Policy Analysis: The Coronavirus Aid, Relief, and Economic Security Act (CARES Act)

Category: Policy Blog

written by NCUIH | March 27, 2020

Washington, DC (March 27, 2020) - Today, the President signed the Coronavirus Aid, Relief, and Economic Security (CARES) Act, which is the third phase of legislation in response to the coronavirus pandemic. The CARES Act passed the House of Representatives today and cleared the Senate earlier this week. The bill provides \$1.032 billion to the Indian Health Service (IHS) in critically needed resources to support the Indian Health System during the pandemic, including expanded support for medical services, equipment, supplies and public health education for IHS direct service, tribally operated and Urban Indian Organizations; expanded funding for purchased/referred care; and new investments for telehealth services, electronic health records improvement, and expanded disease surveillance by tribal epidemiology centers.

Overview

Funding

Indian Health Service (IHS)

- The bill provides **\$1.032 billion** to the Indian Health Service (IHS) in critically needed resources to support the Indian Health System during the pandemic, including expanded support for medical services, equipment, supplies and public health education for IHS direct service, tribally operated and Urban Indian Organizations; expanded funding for purchased/referred care; and new investments for telehealth services, electronic health records improvement, and expanded disease surveillance by tribal epidemiology centers.
- Not less than **\$450 million** shall be distributed through Tribal shares and Urban Indian Organizations.

Center for Disease Control and Preventions

- Provides for a total of **\$4.3 billion** for program wide activities and support with no less than \$1.5 billion to be made available to States, localities, territories, tribes, tribal organizations, UIOs, or health service providers to tribes. Activities include:
- Surveillance, Epidemiology, Laboratory Capacity, Infection Control, Mitigation, Communications, Other Preparedness and Response Activities
- Of this, at least \$125 million is to be made available to tribes, tribal organizations, UIOs or health service providers to tribes.

Substance Abuse and Mental Health Services Administration (SAMHSA)

- A total of **\$435 million** is allocated for Health Surveillance and Program Support for SAMHSA. This includes prevention, preparation, and response to COVID-19.
- No less than **\$15 million** is to be allocated for tribes, tribal organizations, UIOs or health/behavioral health service providers to tribes.

Health Resources and Services Administration (HRSA)

HRSA Rural Health is appropriated \$180 million of which no less than \$15 million is to be
allocated for tribes, tribal organizations, UIOs, or health service providers to tribes to carry
out telehealth and rural health activities.

Legislative Authorizations

Special Diabetes Fund for Indians (SDPI)

• Reauthorizes SDPI at current funding levels through November 30, 2020. Allocates **\$25,068,493** for the period from October 1, 2020 to November 30, 2020.