

CARES Act – Division B: Health Care Appropriations

Department of Health and Human Services (HHS) (\$140.4 billion total)

Public Health and Social Services Emergency Fund (PHSSEF):

- \$100 billion available until expended for “necessary expenses to reimburse, through grants or other mechanisms, eligible health care providers for health care related expenses or lost revenues that are attributable to coronavirus”
 - The term “eligible health care providers” means public entities, Medicare or Medicaid enrolled suppliers and providers, and such for-profit and nonprofit entities not otherwise described “as the Secretary may specify” that provide diagnoses, testing, or care for individuals with possible or actual cases of COVID-19
 - Funds will be available for building or construction of temporary structures, leasing properties, medical supplies and equipment (including PPE and testing supplies), increased workforce trainings, emergency operation centers, retrofitting facilities, and surge capacity
 - Funds may not be used to reimburse expenses or losses that have been reimbursed from other sources or that other sources are obligated to reimburse
 - Recipients must submit reports and maintain documentation (determined by the Secretary) needed to ensure compliance
 - To be eligible for payment, an eligible health care provider will submit to HHS an application that includes a statement justifying the need and valid TIN
 - Payments will be made in consideration of “the most efficient payment systems practicable to provide emergency payment”
 - OIG will transmit a final report on audit findings no later than 3 years after final payments are made
 - OIG or GAO may conduct audits of interim payments at an earlier date
- \$27 billion available until 9/30/2024 for the development of necessary countermeasures and vaccines, prioritizing platform-based technologies with US-based manufacturing capabilities, the purchase of vaccines, therapeutics, diagnostics, necessary medical supplies, medical surge capacity, addressing blood supply chain, workforce modernization, telehealth access and infrastructure, initial advanced manufacturing, novel dispensing, and other activities
 - \$16 billion for the Strategic National Stockpile
 - Not less than \$250 million for grants/cooperative agreements with grantees or sub-grantees of the Hospital Preparedness Program
 - \$3.5 billion for the Biomedical Advanced Research and Development Authority (BARDA) for necessary expenses of manufacturing, production, and purchase (at the discretion of the Secretary) of vaccines, therapeutics, diagnostics, and small molecule active pharmaceutical ingredients
 - Not more than \$289 million may be transferred to other federal agencies for necessary expenses related to medical care incurred to prevent, prepare for, and respond to COVID-19 for persons eligible for treatment (as determined by the Secretary of the receiving agency)
- \$275 million available until 9/30/2022
 - \$90 million to HRSA for Ryan White HIV/AIDS Program
 - \$5 million to HRSA Health Care Systems to improve capacity of poison control centers

- \$180 million to HRSA Rural Health to carry out telehealth and rural health activities
 - \$15 million to tribes
- Any funding provided for FY 2020 for the Health Centers program, maintaining or increasing health center capacity and staffing levels during the COVID-19 public health emergency will be deemed a cost of prevention, diagnosis, and treatment of COVID-19

Administration for Community Living (ACL):

- \$955 million for Aging and Disability Services Programs available until 9/30/2021
 - \$820 million for Older Americans Act (OAA) activities
 - \$200 million for supportive services programs (part B of title III)
 - \$480 million for congregate and home-delivered nutrition services (subparts 1 and 2 of part C of title III)
 - \$20 million to support nutrition services to American Indians, Alaskan Natives, and Native Hawaiians (title VI)
 - \$100 million for support services for family caregivers (part E of title III)
 - \$85 million for independent living centers that received grants under the Rehabilitation Act

National Institutes of Health (NIH) (\$945.5 million total):

- \$103.4 million available until 9/30/2024 for the National Heart, Lung, and Blood Institute
- \$706 million available until 9/30/2024 to the National Institute of Allergy and Infectious Diseases
 - Not less than \$156 million for the study, construction, demolition, renovation, and acquisition of equipment for vaccine and infectious diseases research facilities of or used by NIH
- \$60 million available until 9/30/2024 for the National Institute of Biomedical Imaging and Bioengineering

Centers for Disease Control and Prevention (CDC):

- \$4.3 billion available until 9/30/2024
 - Not less than \$1.5 billion for grants to or cooperative agreements with States, localities, territories, tribes, tribal organizations, urban Indian health organizations, or health service providers to tribes
 - Every grantee that received a Public Health Emergency Preparedness grant for FY 2019 will not receive less than 100 percent of that grant level
 - Not less than \$125 million (can be provided through awards, grants, or cooperative agreements) to tribes and Indian health organizations or health service providers to tribes
 - Not less than \$500 million for global disease detection and emergency response
 - Not less than \$500 million for public health data surveillance and analytics infrastructure modernization
 - \$300 million transferred to and merged with the Infectious Diseases Rapid Response Reserve Fund

Substance Abuse and Mental Health Services Administration (SAMHSA):

- \$425 million for Health Surveillance and Program Support available through 9/30/2021
 - Not less than \$250 million to Certified Community Behavioral Health Clinic Expansion Grant program
 - Not less than \$50 million for suicide prevention
 - Not less than \$100 million for Emergency Response Grants

- Not less than \$15 million to tribes, tribal organizations, urban Indian health organizations, or health and behavioral health service providers to tribes

Administration for Children and Families (ACF) (\$6.3 billion total):

