Health Provisions in the Heroes Act

Investments in nursing home safety. In many places, nursing homes have been the epicenter of COVID transmission and fatalities – accounting for more than half of COVID-19 related deaths in some states, including Massachusetts (59 percent, according to one estimate). This bill includes a number of critical provisions to enhance safety and care in nursing facilities.

- Incentive payments for high-performing facilities to transition to dedicated COVID-only facilities or wings, to be able to safely receive these patients who do not need intensive care unit (ICU)-level care.
- Funding to states for nursing home “strike teams,” modeled after what Massachusetts is doing, to send expertise and staff to help facilities experiencing outbreaks.
- Additional funding for Medicare’s Quality Improvement Organizations (QIOs) to provide assistance and training in infection control, also similar to a Massachusetts initiative.
- Requirement and resources to support nursing home “televisitation” to ensure family members can virtually visit with and oversee the care of their loved ones while in-person visits are not feasible.
- And public reporting of nursing home demographic data on Nursing Home Care, which we know is critical to understanding and working to break down health disparities.

Help with COVID-related out-of-pocket costs and protect and expand health insurance. For beneficiaries with COVID, even with insurance coverage, the cost of treatment can be tens of thousands of dollars. This legislation helps with those costs. It also helps support coverage by ensuring Americans have additional opportunities to enroll in Medicare or ACA coverage, and supports those who need to retain employer coverage after separation from work.

- Makes COVID-19-related treatment free for those with Medicare Parts A and B and Medicare Advantage, Medicaid, private insurance, as well as FEHBP and our military programs.
- Creates a special enrollment period for Medicare and for ACA coverage.
- Creates a 100 percent tax credit for COBRA coverage premiums through January of next year, to help those who have lost employment or been furloughed to retain the health insurance they had through their employer – vital consistency during this period of economic and health uncertainty.
Additional help for hospitals and other providers.
Hospitals and other providers at the forefront of the epidemic have struggled with extra costs related to preparation and treatment of COVID-19 cases; they have also lost revenue from the shutdown of elective procedures. This bill includes additional funding and new policies that will offer financial relief to these providers.

- Additional $100 billion of funding in the provider relief fund, along with better direction for how the Secretary must disburse the funding.
- Lowering the interest rate and extending the repayment terms of the accelerated and advance payment programs for Medicare providers.
- An outlier payment to ensure Medicare is covering the cost of hospitalization for beneficiaries admitted with COVID-19.
- Increased Medicaid disproportionate share hospital (DSH) funding.

The legislation includes other health care provisions related to supporting Medicaid coverage, improved testing and test strategy, as well as contact tracing among other things.

- Requires the CDC to coordinate with states on testing, requires HHS to release a testing plan by June, and enhances the contact tracing infrastructure.
- Increases the FMAP by 14 percent, and delays implementation of the MFAR rule.