



Federal COVID-19 Funding Checklist for Health Systems

Current as of **June 25, 2021, 9:00 a.m. EDT**

UPDATED INFORMATION IN RED

This document outlines the major financial opportunities related to COVID-19 contained in the Consolidated Appropriations Act (P.L. 116-260) and the American Rescue Plan (P.L. 117-2). Funding from the previous COVID-19 relief bills enacted in 2020 is identified on our prior versions of the Federal Regulatory, Statutory COVID-19 Checklist for Health Systems. For additional information contact any of the following Strategic Health Care senior staff: paul.lee@shcare.net; devon.seibert-bailey@shcare.net; diane.turpin@shcare.net; david.introcaso@shcare.net or 202-266-2600.

OPEN APPLICATION PERIODS:

more details in the chart below

COVID-19 Coverage Assistance Fund (CAF) – Providers may apply for reimbursement for administering vaccines to patients enrolled in health plans that do not cover vaccines or cover them with patient cost sharing. Click [here](#) for more details and see chart below.

Eligible consumers (such as patients with telehealth needs) may apply for the Emergency Broadband Benefit program beginning on May 12, 2021. Click [here](#) for details, [here](#) for a fact sheet. The program ends when the fund runs out of money or six months after the PHE ends, whichever is sooner.

Applications for the Pediatric Mental Health Care Access grant (telehealth) opened on May 19 and will close on July 6, 2021. Click [here](#) for the notice and [here](#) for the press release. Award ceiling of \$445,000.

For the Consolidated Appropriations Act – click [here](#); click [here](#) for the SHC summary. This Act also extends the deadline to December 31, 2021 for state and local governments to spend funding from the Coronavirus Aid, Relief, and Economic Security (CARES) Act Coronavirus Relief Fund.

For the American Rescue Plan – click [here](#); click [here](#) for Title-by-Title summary; click [here](#) for the SHC summary on the new fund for rural providers.

In addition to the itemized health care funding in the chart below, state and local governments will receive the following amounts which may ultimately flow to providers:

- \$350 billion to help states, counties, cities and tribal governments cover increased expenditures, replenish lost revenue and mitigate economic harm from the COVID-19 pandemic;
 - Funds may be used to cover costs incurred by December 31, 2024;
 - Funds to be distributed in 2 tranches, with 50% to be delivered no later than 60 days from enactment (March 11, 2021), and the remainder no earlier than 1 year later;
 - States have to distribute funds to smaller towns within 30 days of receiving a payment from the department or pay back any undistributed funds;
- \$195.3 billion to states and the District of Columbia:
 - \$25.5 billion equally divided to provide each state a minimum of \$500 million;
 - \$169 billion allocated based on the states' share of unemployed workers over a 3-month period from October - December 2020.
- \$130.2 billion to local governments
 - \$65.1 billion for counties
 - \$45.6 billion for metropolitan cities
 - \$19.5 billion for towns with fewer than 50,000 people
- \$4.5 billion to US territories
- \$20 billion to tribal governments
- \$10 billion for a Coronavirus Capital Projects Fund to carry out projects to support work, education and health monitoring, including remote options, in response to the PHE. Click [here](#) for more details. Treasury will issue more guidance before the application period opens this summer.
- The Treasury Department portal for state and local governments to request funding is now open. Click [here](#) for the website, [here](#) for the Fact Sheet and [click here for FAQs updated 6/24](#). Click [here](#) for the final allocations for state, [here](#) for counties and [here](#) for metropolitan cities. Click [here](#) to see if your state receives the funding in one or two tranches. Click [here](#) for the Interim Final Rule – public health uses are discussed on page 10. The non-inclusive list of permissible uses includes COVID-19 mitigation and prevention; medical expenses, behavioral health care, public health and safety staff, improvements to design and execution of health and public health programs and addressing disparities in public health outcomes. In addition to responding to the public health emergency and its negative economic impacts funds may be used to provide premium pay to essential workers; to provide government services to the extent of eligible governments' revenue losses; and to make necessary water, sewer and broadband infrastructure investments. Click [here](#) for a quick reference guide on the allowable uses of the funds.
- States are eligible for a temporary 10 percentage point increase to the FMAP for certain Medicaid home and community-based services (HCBS) from April 1, 2021 through March 31, 2022. States must meet certain program eligibility requirements defined in the guidance. Click [here](#) for the press release and [here](#) for the guidance.

