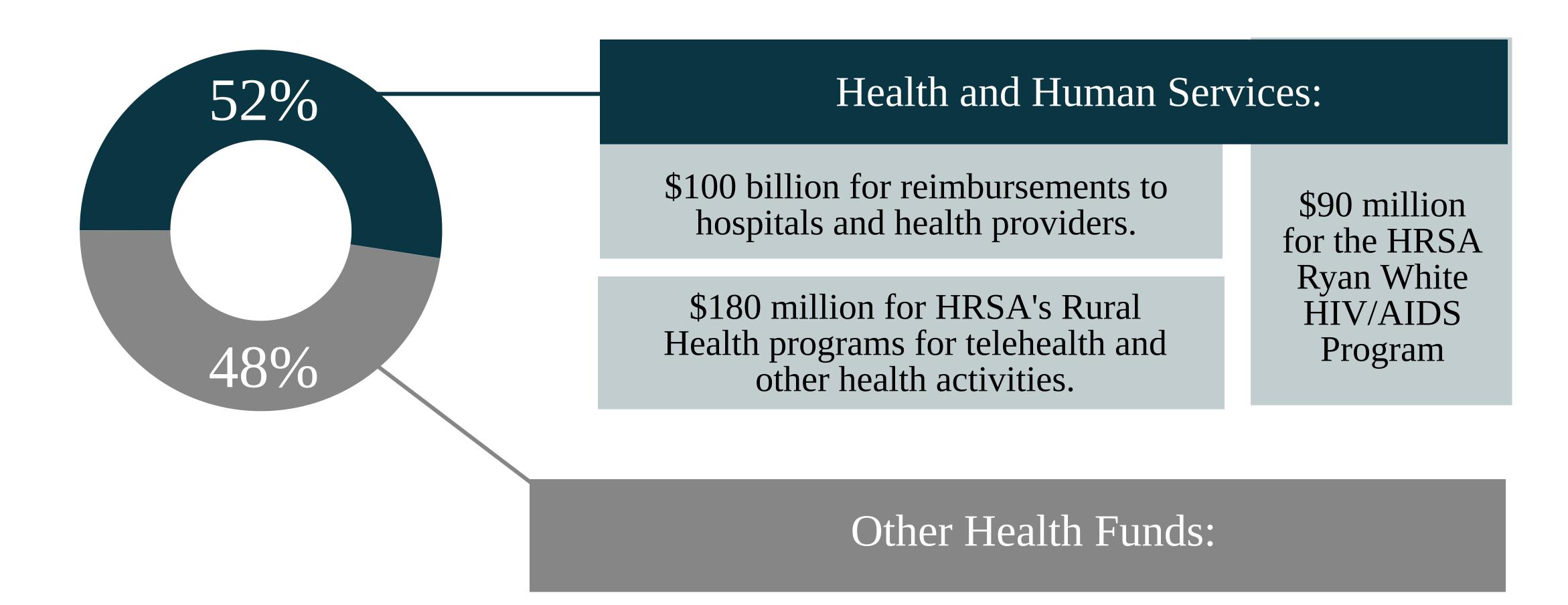
• Community Health Center funding is extended (section 3831).

• Health professions workforce programs are reauthorized and supplemental funding is granted to train workers in rural and underserved areas, prioritizing the fields of *substance use*, *geriatrics*, and *maternal and child health* (section 3401).

- Privacy laws are modified:
 - Certain HIPAA confidentiality and disclosure provisions relating to substance use disorder are incorporated into existing regulations (section 3221).
 - New guidance is provided regarding sharing PHI during public health emergencies (section 3221).
- \$150 billion is provided for payments to states, territories, and tribes for amounts spent in response to the COVID-19 crisis (section 5001).

Division B Health-Related Provisions

Overall, there are more than \$242 billion available for health-related emergency and discretionary funds, over half of which are dedicated to the U.S. Department of Health and Human Services.



Other Provisions

\$4 billion to the Office of Special Needs Assistance to provide Homeless Assistance Grants

\$17 billion to the Veterans Health Administration for medical care and other services.

\$955 million to Aging and Disability Services:

- \$820 million for supportive, nutritional, and caregiver services
- \$85 million for Centers for Independent Living
- \$50 million for resource centers for COVID-19 response

\$1.3 billion to Indian Health Services for telehealth, public health support, and other activities to protect patients and staff.

\$200 million to the Centers for Medicare and Medicaid Services.

\$425 million to the <u>Substance Abuse and Mental Health</u> Services Administration:

- \$250 million for the CCBHC Expansion Grant Program.
- \$50 million for suicide prevention programs.
- \$100 million in grants/contracts/cooperative agreements to public health entities to address emergency substance abuse or mental health needs in local communities.
- \$15 million for tribes and tribal organizations.

SOURCE:

Kaiser Family Foundation. *The Coronavirus Aid, Relief, and Economic Security Act: Summary of Key Health Provisions*. April 9, 2020.

Brought To You By:

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