



*A Union of Professionals*

## **Healthcare Highlights in HEROES Act**

**Public Health and Social Services Emergency Fund:** \$175 billion to reimburse for healthcare-related expenses or lost revenue attributable to the coronavirus, as well as to support testing and contact tracing to effectively monitor and suppress COVID-19.

**Medical Supplies Response Coordinator:** Requires the president to appoint a Medical Supplies Response Coordinator. A Medical Supplies Response Coordinator would serve as the point of contact for the healthcare system, supply chain officials and states on medical supplies, including personal protective equipment, medical devices, drugs and vaccines. The appointee is required to have healthcare training and an understanding of medical supply chain logistics.

**OSHA emergency temporary and permanent standards:** Requires the Occupational Safety and Health Administration to issue an emergency temporary standard within seven days of enactment to protect healthcare and other workers at occupational risk of exposure to COVID-19.

**Medicaid:** Increases Federal Medical Assistance Percentage payments to state Medicaid programs by a total of 14 percentage points starting July 1, 2020, through June 30, 2021.

**COBRA/Preserving health benefits for workers:** Provides approximately nine months of full premium subsidies to allow workers to maintain their employer-sponsored coverage if they are eligible for COBRA due to a layoff or reduction in hours, and for workers who have been furloughed but are still active in their employer-sponsored plan.

**COVID-19 testing strategy:** Requires the Department of Health and Human Services to update the COVID-19 strategic testing plan required under the Paycheck Protection Program and Health Care Enhancement Act no later than June 15, 2020. The updated plan must identify the types and levels of testing necessary to monitor and contribute to the control of COVID-19 and inform any reduction in social distancing. In addition, the updated strategic testing plan must include specific plans and benchmarks with clear timelines, regarding how to ensure sufficient availability and allocation of all testing materials and supplies, sufficient laboratory and personnel capacity, and specific guidelines to ensure adequate testing in vulnerable populations and populations at increased risk related to COVID-19, including older individuals, and rural and other underserved areas. This plan must also involve testing capacity in non-healthcare settings in order to help expand testing availability and make testing more accessible, as well as address how to implement the testing strategy in a manner that will help to reduce disparities with respect to COVID-19.

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The **American Federation of Teachers** is a union of professionals that champions fairness; democracy; economic opportunity; and high-quality public education, healthcare and public services for our students, their families and our communities. We are committed to advancing these principles through community engagement, organizing, collective bargaining and political activism, and especially through the work our members do.

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**National system for COVID-19 testing, contact tracing, surveillance, containment and mitigation:** Requires the Centers for Disease Control and Prevention to coordinate with state, local, tribal and territorial health departments to establish and implement a national evidence-based system for testing, contact tracing, surveillance, containment and mitigation of COVID-19, including offering guidance on voluntary isolation and quarantine of positive COVID-19 cases.

**No cost-sharing for COVID-19 treatment:** Eliminates cost-sharing for Medicare/Medicaid for COVID-19 treatment and vaccines during the COVID-19 public health emergency.

**Covering the uninsured for COVID-19 treatment:** Ensures that uninsured individuals whom states opt to cover through the new Medicaid eligibility pathway will be able to receive treatment for COVID-19 without cost-sharing during the COVID-19 public health emergency.

**Increase DSH payments:** Temporarily increases Medicaid disproportionate share hospital allotments by 2.5 percent.