- \$20 million in funding to support State-based health care marketplaces – states can apply for funds by July 20 to help modernize or update their systems, programs, or technology to comply with federal Marketplace requirements. Click [here](#) for the press release.

For general overviews of COVID-19 funding by government agency:

HHS – For a great visual of all the funding by each appropriations bill through 2020, total amounts awarded to each state and beneficiaries in each state - click [here](#)

CDC - Financial Resources Webpage - click [here](#)

COVID-19 State, Tribal, Local and Territorial Funding Update – click [here](#)

COVID-19 General Funding and Grants FAQs – click [here](#)

Federal Office of Rural Health Policy - Overview of COVID-19 Funding - click [here](#)

Targeted Health Care Funding for Providers

Funding, Grants, and Loans				
What is it?	What does it do?	Key Points	Entities Effected	Status
\$8.5 billion in grants for rural health care providers	<p>Additional grants for hospital and health care providers to be reimbursed for health care related expenses or lost revenue incurred in 2020 directly attributable to the COVID-19 PHE.</p> <p>On 5/3 HRSA announced a new program, the Coverage Assistance Fund, to cover costs of administering vaccines to patients enrolled in health plans that do not cover vaccines or cover them with patient cost sharing.</p>	<p>In the American Rescue Plan – Sec. 9911</p> <p>Uses same definitions of health care related expenses/lost revenue as the Provider Relief Fund.</p> <p>Requires providers to apply for reimbursement through a portal.</p> <p>To be administered separately from the Provider Relief Fund.</p>	Rural hospital and health care providers. Click here for detailed memo from SHC.	Awaiting details from HRSA.

	Providers are to apply through a portal to be reimbursed at Medicare rates. CAF, funded through the Provider Relief Fund, will accept claims dated on or after December 14, 2020. Click here for the press release and here for more details, including the portal, fact sheet and FAQs.			
\$3 billion in additional grants for hospital and health care providers	Reimbursements for health care-related expenses or lost revenue directly attributable to the PHE.	In the Consolidated Appropriations Act - Division M Title III	Acute Care Facilities Post-Acute Physicians	Part of the Provider Relief Fund distribution via HRSA
\$24 billion remaining in Provider Relief Fund	<p>Estimate of funds awaiting distribution for health care-related or lost revenue directly attributable to the PHE. Includes uninsured relief fund payment. Click here for press release regarding payment of over 5 million claims to health care providers for administering COVID-19 vaccines to uninsured individuals.</p> <p>\$4.8 billion of the remaining funds to be allocated for COVID-19 testing of the uninsured.</p>	<p>Initially established in the CARES Act</p> <p>Click here for revised FAQs (6/11/21) Click here for the revised post-payment reporting requirements (6/11/21)</p> <p>Click here for PRF distributions Click here for PRF distributions by state; and Click here for complete database of recipients Click here for HRSA uninsured program</p> <p>Click here for the 5/25 press release.</p>	Acute Care Facilities Post-Acute Physicians SNFs Nursing Homes RHCs Tribal hospitals, clinics, and urban health centers	Part of the Provider Relief Fund distribution via HRSA
\$8.75 billion to CDC for vaccines	Supports federal, state, local, territorial and tribal public health agencies to distribute, administer, monitor, and track coronavirus vaccination to ensure	<p>In the Consolidated Appropriations Act</p> <p>CDC provided \$3 billion out of the \$8.75 billion that should be hitting states about now. Click here</p>	Funding largely to flow through state and local public health departments	1 st payment to states happened in February 2021. Keep tabs on your

