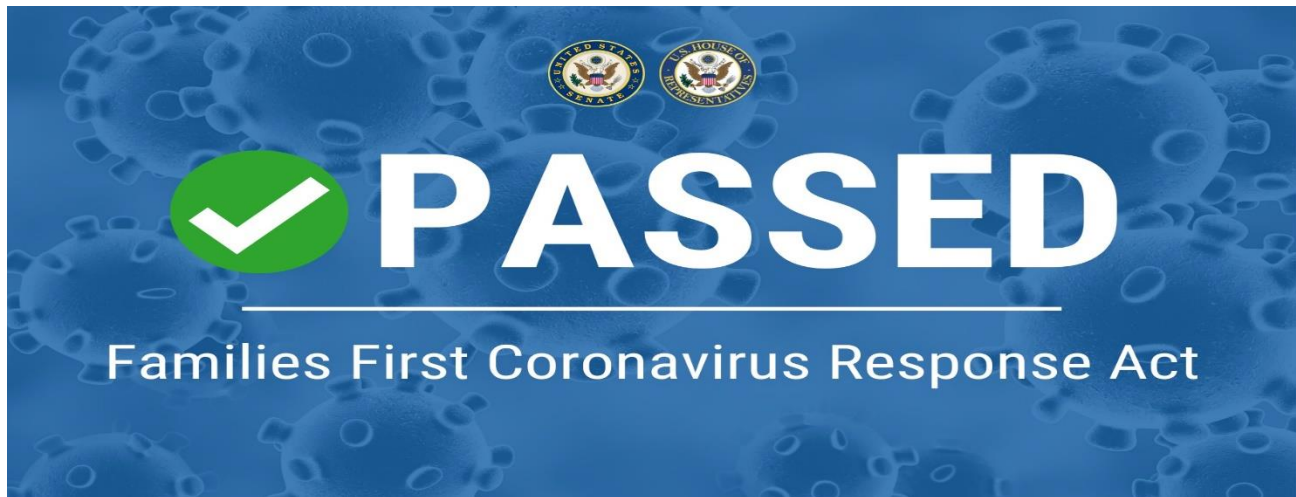


# FAMILIES FIRST CORONAVIRUS RESPONSE ACT



## ➤ What is the Families First Coronavirus Response Act?

### Federal legislative response to the COVID-19 public health emergency

- The Families First Coronavirus Response Act (H.R. 6201) builds on the \$8.3 billion emergency coronavirus spending bill, which was enacted on March 6, 2020.
- The Act includes numerous provisions related to Medicaid, SNAP, WIC, and the free and reduced price school lunch program, as well as provisions regarding paid sick leave, and increased unemployment benefits.

## ➤ When is the Act effective?

### Through the duration of the Presidential and Health & Human Services declared public health emergency

- The presidential declaration of the public health emergency related to COVID-19 has an effective date of March 1, 2020 (signed March 13, 2020).
- The act was passed by the U.S. House & Senate and signed into law by Pres. Trump the week of March 16, 2020 and is **effective as of March 1, 2020**.
- The Act will terminate when:
  - Congress enacts joint resolution; or
  - The president issues another proclamation terminating emergency.
- Congress must review the status after six months to consider if the national emergency should be terminated.
- The emergency will automatically terminate March 1, 2021, if the president does not submit appropriate emergency continuance.

## ➤ How does the Act impact Medicaid programs and services?

### Coverage of COVID-19 testing

- Medicaid, CHIP, Medicare, Medicare Advantage and private health plans are required to cover the full cost of COVID-19 diagnostic testing without prior authorization.
- This includes covering the costs of the provider visit, emergency room visit or urgent care center visit resulting in the order or administration of a COVID-19 diagnostic test.
- There would be no cost sharing (including deductibles, copayments and coinsurance) for beneficiaries.

# FAMILIES FIRST CORONAVIRUS RESPONSE ACT

## Covering uninsured individuals

- States have the option to extend Medicaid eligibility to uninsured populations for the purposes of COVID-19 diagnostic testing and testing-related services.
- State expenditures for medical and administrative costs for the diagnostic testing and related services for these uninsured individuals would be matched by the federal government at 100%.
- This does not include treatment services or costs.

## ➤ How does the Act impact Medicaid federal match?

### There is a temporary increase for the duration of the federal public health emergency

- The Act provides a 6.2% temporary increase to each state's Federal Medical Assistance Percentage (FMAP).
- Starting with expenditures back to January 2020, this FMAP increase is available for the duration of the COVID-19 public health emergency, and extends through the last day of the calendar quarter in which the emergency period occurs. There is some ambiguity about the January effective date for applying the enhanced match, CMS will be providing states with additional guidance.
- For Louisiana, the proposed enhancement would result in an additional \$318.1 million in federal funding and a reduction in state general fund (SGF) need of \$280.6 million. These figures are based on the assumption of a January 1, 2020, effective date, and any change to that date will also impact the projected funding amounts.
- However, the increase is not available if the State takes any of the following actions:
  1. Makes eligibility standards, methodologies or procedures more restrictive than those in effect on January 1, 2020.
  2. The State imposes any premium exceeding premiums in effect as of January 1, 2020.
  3. The State terminates benefits for any individual that is currently enrolled as of the enactment of this legislation or enrolls for benefits through the last day of the month in which the emergency period ends, unless the individual requests a voluntary termination of eligibility or the individual ceases to be a resident of the state.
  4. The state does not provide coverage without cost sharing for any testing services and treatments for COVID-19, including vaccines, specialized equipment and therapies.
- Medicaid anticipates a significant portion of the SGF made available through the enhancement may be required to fund the state match for anticipated increases in expenditures related to testing and treatment of COVID-19-related illness for Medicaid beneficiaries and for an anticipated enrollment increase due to economy shifts and coverage requirements under the Families First Coronavirus Response Act.