- \$3.5 billion for Payments to States for the Child Care and Development Block Grant available through 9/30/2021, which will be used to supplement, not supplant, general revenue funds
- \$1.874 billion for Children and Families Services Programs available through 9/30/2021
 - \$1 billion for carrying out the Community Services Block Grant Act
 - \$750 million for payments under Head Start
 - None of these funds will be included in the calculation of “base grants” in subsequent FYs
 - \$500 million for operating supplemental summer programs
 - \$45 billion for child welfare services to grantees without regard to matching requirements or applicable reductions in federal financial participation

Food and Drug Administration (FDA):

- \$80 million available until expended to support the development of necessary medical countermeasures and vaccines, advanced manufacturing of medical products, and to monitor the medical product supply chain

Centers for Medicare & Medicaid Services (CMS):

- \$200 million for Program Management available through 9/30/2023
 - \$100 million available for survey and certification, prioritizing nursing home facilities where there is community spread of COVID-19

Department of Homeland Security (DHS) (\$45.9 billion total)

Federal Emergency Management Administration (FEMA):

- \$45.4 billion total
 - Operations and Support: \$44.987 million available until 9/30/2021
 - Disaster Relief Fund: \$45 billion available until expended
 - \$25 billion for disasters declared pursuant to the Stafford Act
 - \$15 billion for all purposes authorized and may be used in addition to amounts designated by Congress as being for disaster relief
 - Federal Assistance: \$400 million available until 9/30/2021
 - \$100 million for Assistance to Firefighter Grants to purchase PPE and related supplies
 - \$100 million for Emergency Management Performance Grants
 - \$200 million for the Emergency Food and Shelter Program

Department of Defense (DOD) (\$10.5 billion total)

Defense Production Act (DPA):

- \$1 billion for COVID-19 purchases

US Department of Agriculture (USDA) (\$9.5 billion total)

Rural Development Programs (RDP):

- Rural Business Cooperative Service
 - \$20.5 million available until 9/30/21 to prevent, prepare for, and respond to COVID-19, for the cost of loans for rural business development programs
- Distance Learning, Telemedicine, and Broadband Program

- \$25 million for telemedicine and distance learning services in rural areas
- Broadband Loan and Grant Pilot (ReConnect) Program
 - \$100 million available until 9/30/2021 in grants for the costs of construction, improvement, or acquisition of facilities and equipment needed to provide broadband service in eligible rural areas (i.e., 90 percent of households to be served by a project receiving a grant must be in a rural area without sufficient access to broadband)

Department of Commerce (DOC) (\$1.886 billion total)

Economic Development Administration (EDA):

- \$1.5 billion available until 9/30/2022 to support grants for states and communities through the Economic Development Assistance Programs

Industrial Technology Services (ITS):

- \$50 million available until 9/30/2021 to the 51 Manufacturing Extension Partnership centers to help small- and medium-sized manufacturers recover and also waives statutory cost-match requirements for all FY 2020 funding

National Science Foundation (NSF) (\$76 million total)

RAPID Grants (RGs):

- \$75 million available until 9/30/2021 to fund COVID-19 research grants

Army Corps of Civil Engineers (ACCE) (\$70 million total)

- \$50 million available until 9/30/2021 to support and ensure continuous operation of Corps projects related to COVID-19 prevention, preparation, and response

Federal Communications Commission (FCC)

- \$200 million available until expended to support health care provider efforts to provide telecommunications services, information services, and devices necessary to enable the provision of telehealth
 - The FCC may rely on existing regulations (47 CFR part 54) in administering this funding if it determines that such administration is in the public interest

Pandemic Response Accountability Committee (PRAC)

- \$80 million available until expended to establish this oversight committee to promote transparency and oversight of appropriated funds

Small Business Administration (SBA)

Disaster Loans Program Account (DLP):

- \$562 million available until expended for the cost of 7(b) loans.

Department of Veterans Affairs (VA) (\$19.6 billion total)

- \$606 million available until 9/30/2021 to support development of alternative sites of care and procure mobile treatment centers
- \$150 million available until 9/30/2021 to support modification or alteration of existing hospital, nursing home, and domiciliary facilities in State homes

Summary Chart of Key Appropriations in Division B of the CARES Act

Agency/Department and Funding	Health Care Funding	Supplies/ Equipment	Vaccines/ Research	Rural Concerns	Telehealth	Program Integrity/ Oversight	Behavioral Health	Public Health Concerns	Business Support and Development Funds
PHSSEF: \$100 billion	X								
PHSSEF: \$16 billion		X							
PHSSEF: \$250 million	X								
PHSSEF: \$3.5 billion		X	X						
PHSSEF: \$289 million	X								
PHSSEF: \$90 million	X								
PHSSEF: \$5 million								X	
PHSSEF: \$180 million				X	X				
ACL: \$820 million								X	
ACL: \$85 million								X	
NIH: \$945.5 million			X						
CDC: \$4.3 billion	X							X	
SAMHSA: \$425 million	X						X		X
ACF: \$6.3 billion								X	X
FDA: \$80 million		X	X						
CMS: \$200 million						X			
FEMA: \$45.4 billion	X	X						X	
DPA: \$1 billion		X							
RDP: \$145.5 million				X	X				X
EDA: \$1.5 billion									X
ITS: \$50 million									X
RGs: \$75 million			X						
ACCE: \$50 million									X
FCC: \$200 million		X			X				
PRAC: \$80 million						X			
DLP: \$562 million									X
VA: \$756 million	X								X