	<p>broad-based distribution, access, and vaccine coverage, including:</p> <p>\$4.5 billion for State, local, Territorial, and Tribal Public Health Departments; and</p> <p>\$300 million for a targeted effort to distribute and administer vaccines to high-risk and underserved populations, including racial and ethnic minority populations and rural communities.</p>	<p>for a state-by-state breakdown of funds. Click here for the CDC general announcement which includes information about another \$19 billion being made available for testing, tracing, etc.</p>		state and local public health department
\$8.5 billion to CDC for vaccine activities	<p>Supplemental funding opportunity for state, locality and territorial vaccine distribution grants</p> <p>On 5/13, \$3.4 billion to create a new grant program for new hires in state and local public health departments; also includes \$500 million for school nurses and \$400 million to launch Public Health Americorps, \$245 million for the Epidemic Intelligence Service and \$337 million for the public health laboratory workforce. Click here for the White House statement.</p>	<p>In the American Rescue Plan – Sec. 2301</p> <p>Funds for CDC to (1) conduct activities to enhance, expand, and improve nationwide COVID–19 vaccine distribution and administration, including activities related to distribution of ancillary medical products and supplies related to vaccines; and (2) provide technical assistance, guidance, and support to, and award grants or cooperative agreements to, State, local, Tribal, and territorial public health departments for enhancement of COVID–19 vaccine distribution and administration capabilities, including— (A) the distribution and administration of vaccines; (B) the establishment and expansion, including staffing support, of community vaccination centers, particularly in underserved areas; (C) the deployment of mobile vaccination units, particularly in underserved areas; (D) information technology, standards-based data, and reporting enhancements, including improvements necessary to support standards-based sharing of data related to vaccine distribution and vaccinations</p>	Flows to state, local and territorial public health departments	Keep tabs on your state and local public health department

		<p>and systems that enhance vaccine safety, effectiveness, and uptake, particularly among underserved populations; (E) facilities enhancements; (F) communication with the public regarding when, where, and how to receive COVID–19 vaccines; and (G) transportation of individuals to facilitate vaccinations, including at community vaccination centers and mobile vaccination units, particularly for underserved populations.</p> <p>Sec. 2302 Includes \$1 billion for vaccine confidence activities.</p>		
\$10 billion for vaccines in underserved communities	<p>Includes approximately \$6 billion for community health centers, \$3 billion through the CDC to increase vaccine confidence and \$330 million to invest in community health workers.</p> <p>Includes grants and cooperative agreements for FQHCs and certain qualified entities under sections 4 and 6 of the Native Hawaiian Health Care Improvement Act</p> <p>\$150 million for 100 Health Center Program look-alikes (LALs) – applications due 5/14 - click here for press release, here for list of applicants eligible to apply and here for how to apply</p> <p>\$1 billion to support construction, expansion, alteration, renovation, and</p>	<p>In the American Rescue Plan – Sec. 2601</p> <p>Click here for the fact sheet and here for HRSA's state-by-state graphic identifying the allocation of funds. For additional details on grant submissions, a webinar and slide deck, click here.</p> <p>Click here for press release.</p> <p>Funds(1) to plan, prepare for, promote, distribute, administer, and track COVID–19 vaccines, and other vaccine-related activities; (2) to detect, diagnose, trace, and monitor COVID–19 infections and related activities necessary to mitigate the spread of COVID–19, including activities related to, and equipment or supplies purchased for, testing, contact tracing, surveillance, mitigation, and treatment of COVID–19; (3) to purchase equipment and supplies to conduct mobile testing or vaccinations for COVID–19, to purchase and</p>	CHCs, FQHCs	<p>HRSA</p> <p>For construction /renovation funding, apply to HRSA by 5:00 p.m. ET on Thursday, June 24, 2021. Click here for details.</p>

	<p>other capital improvements to modify, enhance, and expand health care infrastructure at community health centers for an estimated 1,376 awards. Click here for the press release. Applications are due in HRSA's Electronic Handbooks by 5:00 p.m. ET on Thursday, June 24, 2021. Click here for the Notice of Funding Opportunity; click here for details, including information on webinars 5/6 and 5/18.</p> <p>On 4/29 HRSA awarded \$32 million to 122 organizations that provide training and technical assistance support to HRSA Health Center Program-supported health centers. Click here for press release with links to awardees.</p> <p>Effective June 8, CMS will pay an additional \$35 for vaccines administered in patients' homes. Click here for details.</p>	<p>maintain mobile vehicles and equipment to conduct such testing or vaccinations, and to hire and train laboratory personnel and other staff to conduct such mobile testing or vaccinations, particularly in medically underserved areas; (4) to establish, expand, and sustain the health care workforce to prevent, prepare for, and respond to COVID– 19, and to carry out other health workforce-related activities; (5) to modify, enhance, and expand health care services and infrastructure; and (6) to conduct community outreach and education programs activities. Covers expenditures from onset of PHE to the end.</p>		
<p>\$22.4 billion for the Public Health & Social Services Emergency Fund to support testing, contact tracing</p>	<p>Includes funding for other activities to monitor and suppress COVID-19, including reimbursement for health care related expenses or lost revenue attributable to COVID-19.</p> <p>On 5/4, HHS announced \$1 billion for rural COVID-19 response to include:</p> <ul style="list-style-type: none"> \$460 million to more than 4,600 RHCs – up to \$100,000 per RHC-certified clinic site; funds to be 	<p>In the Consolidated Appropriations Act – Title III</p> <p>Includes \$2.5 billion for a target effort in high-risk and underserved populations, including racial and ethnic minority populations and rural communities.</p> <p>Includes support for workforce to scale up academic, commercial, public health, and hospital laboratories, and community-based testing sites, mobile testing units, health care facilities, and other entities engaged in COVID–19 testing, and other related activities related to COVID–19 testing.</p>	<p>Funding largely to flow through state and local public health departments</p>	<p>Keep tabs on your state and local public health department</p> <p>Click here for details on the RHC Vaccine Confidence</p>

