

AAP Summary of H.R. 6201, the Families First Coronavirus Response Act, as enacted

	Summary	Implementation Guidance	Action Steps
Nutrition			
WIC	<ul style="list-style-type: none"> • Provides \$500 million in additional funding for WIC. • Permits USDA to grant waivers of the physical presence requirement in WIC – allowing for remote certifications and the deferment of anthropometric and bloodwork requirements. • Allows USDA to waive administrative requirements that are barriers to serving WIC participants during the outbreak. 	<ul style="list-style-type: none"> • State WIC offices should allow WIC sites to enroll women and children via telephone or online and waive in-person enrollment requirements. 	<ul style="list-style-type: none"> • Call or email your state/tribal WIC director and urge them to apply for a waiver from certification requirements. • Please see this partner toolkit from the National WIC Association with additional information
School Meals	<ul style="list-style-type: none"> • Allows for flexibility and eliminates paperwork in order to ensure children are able to access meals not served in a cafeteria setting. • Allows USDA to waive the existing meal pattern requirements in child nutrition programs in the event of a disruption to the food supply. • Allows states to provide food assistance equal to the value of school meals to households with children who receive free or reduced-price meals at schools that are closed for 5 or more days. 	<ul style="list-style-type: none"> • States should apply for meal pattern waivers in the event of a disruption of the food supply. • States should work with local school food authorities to create safe congregate feeding sites where families can pick up prepackaged meals to go. • This document from FRAC details the waivers available to states. 	<ul style="list-style-type: none"> • Call or email your state/local school food authority (SFA) and urge them to apply an existing meal pattern waiver. • Promote state and local sites offering food. This spreadsheet has information about local programs.
Child and Adult Care Food Program	<ul style="list-style-type: none"> • Allows child and adult care centers to offer food to-go. 	<ul style="list-style-type: none"> • States should work with adult and childcare centers to create safe sites where families can pick up prepackaged meals to go. • This document from FRAC details the waivers available to states. 	<ul style="list-style-type: none"> • Promote sites where families can pick up prepackaged meals to go.

SNAP	<ul style="list-style-type: none"> • Allows states to provide temporary, emergency SNAP benefits up to the maximum monthly benefit amount. • Suspends time limits on SNAP eligibility for unemployed and underemployed individuals. 	<ul style="list-style-type: none"> • States should allow SNAP applicants to apply via telephone, online, or mail. • States should suspend time limits on SNAP eligibility for unemployed and underemployed individuals. 	<ul style="list-style-type: none"> • Promote the SNAP program for families who are food insecure.
Medicaid			
Emergency FMAP Increase	<ul style="list-style-type: none"> • Provides a temporary 6.2% increase to states' federal medical assistance percentage for the duration of the public health emergency for COVID-19. • Requires states to maintain eligibility standards that are no less restrictive than the date of enactment, including methodologies and procedures used for enrollment and eligibility redetermination. 	<ul style="list-style-type: none"> • To ensure states receive this much needed enhanced federal match on state Medicaid spending, states should ensure that they impose no stricter eligibility standards or procedures or increase premiums. 	
Increase in Medicaid Allotment for Territories	<ul style="list-style-type: none"> • Increases the funding allotment for territories through FY 2021. 		
Telehealth			
Medicare Telehealth Services Furnished During COVID-19 Emergency Period	<ul style="list-style-type: none"> • Expands Medicare telehealth coverage to include patients outside rural settings. 	<ul style="list-style-type: none"> • Guidance issued by CMS: https://www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet • List of COVID-19 related state telehealth policy changes 	<ul style="list-style-type: none"> • While this provision applies to Medicare, states can loosen restrictions in Medicaid and commercial insurance. AAP is advocating for more covered telehealth visits, payment parity, and more accepted sites of care. • Weigh in with your state Medicaid agency to ask for Medicaid fee-for-service and managed care policies to match Medicare telehealth expansions. • AAP Guidance: Telehealth Payer Policy in Response to COVID-19, outlines policy

			<p>changes aiming to alleviate barriers to telehealth care.</p> <ul style="list-style-type: none"> • AAP resource: Coding for COVID-19 and Non-Direct Care • AAP webinar: Telehealth and COVID-19 • AAP online telehealth compendium
Paid Leave			
Paid Sick Leave	<ul style="list-style-type: none"> • Provides 10 days of emergency paid sick leave for employees of employers with 500 employees or fewer. • Leave covers full wage replacement for personal care if one is ill with COVID-19, quarantined, or seeking a diagnosis or preventive care for COVID-19. • Leave covers 2/3 of wage replacement to care for a family member for the same purposes as above, or to care for a child whose school or childcare provider closes as a result of COVID-19. • Department of Labor (DOL) can exclude certain health care providers and emergency responders and grant hardship exemptions to businesses with fewer than 50 employees. 		<ul style="list-style-type: none"> • Please see these pediatric practice management tips for suggestions for your consideration.
Paid Family Leave	<ul style="list-style-type: none"> • Provides 12 weeks of job-protected emergency paid family and medical leave for employees of employers with 500 employees or fewer and government employers under the Family and Medical Leave Act (FMLA). • Paid at 2/3 wage replacement and available for those who are adhering to a quarantine recommendation, caring for an at-risk family member adhering to a quarantine recommendation, or caring for 		<ul style="list-style-type: none"> • Please see these pediatric practice management tips for suggestions for your consideration.

