

HEALTH PROVISIONS

ADDRESSING SUPPLY SHORTAGES

Sec. 3101. National Academies report on America's medical product supply chain security.	<ul style="list-style-type: none">• Directs the National Academies to study the manufacturing supply chain of drugs and medical devices and provide Congress with recommendations to strengthen the U.S. manufacturing supply chain.
Sec. 3102. Requiring the strategic national stockpile to include certain types of medical supplies	<ul style="list-style-type: none">• Clarifies that the Strategic National Stockpile can stockpile medical supplies, such as the swabs necessary for diagnostic testing for COVID-19.
Sec. 3103. Treatment of respiratory protective devices as covered countermeasures.	<ul style="list-style-type: none">• Provides permanent liability protection for manufacturers of personal respiratory protective equipment, such as masks and respirators, in the event of a public health emergency, to incentivize production and distribution.
Sec. 3111. Prioritize reviews of drug applications; incentives.	<ul style="list-style-type: none">• Requires the Food and Drug Administration (FDA) to prioritize and expedite the review of drug applications and inspections to prevent or mitigate a drug shortage.
Sec. 3112. Additional manufacturer reporting requirements in response to drug shortages.	<ul style="list-style-type: none">• Requires drug manufacturers to submit more information when there is an interruption in supply, including information about active pharmaceutical ingredients, when active pharmaceutical ingredients are the cause of the interruption.• Requires manufacturers to maintain contingency plans to ensure back up supply of products.• Requires manufacturers to provide information about drug volume.

<p>Sec. 3121. Discontinuance or interruption in the production of medical devices.</p>	<ul style="list-style-type: none"> • Clarifies that during a public health emergency, a medical device manufacturer is required to submit information about a device shortage or device component shortage upon request of the FDA.
--	--

<p style="text-align: center;">ACCESS TO HEALTH CARE FOR COVID-19 PATIENTS</p>	
<p>Sec. 3201. Coverage of diagnostic testing for COVID-19.</p>	<ul style="list-style-type: none"> • Clarifies that all testing for COVID-19 is to be covered by private insurance plans without cost sharing, including those tests without an EUA by the FDA.
<p>Sec. 3202. Pricing of diagnostic testing.</p>	<ul style="list-style-type: none"> • For COVID-19 testing covered with no cost to patients, requires an insurer to pay either the rate specified in a contract between the provider and the insurer, or, if there is no contract, a cash price posted by the provider.
<p>Sec. 3203. Rapid coverage of preventive services and vaccines for coronavirus.</p>	<ul style="list-style-type: none"> • Provides free coverage without cost-sharing of a vaccine within 15 days for COVID-19 that has in effect a rating of “A” or “B” in the current recommendations of the United States Preventive Services Task Force or a recommendation from the Advisory Committee on Immunization Practices (ACIP).
<p>Sec. 3211. Supplemental awards for health centers.</p>	<ul style="list-style-type: none"> • Provides \$1.32 billion in supplemental funding to community health centers on the front lines of testing and treating patients for COVID-19.
<p>Sec. 3212. Telehealth network and telehealth resource centers grant programs.</p>	<ul style="list-style-type: none"> • Reauthorizes Health Resources and Services Administration (HRSA) grant programs that promote the use of telehealth technologies for health care delivery, education, and health information services. • Telehealth offers flexibility for patients with, or at risk of contracting, COVID-19 to access screening or monitoring care while avoiding exposure to others.

<p>Sec. 3213. Rural health care services outreach, rural health network development, and small health care provider quality improvement grant programs.</p>	<ul style="list-style-type: none"> • Reauthorizes HRSA grant programs to strengthen rural community health by focusing on quality improvement, increasing health care access, coordination of care, and integration of services. • Rural residents are disproportionately older and more likely to have a chronic disease, which could increase their risk for more severe illness if they contract COVID-19.
<p>Sec. 3214. United States Public Health Service Modernization.</p>	<ul style="list-style-type: none"> • Establishes a Ready Reserve Corps to ensure we have enough trained doctors and nurses to respond to COVID-19 and other public health emergencies.
<p>Sec. 3215. Limitation on liability for volunteer health care professionals during COVID-19 emergency response.</p>	<ul style="list-style-type: none"> • Makes clear that doctors who provide volunteer medical services during the public health emergency related to COVID-19 have liability protections.
<p>Sec. 3216. Flexibility for members of National Health Service Corps during emergency period.</p>	<ul style="list-style-type: none"> • Allows the Secretary of Health and Human Services (HHS) to reassign members of the National Health Service Corps to sites close to the one to which they were originally assigned, with the member's agreement, in order to respond to the COVID-19 public health emergency.
<p>Sec. 3221. Confidentiality and disclosure of records relating to substance use disorder.</p>	<ul style="list-style-type: none"> • Allows for additional care coordination by aligning the 42 CFR Part 2 regulations, which govern the confidentiality and sharing of substance use disorder treatment records, with Health Insurance Portability and Accountability Act (HIPAA), with initial patient consent.