	<p>issued this summer. On 6/11 HRSA announced \$424.7 million distributed - click here for the press release and here for breakdown by state. Another \$35.3 million to be disbursed later this summer.</p> <ul style="list-style-type: none"> • \$398 million to existing SHIP grantees to work with approximately 1,730 small rural hospitals and CAHs (up to \$230,000 per hospital, on COVID-19 testing and mitigation. Funds to be issued later in the year. Click here for the press release. • \$100 million in grants to eligible RHCs to address health equity gaps through the Rural Health Clinic Vaccine Confidence Program (RHCVC). Click here for details on the RHC Vaccine Confidence program – applications for up to \$50K due June 23. • HRSA is inviting Medicare-certified RHCs to join the new Rural Health Clinic COVID-19 Vaccine Distribution (RHCVD) Program to directly receive vaccines from the Biden 			<p>program – applications for up to \$50K closed.</p>
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	<p>Administration. HRSA and CDC will continue to enroll interested RHCs to receive COVID-19 vaccines, the allocation for which is separate from jurisdictions' weekly allocations.</p> <p>Click here for the press release.</p>			
<p>\$7.66 billion for public health workforce expansion</p>	<p>Funding for state, local and territorial public health departments to establish, expand and sustain their public health workforce.</p> <p>\$100 million for Medical Reserve Corps.</p> <p>\$250 million for community-based workforce to increase vaccinations in underserved communities – click here for press release, here for details on applying. On 6/14 HRSA announced the first round of funding of \$125 million - Click here for press release and here for awardees. Additional awards expected in July.</p> <p>\$4.4 billion to surge public health staff for the COVID-19 response. Click here for the White House statement from 5/13.</p> <p>\$80 million to establish a Public Health Informatics & Technology Workforce Development Program – click here for the press release.</p>	<p>In the American Rescue Plan – Sec. 2501</p> <p>Funding for costs, including wages and benefits, related to the recruiting, hiring, and training of individuals to serve as case investigators, contact tracers, social support specialists, community health workers, public health nurses, disease intervention specialists, epidemiologists, program managers, laboratory personnel, informaticians, communication and policy experts who are employed by the State, territorial, or local public health department involved; or (ii) a nonprofit private or public organization with demonstrated expertise in implementing public health programs and established relationships with such State, territorial, or local public health departments, particularly in medically underserved areas.</p>	<p>Largely state and local public health departments; nonprofit private or public organization with public health expertise</p>	<p>Keep tabs on your state and local public health department.</p> <p>Application for the Community-Based Workforce for COVID-19 Vaccine Outreach Program closed.</p>

