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Congress Expected to Pass More Emergency Legislation Related to COVID-19

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This morning the House leadership released HR 6201 titled, “Families First Coronavirus Response Act.” The 124-page bill is [here](#), a summary is [here](#).

The House is expected to vote on this legislation today.

Here are the provisions relevant to health care providers. Additional HR 6201 provisions concern emergency food relief, i.e., Division A, Title I and Title II and Division B, Title I, Title II and Title III.

Division C, Title I: COVID-19 Emergency Temporary Standard (ETS)

Would require OSHA or the CDC to issue within 30 days an ETS regarding infectious disease exposure control plans to protect health care workers. The ETS shall be based on the CDC’s previous 2007 SARS guidelines.

Division C, Title II: Medicare

Would require hospitals and SNFs to comply with the ETS as a condition of receiving Medicare funds/reimbursement.

Division D, Section 602: Emergency Paid Leave Benefit

Would create a new federal emergency paid leave benefit program that would provide 14 or more days of leave for a qualifying COVID-19-related reason. Regular sick or paid time off and unemployment compensation would not count as leave for purposes of this benefit.

Division F: Paid Sick Days for Public Health Emergencies and Personal and Family Care Act

Would provide an additional 14 days of paid sick for any public health emergency including COVID-19. Covers days when one’s child’s school is closed due to a public health emergency, when an employer is closed or if a family member is quarantined. Reimburses small businesses, defined as 50 or fewer employees, for the cost of providing the additional 14 days.

Division G: Health Provisions

Section 101 would require private health plans to cover COVID-19 diagnostic testing including the cost of a provider, ED or urgent care center visit, coverage must be provided at no cost to the consumer.

Sections 102-104 would require Medicare Part B, Medicare Advantage and Medicaid to cover COVID-19 diagnostic testing, the cost of the visit and with no out of pocket costs to the beneficiary. Section 104 also would allow states to extend Medicaid eligibility to uninsured populations for the purpose of COVID-19 testing. The federal government would provide a 100% match for state Medicaid COVID-19 testing.

Section 105 would require the National Disaster Medical System to pay for COVID-19 testing provided to uninsured individuals.

Section 106 would require certain respiratory protective devices to be covered under the PREP Act Declaration for the purposes of emergency use during the COVID-19 outbreak.

Section 107 would ensure TRICARE-covered individuals have coverage for COVID-19 testing. Section 108 would ensure Native Americans and Alaskan Natives are covered even if referred to care away from the Indian Health Service or tribal health care facility.

Section 109 would provide a temporary increase to FMAP for the duration of the public health emergency for COVID-19.

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