Overview of COVID-19 Stimulus Relief Act

On March 27, 2020, following approval by Congress, President Trump signed the $2 trillion COVID-19 Stimulus Relief bill. The largest economic stimulus package in modern American history, the act responds directly to the COVID-19 pandemic by providing economic relief to individuals and businesses. The legislation also includes several key public health appropriations and policy provisions as summarized below.

Key Public Health Appropriations

- $240 billion in emergency supplemental funding for state, tribal, and local efforts to stem the outbreak;
- $117 billion for hospitals and veterans' health care;
- $100 billion in creation of public health and social emergency fund to reimburse providers for expenses and lost revenues;
- $16 billion for strategic national stockpile of pharmaceutical and medical supplies;
- 20% increase in reimbursements for treating Medicare patients with COVID-19; and
- $8 billion reduction in scheduled payment reductions to hospitals caring for large numbers of uninsured and Medicaid patients.


- **Reporting requirements**: All laboratories reporting or analyzing COVID-19 tests are required to share results with the Secretary of the Department of Health and Human Services (HHS) in addition to state-based reporting requirements.

- **Paying for COVID-19 related services**: Group health plans and insurance providers are required to cover preventative services related to COVID-19, including testing, without cost sharing. Providers of COVID-19 tests must publicize prices of such tests with monetary penalties for failure to comply.
• **Vaccine coverage:** Section 1861(s)(10)(A) of the Social Security Act is amended to ensure Medicare coverage of a COVID-19 vaccine and its administration without cost sharing. Group health plans and insurance providers are also required to cover COVID-19 vaccines. Vaccines with an “A” or “B” rating in the most current recommendations from the U.S. Preventative Services Task Force, or have a recommendation from the Advisory Committee on Immunization Practices, are covered without any cost sharing.

• **Strategic National Stockpile (SNS):** Section 319F-2(a)(1) of the Public Health Service Act is amended to clarify that the SNS can include personal protective equipment, ancillary medical supplies, and other applicable supplies required for the administration of SNS drugs, vaccines and other biological products, medical devices, and diagnostic tests.

• **Emergency public health and healthcare workforce:** Section 203 of the Public Health Service Act is amended to establish a Ready Reserve Corps to help ensure there is a deployable workforce to respond to COVID-19 and future public health emergencies (PHEs). In addition, under an HHS-declared PHE, the Secretary can reassign members of the National Health Service Corps to provide health services at a location (within proximity of a member’s original assignment) and duration as deemed necessary to respond to the emergency.

• **Liabilities and immunities for volunteer health care workers:** Health care workers are granted immunity from liability under federal or state law for any harm caused by an act or failure to act in providing health care services during the COVID-19 public health emergency. This explicit liability protection is limited to health services rendered on a volunteer basis, within the scope of the health care worker’s professional license, and performed in good faith. Protections do not apply to harms caused by acts of gross negligence, willful, criminal, or reckless misconduct, with indifference to the safety of the harmed individual, or performed under the influence of alcohol or drugs.

• **Patient health information privacy:** Section 543(b) of the Public Health Service Act is amended to allow disclosure of patients’ protected health information (PHI) to covered entities upon the one-time written consent of the patient, consistent with the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule.

Additional provisions in the act may also impact the provision of health and public health services in response to COVID-19 and future PHEs. Contact the Network for more information about these and other provisions.

**SUPPORTERS**

Robert Wood Johnson Foundation

The Network for Public Health Law is a national initiative of the Robert Wood Johnson Foundation. The Network provides information and technical assistance on issues related to public health laws and policies.

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