<p>\$47.8 billion for testing and tracing activities</p>	<p>For testing to contain the virus and mitigate its effects, hire staff for contact tracing, provide PPE for frontline health workers, and take other steps to combat the virus, such as enabling isolation and quarantine. On 4/16, the administration announced \$1.7 billion to be used to fight COVID-19 variants:</p> <ul style="list-style-type: none"> • \$1 billion to expand genome sequencing; • \$400 million to support innovation initiatives including the launch of new innovative Centers of Excellence in Genomic Epidemiology; • \$300 million for National Bioinformatics Infrastructure <p>The first tranche of funding will be distributed to states beginning in May. Click here for the details by state.</p>	<p>In the American Rescue Plan - Sec. 2401</p> <p>HHS to use funds in part to provide grants to state, local public health departments for activities to detect, diagnose, trace, and monitor infections and related strategies and activities to mitigate the spread of COVID–19; to establish and expand testing and contact tracing capabilities, including through investments in laboratory capacity, such as academic and research laboratories, or other laboratories that could be used for processing of COVID–19 testing; community-based testing sites and community-based organizations; or mobile health units, particularly in medically underserved areas; (award grants to, or enter into cooperative agreements or contracts with, State, local, and territorial public health departments to establish, expand, and sustain a public health workforce</p>	<p>Largely state and local public health departments; academic and research labs or other labs that could be used for testing; community-based organizations; mobile health units</p>	<p>Keep tabs on your state and local public health department</p>
<p>\$7 billion for broadband</p>	<p>Expands access for students, families, and unemployed workers.</p> <p>Includes \$250 million for FCC’s COVID-19 telehealth program for health care providers’ telecommunications services and connected devices and \$300 for rural broadband.</p>	<p>In the Consolidated Appropriations Act – Title IX, sec. 903</p> <p>FCC’s grant application window is open from 4/29 at 12:00 PM ET through 12:00 PM ET on 5/6. Click here for the public notice with details. Application window closed 5/6.</p> <p>Click here for the press release and here for the report and order.</p>	<p>Acute Care Facilities Post-Acute Physicians</p>	<p>Apply for the FCC’s COVID-19 telehealth program from 4/29 to 5/6.</p> <p>Emergency Broadband</p>

	<p>For details on all broadband funding opportunities, click here for a slide presentation from HRSA. Patients may be eligible for the Emergency Broadband Benefit program opening May 12. Click here for press release and here for the notice. Click here for details and here for a fact sheet. Click here for data tracker on sign-ups and here for press release.</p> <p>Click here for guidance on the FCC's Connected Care Pilot Program and the second set of approved providers.</p> <p>Click here for a press release on the availability of unused funds for the Rural Health Care Funding Program.</p>			Benefit program opened for applications on May 12.
\$40 million	Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program for services to children and families living in communities at risk for poor maternal and child health outcomes – click here for press release, here for program details and here for list of awardees	American Rescue Plan	State Public Health Departments	Awards announced 5/12/21
\$1 million for grants to rural hospitals for telehealth	Funding through the Small Rural Hospital Improvement (SHIP) grant program through HRSA.	In the Consolidated Appropriations Act -click here .	Rural Hospitals	Awaiting info from HRSA

<p>\$4.25 billion for SAMHSA</p>	<ul style="list-style-type: none"> • \$1.65 billion for the Substance Abuse and Prevention Treatment Block Grant; • \$1.65 billion for the Mental Health Services Block Grant; • \$600 million for Certified Community Behavioral Health Clinics; • \$50 million for suicide prevention programs; • \$50 million for Project AWARE to support school-based mental health for children; • \$240 million for emergency grants to States; and • \$10 million for the National Child Traumatic Stress Network; • Not less than \$125 million of funds provided to SAMHSA must be allocated to tribes, tribal organizations, urban Indian health organizations, or health service providers to tribes across a variety of programs. • \$14.2 million to expand pediatric mental health care access using telehealth (Pediatric Mental Health Care Access) 	<p>In the Consolidated Appropriations Act – not limited to COVID-19, included here as an additional funding opportunity.</p>	<p>Varies by grant</p>	<p>SAMHSA Click here for FY 2021 SAMHSA COVID-19 Funded Grants to date</p> <p>Pediatric Mental Health Care Access (PMHCA) grant – closes July 6</p>
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\$3 billion For SAMHSA Block Grant programs	\$1.5 billion for Community Mental Health Services Block Grant \$1.5 billion for Prevention & Treatment of Substance Abuse Block Grant – click here for the 5/18 press release on the awards	In the American Rescue Plan – Sec. 2701 & Sec. 2702 Click here for the press release; click here for the Community Mental Health Services Block Grant supplemental distribution for FY2021 and here for the Substance Abuse Block Grant supplemental for FY2021	Funding distributed to states	Click here for the mental health services block grants awards by state and here for the substance abuse block grant awards by state
\$80 million	Funding for mental health and substance use disorder training for health care professionals; grants for health care providers to promote mental health among their health professional workforce	In the American Rescue Plan – Sec. 2703	Health professions schools, academic health centers, State or local governments, Indian Tribes and Tribal organizations	HRSA
\$20 million	Education campaign – mental health/substance use disorder services by health care professionals	In the American Rescue Plan – Sec. 2704	For the benefit of health care professionals	CDC
\$40 million	Grants for health care providers to promote mental health among health professional workforce	In the American Rescue Plan – Sec.2705	For the benefit of health care professionals	HRSA
\$420 million for grants to Certified Community Behavioral Health Clinics	Expansion grants	In the American Rescue Plan – Sec. 2713	Community Behavioral Health Clinics	HRSA