	<p>a child whose school or childcare provider closes as a result of COVID-19.</p> <ul style="list-style-type: none"> • DOL can exclude certain health care providers and emergency responders and grant hardship exemptions to businesses with fewer than 50 employees. • Employers will be eligible for a tax credit to reimburse wages paid for this paid sick leave and paid family leave, up to a cap. 		
Unemployment Insurance			
Unemployment Compensation	<ul style="list-style-type: none"> • Bolsters the administration of the jointly funded federal-state Unemployment Compensation program through the provision of a \$1 billion in emergency funds for program administration (not for the direct payment of compensation). • States must take a number of steps to strengthen their unemployment programs through expanded eligibility, reduced barriers to access (e.g., waiving work search requirements), and additional outreach and enrollment activities. 	<ul style="list-style-type: none"> • Here are the policy basics of unemployment compensation/insurance and length of your state's unemployment compensation/insurance program. • U.S. Department of Labor maintains updated guidance on unemployment insurance flexibilities here. 	<ul style="list-style-type: none"> • Contact your state labor department and urge them to expand unemployment eligibility and/or reduce barriers to access unemployment services (several governors/state labor departments have relaxed these requirements in the last week) and/or to increase the length of their state's unemployment compensation/insurance program.
Temporary Assistance for States with Advances	<ul style="list-style-type: none"> • Defers state interest payments and accrual to the federal government. 		
Technical Assistance and Guidance for Short-Term Compensation Programs	<ul style="list-style-type: none"> • Provides technical assistance to help states provide pro-rated uninsurance benefits to employees who have had their hours reduced. 		
Full Federal Funding of Extended Unemployment Compensation for a Limited Period	<ul style="list-style-type: none"> • Provides for full federal funding of extended unemployment compensation through December 31, 2020; states have the option of providing extended benefits in the event of high unemployment. 		<ul style="list-style-type: none"> • Become educated on the length of your state's unemployment compensation/insurance program.

Testing

Private health plans	<ul style="list-style-type: none"> Requires private health plans to provide coverage for COVID-19 diagnostic testing, including the cost of a provider, urgent care center and emergency room visits in order to receive testing. 		<ul style="list-style-type: none"> Monitor whether private plans are providing such coverage without cost-sharing and report any discrepancies to COVID-19@aap.org
Medicaid and CHIP	<ul style="list-style-type: none"> Requires Medicaid to provide coverage for COVID-19 diagnostic testing, including the cost of a provider visit in order to receive testing. Coverage must be provided at no cost to the beneficiary. Provides States with the option to extend Medicaid eligibility to uninsured populations for the purposes of COVID-19 diagnostic testing. State expenditures for medical and administrative costs would be matched by the federal government at 100 percent. Requires coverage for COVID-19 diagnostic testing and prohibit cost-sharing to targeted low-income children and low-income pregnant women. 	<ul style="list-style-type: none"> Ensure that Medicaid and CHIP are providing COVID-19 diagnostic testing without cost sharing for all populations. States should take advantage of this opportunity to provide coverage to uninsured populations for COVID-19 testing, which would be entirely funded by the federal government. 	<ul style="list-style-type: none"> Monitor whether Medicaid and CHIP are providing such coverage without cost-sharing and report any discrepancies to COVID-19@aap.org Contact your state Medicaid agency to encourage them to adopt this option. As more guidance comes out, AAP will share additional details.
TRICARE, VA and Federal Civilians	<ul style="list-style-type: none"> Ensures that individuals enrolled in TRICARE, covered veterans, and federal workers have coverage for COVID-19 diagnostic testing without cost-sharing. 		<ul style="list-style-type: none"> Monitor whether TRICARE is providing such coverage without cost-sharing and report any discrepancies to COVID-19@aap.org
Indian Health Service	<ul style="list-style-type: none"> Ensures that American Indians and Alaskan Natives do not experience cost sharing for COVID-19 testing, including those referred for care away from an Indian Health Service or tribal health care facility. 		<ul style="list-style-type: none"> Monitor whether the Indian Health Service is providing such coverage without cost-sharing and report any discrepancies to COVID-19@aap.org

State Emergency Operations Centers	<ul style="list-style-type: none">• Ensures State Emergency Operations Centers receive regular and real-time reporting on aggregate testing and case data from health departments and the centers share that data with the Centers for Disease Control and Prevention.		
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