Sec. 3222. Nutrition services.	<ul style="list-style-type: none"> • Waives nutrition requirements for Older Americans Act (OAA) meal programs during the public health emergency related to COVID-19 to ensure seniors can get meals in case certain food options are not available.
Sec. 3223. Continuity of service and opportunities for participants in community service activities under title V of the Older Americans Act of 1965	<ul style="list-style-type: none"> • Allows the Secretary of Labor to extend older adults' participation in community service projects under OAA and make administrative adjustments to facilitate their continued employment under the program.
Sec. 3224. Guidance on protected health information.	<ul style="list-style-type: none"> • Requires the Department of Health and Human Services (HHS) to issue guidance on what is allowed to be shared of patient record during the public health emergency related to COVID-19.
Sec. 3225. Reauthorization of healthy start program.	<ul style="list-style-type: none"> • Reauthorizes Healthy Start, which is a program that provides grants to improve access to services for women and their families, who may need additional support during the public health emergency related to COVID-19.
Sec. 3226. Importance of the blood supply.	<ul style="list-style-type: none"> • 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.

INNOVATION

Sec. 3301. Removing the cap on OTA for public health emergencies.	<ul style="list-style-type: none"> • Allows the Biomedical Advanced Research and Development Authority (BARDA) to more easily partner with private sector on research and development, which includes helping to scale up manufacturing as appropriate, by removing the cap on other transaction authority (OTA) during a public health emergency.
Sec. 3302. Priority zoonotic animal drugs.	<ul style="list-style-type: none"> • Provides Breakthrough Therapy designations for animal drugs that can prevent human diseases – i.e. speed up the development of drugs to treat animals to help prevent animal-to-human transmission, which is suspected to have occurred with outbreak of novel coronavirus, leading to the SARS-CoV-2 pandemic.

HEALTH CARE WORKFORCE

Sec. 3401. Reauthorization of health professions workforce programs.	<ul style="list-style-type: none">• Reauthorizes and updates Title VII of the Public Health Service Act (PHSA), which pertains to programs to support clinician training and faculty development, including the training of practitioners in family medicine, general internal medicine, geriatrics, pediatrics, and other medical specialties.• Directs the Secretary of HHS to develop a comprehensive and coordinated plan for health workforce programs, which may include performance measures and the identification of gaps between the outcomes of such programs and relevant workforce projection needs.• Title VII programs strengthen the health professions workforce to better meet the health care needs of certain populations, such as older individuals and those with chronic diseases, who could be at increased risk of contracting COVID-19.
Sec. 3402. Health workforce coordination.	
Sec. 3403. Education and training relating to geriatrics.	
Sec. 3404. Nursing workforce development.	<ul style="list-style-type: none">• Reauthorizes and updates Title VIII of the PHSA, which pertains to nurse workforce training programs.• Updates reporting requirements to include information on the extent to which Title VIII programs meet the goals and performance measures for such activities, and the extent to which HHS coordinates with other Federal departments on related programs.• Permits Nurse Corps loan repayment beneficiaries to serve at private institutions under certain circumstances.• Title VIII programs help to address current and emerging health care challenges by supporting the development of a robust nursing workforce, as nurses are critical in responding to the COVID-19 pandemic and future public health emergencies.

OVER THE COUNTER DRUGS

<p>Sec.3851 Regulation of certain nonprescription drugs that are marketed with an approved drug application</p>	<ul style="list-style-type: none"> • Reforms the regulatory process for over-the-counter (OTC) drug monographs by allowing the Food and Drug Administration (FDA) to approve changes OTC drugs administratively, rather than going through a full notice and comment rulemaking. • Currently, FDA can approve all other drugs without going through a full notice and comment rulemaking, and this legislation makes sure OTC medicines receive the same treatment as other drugs. • Incentivizes companies to create more innovative products by providing an 18-month market-exclusivity component that rewards a return on investment for new OTC drugs.
<p>Sec.3852 Misbranding</p>	<ul style="list-style-type: none"> • Clarifies that an OTC drug that does not comply with the monograph requirements is misbranded.
<p>Sec.3853. Drugs excluded from over-the-counter drug review</p>	<ul style="list-style-type: none"> • Clarifies that nothing in this bill will apply to drugs previously excluded by the FDA from the Over-the-Counter Drug Review under a specified Federal Register document.
<p>Sec.3854. Treatment of Sunscreen Innovation Act</p>	<ul style="list-style-type: none"> • Clarifies that sponsors of sunscreen ingredients with pending orders have the option to see review in accordance with the Sunscreen Innovation act or to see review under the new monograph review process.
<p>Sec.3855. Annual update to Congress on appropriate pediatric indication for certain OTC cough and cold drugs</p>	<ul style="list-style-type: none"> • Requires an annual update to Congress regarding FDA’s progress in evaluating certain pediatric indications for certain cough and cold monograph drugs for children under age six.
<p>Sec.3856. Technical corrections</p>	<ul style="list-style-type: none"> • Includes technical corrections to the Food and Drug Administration Reauthorization Act of 2017 and existing law.
<p>S.3861. Finding</p>	<ul style="list-style-type: none"> • Declares that the fees paid pursuant to this section will be dedicated to FDA review of over-the-counter monograph drugs.
<p>S.3862. Fees relating to over-the-counter drugs</p>	<ul style="list-style-type: none"> • Establishes a new FDA user fee to allow the agency to hire additional staff members to ensure there is adequate agency oversight to approve changes to OTC drugs.