\$100 million	<p>Funding for behavioral health workforce education and training</p> <p>Another \$22 million to be awarded for a total to date of approximately \$66 million awarded - click here for press release; click here for awards by state</p>	In the American Rescue Plan – Sec.2711	For the benefit of health care professionals	HRSA
\$200 million to support infection control in SNFs and \$250 million for “strike teams”	Assists SNFs – funding to be provided up until one year after the end of the PHE	In the American Rescue Plan – Sec. 9401 and Sec. 9402	SNFs	HHS
\$500 million in Emergency Rural Development Grants for Rural Health Care	An emergency pilot program is to be established within 150 days of the Act through the Department of Agriculture.	<p>In the American Rescue Plan – Sec. 1002</p> <p>Funds may be used to (1)increase capacity for vaccine distribution; (2) provide medical supplies to increase medical surge burse for revenue lost during the COVID–19 pandemic, including revenue losses incurred prior to the awarding of the grant; (4) increase telehealth capabilities, including underlying health care information systems; (5) construct temporary or permanent structures to provide health care services, including vaccine administration or testing; (6) support staffing needs for vaccine administration or testing; and (7) engage in any other efforts to support rural development determined to be critical to address the COVID–19 pandemic, including nutritional assistance to vulnerable individuals, as approved by the Secretary.</p>	Rural providers	Ag Dept.
Funds Allocated to	\$1.8 billion to combat COVID-19 Click here for press release; this is in addition to the \$4 billion announced	<p>American Rescue Plan</p> <p>\$240 million for public health workforce activities;</p>		

Indian Country	previously - click here for the press release.	<p>\$420 million for mental health and substance abuse prevention and treatment; \$500 million to detect, diagnose, trace, monitor and mitigate COVID-19 infections. Additionally, the HIS will invest \$600 million for COVID-related facilities activities –</p> <ul style="list-style-type: none"> • \$381 million to IHS, tribal, and urban Indian health programs for the lease, purchase, construction, alteration, renovation, and maintenance and improvement of facilities. • \$167 million to IHS and tribal health programs for COVID-19 related sanitation facilities construction projects. • \$23 million to IHS and tribal health programs for COVID-19 equipment needs. • \$29 million to support the appropriate management and oversight of facilities-related expenditures and to expand COVID-19 related environmental health activities. 		
SBA Loans for Paycheck Protection Program (PPP)	Continues funding PPP through 6/31/21; applications may be made through 5/31/21.	<p>The Consolidated Appropriations Act extended the program through 3/31/21 and increased authorizations to \$806.50 billion.</p> <p>The American Rescue Plan provided an additional \$7.25 billion and made some larger not-for-profits eligible.</p>	Acute Care Facilities Post-Acute Physicians Insurance	Closed

		<p>The Paycheck Protection Program Extension (P.L. 117-6) - click here</p> <p>Extends funding and application period.</p> <p>Click here for the Treasury Department website with all details.</p>		
Tax Credits for paid sick leave for employees	<p>Allows small and midsize employers - any business, including tax-exempt organizations - with fewer than 500 employees, to claim refundable tax credits that reimburse them for the cost of providing paid sick and family leave to employees due to COVID-19, including leave taken by employees to receive or recover from COVID-19 vaccinations. The tax credits are available to eligible employers that pay sick and family leave for leave from April 1, 2021, through September 30, 2021.</p>	<p>American Rescue Plan – Title IX, Subtitle A, Part V, Sec. 9641-9643</p> <p>Click here for White House Fact Sheet, here for IRS fact sheet with links to relevant forms.</p>	<p>Acute Care Facilities</p> <p>Post-Acute Physicians Insurance with less than 500 employees</p>	
COBRA Premium Assistance	<p>Employers must notify employees by May 31 that COBRA is available with 100% federal coverage of COBRA premiums for April 1 through September 30. Click here for IRS Guidance which explains how employers can calculate and claim the tax credits; click here for Labor Dept FAQs for employers; and click here for Labor Dept. FAQs for employees.</p>	<p>American Rescue Plan – Section 9501</p>	<p>Acute Care Facilities</p> <p>Post-Acute Physicians Insurance</p>	

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