



## Congress Responds to Coronavirus:

# A Policy Summary of the Health and Economic Recovery Omnibus Emergency Solutions (HEROES) Act

**Written by:** Anne Ekedahl DeBiasi at  
Well-being and Equity (WE) in the World

The U.S. House of Representatives passed the Health and Economic Recovery Omnibus Emergency Solutions (HEROES) Act, which allocates nearly \$3 trillion in federal funding to support state and local governments, health care providers and other essential workers.

This bill would advance policies that impact multiple generations, from infants, children and youth to adults and older adults. Tax policies, nutrition assistance and virtual home visits would help families with children. Adults would receive direct support, family and medical leave, potentially hazard pay or better unemployment benefits, housing assistance and tax breaks, and would be able to newly enroll themselves and their family enroll health insurance. Older adults would receive enhanced services, such as home delivered meals, and support for their caregivers.

The bill would help struggling individuals and families now by:

- Providing additional **direct payments** of up to \$1,200 per individual - up to \$6,000 per household, including to unauthorized immigrants in the form of a refundable tax credit
- Expanding tax credits to low-income families and other populations:
  - Expands eligibility for the **earned income tax credit** (EITC) to individuals with no qualifying children for 2020.
  - Makes the **child tax credit** fully refundable for 2020 and increases the amount to \$3,000 per child under age 6.
  - Makes the **child and dependent care tax credit** fully refundable for 2020 and increases the maximum credit to 50%.
  - Provides additional tax relief to certain groups, including elementary and secondary teachers, first responders and COVID-19 front-line employees.
  - Provides a 90% refundable tax credit to certain self-insured individuals suffering a significant loss of income.
- Extending **unemployment benefits** to provide an additional \$600 per week for unemployment insurance through January 31, 2021

- Expanding **paid sick days, family and medical leave benefits** enacted under the Families First Coronavirus Response Act through the end of 2021;
- Providing **food assistance** via \$10 billion for the Supplemental Nutrition Assistance Program and a 15% increase to the maximum SNAP benefit, \$1.1 billion for the Special Supplemental Program for Women, Infants and Children (WIC) including an increase in the voucher value, \$3 billion for the USDA's Child and Adult Care Food Program to provide relief to school meal providers and \$150 million for local food banks.
- Establishing a \$200 billion Heroes' fund to award grants for employers to provide **pandemic premium pay** (hazard pay of an additional \$13 per hour on top of regular wages up to \$10,000) for essential workers and appropriating \$850 million to Social Services Block Grant to fund child and family care for essential workers.
- Establishing a special **health insurance enrollment** period for the uninsured to seek health insurance on the Affordable Care Act exchanges as well as a new special enrollment period for Medicare.
- **Eliminating cost sharing** for Medicaid beneficiaries and the uninsured for COVID-19 treatment and vaccines. Establishes zero cost-sharing for Medicare Advantage and Medicare Parts A and B COVID-19 treatment, as well as TRICARE, federal civilians and for Veterans.
- Suspending work participation requirements in **TANF** through January 31, 2021.
- Providing **funding to serve at-risk populations**, including:
  - \$7.6 billion for **Community Health Centers**;
  - \$2.1 billion for the **Indian Health Service**. An additional \$900 million is allocated for Tribal governments to continue operations, clean facilities, address housing overcrowding that prohibits social isolation and to address water hydration and hygiene.
  - \$10 million for **Ryan White HIV/AIDS clinics**.
  - \$3 billion to SAMHSA to increase **mental health support and substance misuse treatment**. In addition, directs the NIH's National Institute of Mental Health to support research on the mental health consequences of COVID-19, including the impact on health care providers.
  - \$10.1 billion to ACF for supportive and social services for **families and children** (CCDGB, LIHEAP, to pay water bills, for violence and child abuse prevention).
  - \$100 million to ACL to provide services such as meals for **older adults, disabled and their caregivers**.
  - Protections for **immigrants** who are impacted by processing and other COVID related delays and particular protections for immigrants who are essential workers.
  - Extending Medicaid eligibility for **incarcerated individuals** to start 30 days prior to their release.
  - Increasing by 25% the amount paid to **disabled veterans** to assist with daily activities including purchase of PPE for veterans and their caregivers.
  - Allowing the VA to care for **homeless veterans** and provide transportation, food, shelter, telecommunications equipment, clothing, blankets, and toiletry items. Also allows VA to set up homeless encampments on VA groups and parking lots.
  - Providing benefits for **military servicemembers** under stop-movement orders and those that are fallen or catastrophically injured.

