



Summary of the Coronavirus Aid, Relief and Economic Security (CARES) Act

The Coronavirus Aid, Relief, and Economic Security (CARES) Act ([H.R. 748](#)) that passed the Senate via unanimous vote on March 25, 2020 and approved by the House of Representatives by a voice vote on March 27, 2020, was quickly signed into law by the President. The following is a summary of key provisions of the Act, as it relates to hematology research and practice.

Research/Public Health Funding Provisions

- The bill includes \$172.1 billion for the Departments of Labor, Health and Human Services, Education and Related Agencies (HHS). Within that amount, specific funding is included for the Centers for Disease Control and Prevention (CDC), the National Institutes of Health (NIH), The Food and Drug Administration (FDA), and the Biomedical Advanced Research and Development Authority (BARDA).
 - \$4.3 billion for CDC, including:
 - \$1.5 billion in grants to state and local governments and tribes to purchase protective equipment, carry out surveillance and laboratory testing, infection control and other activities.
 - Another \$1.5 million of the funding is allocated to support CDC's continuing efforts to contain and combat the virus, including repatriation and quarantine efforts, purchase and distribution of diagnostic test kits and support for laboratory testing, workforce training programs, combating antimicrobial resistance and antibiotic resistant bacteria as a result of secondary infections related to COVID-19, and communicating with and informing public, state, local, and tribal governments and healthcare institutions.
 - \$945 million for NIH to support research to expand on prior research plans, including developing an improved understanding of the prevalence of COVID-19, its transmission and the natural history of infection, and novel approaches to diagnosing the disease and past infection, and developing countermeasures for the prevention and treatment of its various stages. Within this amount, the following specific funding is allocated:
 - \$706 million for the National Institute of Allergy and Infectious Diseases (NIAID), including a minimum of \$156,000,000 dedicated to research, construction, and equipment for vaccine and infectious disease facilities.
 - \$103.4 million for the National Heart, Lung, and Blood Institute (NHLBI).
 - \$60 million for the National Institute of Biomedical Imaging and Bioengineering (NIBIB).
 - \$36 million for the National Center for Advancing Translational Sciences (NCATS).
 - \$30 million for the Common Fund within the Office of the Director.
 - \$10 million for the National Library of Medicine (NLM).
 - \$80 million to FDA for additional funding for vaccines, medical product manufacturing, and medical supply chain monitoring.

- \$27 billion is set aside for BARDA for research and development of vaccines, therapeutics, and diagnostics to prevent or treat the effects of coronavirus.

Provisions Related to Practice

- Expansion of telehealth services
 - Eliminates the requirement that limits the Medicare telehealth expansion authority during the COVID-19 emergency period to situations where the physicians or other professional has treated the patient in the past three years.
 - Affords new flexibilities for home health, hospice, Federally Qualified Health Centers, and rural clinics.
- Provides \$100 billion in direct financial support to hospitals, physician practices, and other health care providers.
 - This support is for costs of treating COVID-19 patients as well as to ease the financial impact on those who lose revenue due to reductions in other services as a result of the pandemic.
 - Exact eligibility criteria and application process is not yet defined pending implementation.
- Elimination of the 2% reduction in payment for Medicare providers (under sequestration) from May 1 through December 31, 2020.
- Allows for 90-day prescription refills under Medicare Part D.
- No cost-sharing for COVID-19 tests under Medicare Part B.
- Allows Medicaid to cover COVID testing and vaccines for the uninsured without co-pays.
- Creates a new loan product within the Small Business Administration for loans of up to \$10 million to help cover payroll and overhead costs, with expanded loan forgiveness criteria. Physician practices with not more than 500 employees may qualify.
- Limits liability for volunteer health care professionals during COVID-19 emergency response.

Other

- Recognizes the importance of the nation's blood supply – directs the Secretary of HHS to carry out an initiative to improve awareness of the importance and safety of blood donation and the continued need for blood donations during the COVID-19 public health emergency.