EDUCATION PROVISIONS	
Sec. 3502. Definitions	<ul style="list-style-type: none"> • Sets definitions for terms of “coronavirus,” “qualifying emergency,” “institution of higher education,” and “Secretary.”
Sec. 3503. Campus-Based Aid Waivers	<ul style="list-style-type: none"> • Waives the institutional matching requirement for campus-based aid programs. • Allows institutions to transfer unused work-study funds to be used for supplemental grants.
Sec. 3504. Use of Supplemental Educational Opportunity Grants for Emergency Aid	<ul style="list-style-type: none"> • Allows institutions to award additional SEOG funds to students impacted by COVID-19.
Sec. 3505. Continuing Federal Work Study to Continue During a Qualifying Emergency	<ul style="list-style-type: none"> • Allows institutions to issue work-study payments to students who are unable to work due to work-place closures as a lump sum or in payments similar to paychecks.
Sec. 3506. Adjustments of Subsidized Loan Limits	<ul style="list-style-type: none"> • For students who dropped out of school as a result of COVID -19 excludes the term from counting toward lifetime subsidized loan eligibility.
Sec. 3507 Exclusion from Federal Pell Grant Duration Limit	<ul style="list-style-type: none"> • For students who dropped out of school as a result of COVID -19 excludes the term from counting toward lifetime Pell eligibility.
Sec. 3508. Institutional Refund and Federal Student Loan Flexibility.	<ul style="list-style-type: none"> • For students who dropped out of school as a result of COVID -19, the student is not required to return Pell grants or federal student loans to the Secretary. • Waives the requirement that institutions calculate the amount of grant or loan assistance that the institution must return to the Secretary in the case of students who dropped out of school as a result of COVID-19.

Sec. 3509. Satisfactory Progress	<ul style="list-style-type: none"> For students who dropped out of school as a result of COVID -19, the student's grades do not effect a student's federal academic requirements to continue to receive Pell Grants or student loans.
Sec. 3510. Continuing Education at Affected Foreign Institutions	<ul style="list-style-type: none"> Permits foreign institutions to offer distance learning to U.S. students receiving title IV funds for the duration of the COVID-19 declaration of disaster.
Sec. 3511 National Emergency Educational Waivers	<ul style="list-style-type: none"> Provide the Secretary of Education with waiver authority to provide waivers from the Elementary and Secondary Education Act, except civil rights laws, that are necessary and appropriate due to the COVID-19 declaration of disaster.
Sec. 3512. HBCU Capital Financing Program	<ul style="list-style-type: none"> Authorizes the Secretary of Education to defer payments on current HBCU Capital Financing loans during the national emergency period so HBCUs can devote financial resources to COVID-19 efforts.
Sec. 3513 Temporary Relief for Federal Student Loan Borrowers	<ul style="list-style-type: none"> Requires the Secretary to defer student loan payments, principal, and interest for 6 months, through September 30, 2020, without penalty to the borrower for all federally owned loans. This provides relief for over 95 percent of student loan borrowers.
Sec. 3514. Provisions Related to the Corporation for National and Community Service	<ul style="list-style-type: none"> Provide participants serving in the National Service Corps programs with the educational award they were due to receive before their duties had been suspended or placed on hold during the COVID-19 declaration of disaster. Extend the age limits and the terms of service to allow individuals serving in national service programs to continue participating in programs after the COVID-19 declaration of disaster ends.
Sec. 3515. Workforce Response Activities.	<ul style="list-style-type: none"> Provides local workforce boards with additional flexibility to use funds received under the Workforce Innovation and Opportunity Act for administrative costs, including for online resources. Allows Governors to utilize reserved workforce funds on rapid response activities in response to COVID-19.
Sec. 3516 Technical Amendments	<ul style="list-style-type: none"> Makes technical edits to the FUTURE Act to improve implementation and aid student loan borrowers.