- Appropriating \$50 million in FY 2020 and providing states with flexibilities in serving older **foster youth** to serve more youth and address housing, education and training and other needs.
- Allowing **home visiting programs** to conduct virtual home visits, provide emergency supplies to families like diapers, formula, food, water, soap and hand sanitizer, as well as provide prepaid debit cards to meet emergency needs.
- Provides **housing assistance** by extending and expanding the moratorium on certain evictions and foreclosures, providing \$175 billion in housing assistance, including \$2 billion for public housing, \$15 million for housing for persons with AIDS, \$11.5 billion for those who are at risk for or are homeless \$500 million for housing for low-income seniors, \$200 million for housing for persons with disabilities and \$100 million for housing counseling assistance. Allocates an additional \$100 billion in emergency assistance for low-income renters, \$75 billion for struggling homeowners and \$309 million for USDA's rural rental assistance programs;
- Providing \$1.5 billion to close the **broadband** homework gap by providing funding for Wi-Fi hotspots and connected devices for students and library patrons, and \$4 billion for emergency home connectivity needs.
- Providing up to \$10,000 in **student loan forgiveness** through September 2010;
- Suspending negative **credit reporting** and strengthening **consumer protections** for those in debt; and
- Providing \$50 million to address **legal needs** arising from coronavirus.

This bill would also:

- Provide nearly \$1 trillion FY2020 emergency supplemental appropriations to federal agencies, including:
  - \$2.1 billion in CDC funds for state, local, territorial and tribal public health departments;
  - \$4.7 billion for COVID-19 research at the National Institutes of Health;
  - \$4.5 billion for the Biomedical Advanced Research and Development Authority for therapeutics and vaccines, manufacturing facilities, and innovation in antibacterial research.
  - \$200 million for the Bureau of Prisons to respond to coronavirus in Federal prisons. Provides an additional \$300 million for grants to respond to coronavirus in prisons and an additional \$600 million for grants to correctional institutions, including a \$75 million grant program to encourage states/localities to adopt practices that promote juvenile rehabilitation without incarceration during this crisis. Increases the availability of home detention for non-violent elderly prisoners by ensuring that participants in the elderly prisoner home confinement pilot program get credit for good conduct time earned and lowers the eligibility for participation during the COVID-19 emergency period. Provides \$250 million for grants to help facilitate the reintegration of ex- prisoners back into society and to prevent recidivism.
  - \$50 million for environmental justice grants, including investigating links between pollution exposure and the transmission and health outcomes of coronavirus in environmental justice communities.
- Provide payments to state (\$500 billion), local (\$375 billion), tribal (\$20 billion), and territorial governments (\$20 billion);

