

Overview: American Rescue Plan Act of 2021

March 2021

The Senate recently approved its version of the *American Rescue Plan Act of 2021* with several changes to the House-passed original. The House is expected to approve the revised package tomorrow and President Biden is expected to sign it into law shortly thereafter.

Below is a summary of the bill as it relates to DHS programs and activities.

Unemployment Assistance:

• Maintains enhanced unemployment benefits at \$300/week from March 14, 2021 through September 6, 2021.

Stimulus Checks:

- Provides direct payments worth up to \$1,400 per person:
 - Individuals earning less than \$75,000/year (and couples earning less than \$150,000/year) will be sent the full amount.
 - The upper income limit for payments is \$80,000 for individuals and \$160,000 for couples.
 - Payments will be calculated based on 2019 or 2020 income.
 - Adult dependents are eligible recipients.

State and Local Aid:

- Provides \$350 billion in aid to state and local governments:
 - States will receive roughly \$195 billion of this amount and the remainder will be divided evenly between cities and counties.
 - Funds can cover costs incurred through the end of 2024.

Pandemic Emergency Fund:

- Establishes a \$1 billion Pandemic Emergency Fund:
 - 92.5% of the fund will be distributed to states for direct cash assistance to low-income families with children. Funds will be distributed based on the state's population of children and past expenditures on cash assistance to low-income families with children.
 - 7.5% of the fund will be reserved for tribal TANF programs and distributed at the discretion of the HHS Secretary.

Provider Relief Fund:

• Infuses \$8.5 billion into the Provider Relief Fund (PRF) to help rural healthcare providers who have yet to receive a payment.

Medicaid:

- Requires Medicaid coverage for COVID-19 vaccines and treatment without beneficiary costsharing (with vaccines at a 100% federal match) through one year after the end of the federal public health emergency. States also have the option to provide coverage for vaccines and treatments to uninsured individuals without cost-sharing at a 100% federal match.
- Allows states to extend Medicaid eligibility to women for twelve moths postpartum. States
 have five years to pursue this option.
- Provides Medicaid eligibility (for five years) to incarcerated individuals 30 days prior to their release.
- Provides an enhanced FMAP to incentivize state Medicaid programs to cover mobile crisis
 intervention services for mental health or substance use crises. Mobile crisis services are teams
 of mental health professionals who provide psychiatric services to individuals in their own
 homes or sites outside of traditional clinical settings.
- Provides a 100% federal match for services provided to Medicaid beneficiaries who receive care through Urban Indian Organizations (for two years).
- Eliminates the cap on Medicaid drug rebates (starting in calendar year 2023).
- Temporarily increases FMAPs by 10% to help states improve Medicaid home- and community-based services. The increase will last for one year.
- Eliminates the limit in maximum rebate amounts for single-source drugs under Medicaid by January 1, 2024.
- Allows outpatient drugs used for COVID-19 treatment to be included in the Medicaid Drug Rebate Program.

CHIP:

- Requires CHIP coverage for COVID-19 vaccines and treatment without beneficiary cost-sharing (with vaccines at a 100% federal match) through one year after the end of the federal public health emergency.
- Allows states to extend CHIP eligibility to women for twelve moths postpartum. States have five years to pursue this option.

Skilled Nursing Facilities:

- Reserves \$200 million for COVID-19 infection control support in skilled nursing facilities.
 Support will be provided via quality improvement organizations.
- Reserves \$250 million to establish "strike teams" to respond to COVID-19 outbreaks in skilled nursing facilities.

Tribal Health:

- Provides \$6 billion to support the activities of the Indian Health Service (IHS), including:
 - \$2 billion for lost revenue.
 - \$140 million for information technology, telehealth, and electronic health records infrastructure.
 - \$84 million for urban Indian health programs.
 - \$420 million for mental and behavioral health services.

Mental Health / Substance Abuse:

- Allocates \$3.5 billion for the Substance Abuse Prevention and Treatment and Community Mental Health block grant programs.
- Allocates \$80 million for mental and behavioral health training among healthcare professionals, para-professionals, and public safety officers.
- Allocates \$50 million to support existing SAMHSA grant programs which support youth mental health services and suicide prevention efforts.
- Allocates \$420 million in grant funding for Certified Community Behavioral Health Clinics (CCBHCs).

Older Adults / Adult Protection / Elder Justice:

- **Provides \$188 million for the Elder Justice Act in FY2021 and FY2022**. The Elder Justice Act was passed in 2010 to address abuse, neglect, and exploitation among seniors.
- Ensures that funding for adult protective services (APS) can be used for all adults.
- Provides \$1,434,000,000 for programs authorized by the Older Americans Act (OAA):
 - \$740 million for senior nutrition programs.
 - \$25 million for services (including nutrition) for Native American communities.
 - \$470 million to support home- and community-based services (including COVID-19 vaccine outreach and social isolation).
 - \$145 million for the National Family Caregiver Support Program.
 - \$10 million for the long-term care ombudsman program.

Child Care / Protection:

- Increases annual funding for the Child Care Entitlement to States (CCES) to \$3,550,000,000 per year (and waives the state match on new funding for FY2021 and FY2022):
 - \$3,375,000,000 is reserved for states.
 - \$100,000,000 is reserved for tribes.
- Provides \$14,990,000,000 for the Child Care and Development Block Grant (CCDBG). Funds may be distributed through FY2023.
- Creates child care stabilization grants for child care providers who were either open when they applied or closed due to COVID-19. Funds can be used for a range of operating expenses.
- Provides \$23,975,000,000 for the child care stabilization fund (see above).
- Provides \$250 million for child abuse and neglect prevention programs under the Child Abuse
 Prevention and Treatment Act (CAPTA). Funds will not be subject to a state match and will be distributed based on states' populations of children under the age of 18.
- Provides \$100 million for the child abuse and neglect treatment and response state grant under CAPTA.

Nutrition Assistance:

- Allows the Pandemic-EBT (P-EBT) program to be implemented in any school year during which the federal public health emergency was in effect.
- Allows P-EBT benefits to be extended to the summer.
- Maintains the 15% increase in SNAP benefits through September 30, 2021. Additional administrative funds will also be distributed to states to help accommodate higher caseloads.
- **Provides \$25 million to promote technological improvements** for SNAP online purchasing, electronic benefit transfer systems, and SNAP mobile payment technologies.