<p>Sec. 3517. Waiver Authority and Reporting Requirements for Institutional Aid</p>	<ul style="list-style-type: none"> • Authorizes the Secretary of Education to waive certain outcome requirements for FY2021 grant programs for HBCU and other Minority Serving Institutions.
<p>Sec. 3518 Authorized Uses and Other Modifications for Grants</p>	<ul style="list-style-type: none"> • Authorizes the Secretary of Education to waive or modify current allowable uses of funds for institutional grant programs (TRIO/GEARUP/Title III/Title V/and sections of Title VII) so colleges can re-deploy resources and services to COVID-19 efforts. • Permits institutions to request waivers from the Secretary of Education for financial matching requirements in competitive grant and other MSI grant programs in the Higher Education Act so colleges can devote institutional resources to COVID-19 efforts.
<p>Sec. 3519. Service Obligation to Teachers</p>	<ul style="list-style-type: none"> • For teachers who could not finish their year of teaching service as a result of COVID-19, their partial year of service shall be counted as a full year of service toward TEACH grant obligations or Teacher Loan Forgiveness. • Waives a requirement that teachers must serve consecutive years of teaching service for Teacher Loan Forgiveness eligibility, if a teacher's service is not consecutive as a result of COVID-19.

LABOR PROVISIONS	
<p>Sec. 3601. Limitation on Paid Family and Medical Leave.</p>	<ul style="list-style-type: none"> • Creates a limitation stating an employer shall not be required to pay more than \$200 per day and \$10,000 in the aggregate for each employee under this section.
<p>Sec. 3602. Limitation on Paid Sick Leave</p>	<ul style="list-style-type: none"> • Creates a limitation stating an employer shall not be required to pay more than \$511 per day and \$5,110 in the aggregate for sick leave or more than \$200 per day and \$2,000 in the aggregate to care for a quarantined individual or child for each employee under this section.

<p>Sec. 3603. Unemployment Insurance.</p>	<ul style="list-style-type: none"> • Provides that applications for unemployment compensation and assistance with the application process, to the extent practicable, be accessible in two ways: in person, by phone, or online.
<p>Sec. 3604. OMB Waiver of Paid Family and Paid Sick Leave Requirement.</p>	<ul style="list-style-type: none"> • Allows the Director of the Office of Management and Budget to exclude for good cause certain Executive Branch employees from the Paid Family Leave mandate. • Allows the Director of the Office of Management and Budget to exclude for good cause certain Executive Branch employees from the Paid Sick Leave mandate.
<p>Sec. 3605. Paid Family and Medical Leave for Rehired Employees</p>	<ul style="list-style-type: none"> • Allows an employee who was laid off by an employer March 1, 2020, or later to have access to paid family and medical leave in certain instances if they are rehired by the employer. • Employee would have had to work for the employer at least 30 days prior to being laid off.
<p>Sec. 3606. Advance of Paid Leave Tax Credit</p>	<ul style="list-style-type: none"> • Allows employers to receive an advance tax credit from Treasury instead of having to be reimbursed on the back end. • Creates regulatory authority to implement the tax credit advances.
<p>Sec. 3607. Expansion of DOL Authority to Postpone Certain Deadlines.</p>	<ul style="list-style-type: none"> • Amends Section 518 of ERISA to provide the Department of Labor the ability to postpone certain ERISA filing deadlines for a period of up to one year in the case of a public health emergency.
<p>Sec. 3608. Single-Employer Plan Funding Rules</p>	<ul style="list-style-type: none"> • Provides single employer pension plan companies with more time to meet their funding obligations by delaying the due date for any contribution otherwise due during 2020 until January 1, 2021. • At that time, contributions due earlier would be due with interest. • The bill also provides that a plan's status for benefit restrictions as of December 31, 2019, will apply throughout 2020.

<p>Sec. 3609. Application of Cooperative and Small Employer Charity Pension Plan Rules to Certain Charitable Employers whose primary Exempt Purpose is Providing services with respect to Mothers and Children</p>	<ul style="list-style-type: none">• Amends a the definition of CSEC Plans to provide that a pension plan will be a CSEC plan if, as of January 1, 2000, the plan was sponsored by an employer that (i) is exempt from taxation under Code section 501(c)(3), (ii) has been in existence since 1938, (iii) conducts medical research directly or indirectly through grant making, and (iv) has as its primary exempt purpose providing services with respect to mothers and children.• This section is effective for plan years beginning after December 31, 2018.
<p>Sec. 3610. Federal Contractor Authority</p>	<ul style="list-style-type: none">• Ensures that federal contractors who cannot perform work at their duty-station or telework because of the nature of their jobs due to COVID-19, continue to get paid.