- Expand the Paycheck Protection Program and provides an additional \$659 billion to provide loans and grants to small businesses and all nonprofit organizations and provides \$10 billion in grants to suffering small businesses.
- Provide \$100 billion for the Public Health and Social Services Emergency Fund to provide additional relief to hospitals and health care providers and \$2 billion for a temporary expansion of the FCC's Rural Health Care Program to subsidize health care providers' broadband service in rural and non-rural areas. Provides an additional \$1 billion to Department of the Interior for building hospitals and critical infrastructure in the Insular Areas. Temporarily increases Medicaid disproportionate share hospital allotments by 2.5%.
- Establish a 14% increase in Federal Medical Assistance Percentage (FMAP) payments to state Medicaid programs and provides a temporary extension of 100% FMAP to Indian health providers through June 30, 2021.
- Provide \$75 billion and establish requirements for COVID-19 testing and contact tracing. Requires the HHS Secretary to update the COVID-19 testing strategy, including specific guidelines to ensure adequate testing in vulnerable populations and populations at increased risk related to COVID-19, including older individuals, and rural and other underserved areas. Authorizes grants to support the recruitment, placement, and training of individuals in COVID-19 contact tracing and related positions, with a focus on recruiting from impacted local communities and building a culturally competent workforce. Additionally, provides for transitional assistance and support post-employment.
- Authorize funding to AHRQ, CDC, CMS, FDA, the Office of the National Coordinator for Health Information Technology, and NIH to modernize their data collection methods and infrastructure to increase data collection related to health inequities. Requires the Secretary of HHS, by August 1, to expand on the report to Congress as required by the Paycheck Protection Program and Health Care Enhancement Act describing the testing, positive diagnoses, hospitalization, intensive care admissions, and mortality rates associated with COVID-19, disaggregated by race, ethnicity, age, sex, and gender. The Secretary of HHS must also now propose evidence-based response strategies to reduce disparities related to COVID-19 and a final report in 2024.
- Authorize additional funding for the Medical Reserve Corps (MRC), 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.
- Authorize grants to expand the use of technology-enabled collaborative learning and capacity building models to respond to COVID-19. To be eligible for funding under this section, health entities must have experience providing services to rural, frontier, health professional shortage areas, medically underserved populations, or Indian Tribes.
- Expand several tax credits and deductions (see above), including expanding the CARES Act's new employee retention tax credit increasing the credit from 50% to 80% of qualified wages and increasing the employee wage limit from \$10,000 per year to \$15,000 per quarter.
- Require employers to develop and implement infectious disease exposure control plans.
- Provide \$3.1 billion for workforce training at the Department of Labor, including \$25 million for migrant and seasonal farmworkers (including emergency supportive services); and
- Provide \$100.15 billion in education funding for states, school districts, and institutions of higher education.

- Provide \$100 million for Violence Against Women Act programs to combat violence against women, sexual assault victims, rural domestic violence and child abuse enforcement.
- Provide \$2 billion for economic support and recovery in distressed communities by providing financial and technical assistance to Community Development Financial Institutions of which \$800 million is set aside for minority-owned lenders to support small business, minority-owned businesses and underserved communities.
- Requires the President to appoint a Medical Supplies Response Coordinator.
- The bill includes additional provisions related to the census, voting and other provisions related to various industries deeply impacted by the pandemic.

Cutting room floor:

Of special note for this issue, the bill would provide communication services to two key groups: nursing home residents and people who are incarcerated. It would ensure skilled nursing facilities provide a means for residents to conduct “televisitation” with loved ones while in-person visits are not possible during the COVID-19 public health emergency. It would cap rates charged on voice and video calls made to or from prisons or jails.

## **SAMHSA**

**Substance Abuse and Mental Health Services Administration** – \$3 billion to increase mental health support during this challenging time, to support substance abuse treatment, and to offer increased outreach, including:

- \$1.5 billion for the Substance Abuse Prevention and Treatment Block Grant;
- \$1 billion for the Community Mental Health Services Block Grant;
- \$100 million for services to homeless individuals;
- \$100 million for Project AWARE to identify students and connect them with mental health services;
- \$10 million for the National Child Traumatic Stress Network;
- \$265 million for emergency response grants to address immediate behavioral health needs as a result of COVID-19;
- \$25 million for the Suicide Lifeline and Disaster Distress Helpline; and
- Not less \$150 million for tribes, tribal organizations, urban Indian health organizations, or health service providers to tribes across a variety of programs.
- TC drug user fees beginning in fiscal year 2021.