

Summary of Relevant Provisions in Coronavirus Legislation

March 25, 2020

	H.R. 6074 Enacted 3/6/20	H.R. 6201 Enacted 3/18/20	H.R. 748 Under Consideration
Total Federal Cost	\$8.3 billion	Roughly \$100 billion	Roughly \$2 trillion
New health coverage requirements		Plans must cover COVID-19 diagnostic and related tests with no cost sharing	Health plans must pay “cash price” for diagnostic tests by out-of-network providers, who must post those prices publicly. Health plans must cover future COVID-19 preventive treatment and vaccine with no cost sharing.
Telehealth	Waiver of certain Medicare and HIPAA telehealth rules		Allows high-deductible health plans to offer pre-deductible coverage of telehealth services
Paid time off requirements		Employers with fewer than 500 employees required to provide 10 days paid time off for COVID-19 affected staff, and up to 12 weeks paid emergency FMLA for COVID-19 affected staff. Federal government reimburses employers through refundable tax credit paid through payroll tax.	
Unemployment Insurance		Grants to states to prepare for spike in unemployment claims	Federal funding for up to four weeks of unemployment insurance

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Business Relief	Small grants to small businesses		\$500 billion in loans and loan guarantees, of which \$50 billion is earmarked for air transport industry. \$350 billion for small business grants
State and Local Government Relief	Small grants to state and local public health departments	Increase in Federal share of Medicaid payments	Further increase in Federal share of Medicaid payments. \$155 billion in direct fiscal support to state and local governments.
Cash payments to individuals			\$1,200 per adult, \$500 per child. Benefit phases out for higher income taxpayers.

Policies NOT included in any enacted legislation:

- New paid time off requirements on employers with more than 500 employees.
- Expansion of the COVID-19-related reasons that employees may use family & medical leave
- Subsidies for laid-off workers who continue coverage via COBRA
- Policies banning price gouging or otherwise mitigating health care costs
- Policies to end surprise medical bills
- Support for direct primary care models