

CORONAVIRUS AID, RELIEF, AND ECONOMIC SECURITY ACT

The “CARES Act:” What’s in It & What’s Missing

On March 27, 2020, Congress passed the [CARES Act \(H.R. 748\)](#), a \$2 trillion funding package aimed at addressing the economic impact of the COVID-19 pandemic on Americans. The CARES Act is the third legislative package to date building on the [Families First Coronavirus Response Act \(H.R. 6201\)](#) signed into law on March 18, and the [Coronavirus Preparedness and Response Act \(H.R. 6074\)](#), signed into law March 6, 2020.

Unfortunately, despite the fact that older adults and people with underlying and chronic health conditions are most at risk from both the virus and the range of harms caused by isolation during strict social distancing, the CARES Act and the legislative packages preceding it focused very little on policies to specifically help older adults and people with disabilities. Below we provide a high-level summary of major provisions of the CARES Act that impact low-income older adults, and put forth additional policies Congress must immediately enact to meet the needs of low-income older adults in this crisis.

Financial Relief

- **Individual Tax Rebates/Stimulus Payments.** Individuals with gross incomes up to \$75,000 (\$150,000 married filing jointly) are eligible for a tax rebate in the amount of \$1,200 (\$2,400 married). Families receive an additional \$500 per child. The amount of the rebate will phase out by \$5 for every \$100 up to \$99,000 (\$198,000 married). Individuals who are undocumented immigrants, file taxes using an Individual Taxpayer Identification Number, or adults who were claimed as dependents are not eligible for the rebate. To receive the rebate, individuals must file a 2018 or 2019 tax return using Social Security Numbers for themselves and their dependent children. Many low-income older adults who receive only Supplemental Security Income (SSI) benefits or who have low incomes and normally do not file tax returns will need to file in order to obtain the rebate. Rebates will not affect eligibility for federal means-tested programs like Medicaid, SSI, and SNAP. [Read more here.](#)
- **Unemployment Insurance.** The law enacts the Federal Pandemic Unemployment Compensation (FPUC). This federal funding will provide an additional \$600 a week for any worker eligible for state or federal unemployment compensation (UC) benefits. The FPUC will be paid in addition to and at the same time (but not necessarily in the same check) as regular state or federal UC benefits. Receipt of FPUC will not impact Medicaid eligibility. The CARES Act also extends the period of unemployment benefits by 13 weeks and allows states to provide unemployment assistance to those who typically would not qualify for benefits as long as the unemployment is related to COVID-19. This would allow some family caregivers and direct care workers access to unemployment assistance. [Read more here.](#)
- **Mortgages and Evictions.** The CARES Act prohibits foreclosures on all federally-backed mortgage loans for a 60-day period beginning on March 18, 2020, and provides borrowers who have experienced financial hardship related to COVID-19 a 180-day moratorium on making loan payments on federally-backed

mortgages. Applicable mortgages include those purchased by Fannie Mae and Freddie Mac, insured by HUD, VA, or USDA, or directly made by USDA.

A landlord whose mortgage is insured or assisted in any way by HUD, Fannie Mae, Freddie Mac, the rural housing voucher program, or the Violence Against Women Act of 1994 is prohibited from initiating any eviction proceeding or from charging fees or other charges related to the nonpayment of rent for 120 days beginning from the date of enactment of the law (March 27).

- **Student Loans.** The law allows student loan borrowers to suspend their loan payments for six months ending September 30, 2020. Interest is deferred during this period. This relief is available to those with federally-held loans or those who consolidate their commercial loans with federally held loans.

What's Still Urgently Needed: Economic Security

Increase SSI. The 8.2 million older adults and people with disabilities who have the lowest income and are living on just \$783 a month need more than a one-time rebate. Congress should act to increase the SSI benefit from its current level below the federal poverty line to 200% of the federal poverty level. Congress should also enact the [SSI Restoration Act](#) (H.R. 4280/S. 2753) that would immediately boost income for SSI recipients by increasing income disregards, eliminating in-kind support and maintenance deductions, and eliminating the marriage penalty.

Suspend or Raise Asset Limits for Means Tested Programs. During this public health crisis, older adults should not have to struggle to pay for basic necessities, or worry that \$100 too much in the bank could complicate their eligibility. Congress should act to eliminate or raise asset limits for older adults and people with disabilities enrolled in SSI, Medicaid, Medicare Savings Programs, Medicare Low-Income Subsidy, SNAP, and other means tested programs.

Extend Paid Leave to All Family Caregivers. Many older adults and people with disabilities of all ages will no longer have access to their normal source of care through adult day programs or limited availability of home care workers. This means family caregivers are required to provide more care to their loved ones and take time from their paid jobs. Congress should enact legislation to ensure paid leave is extended to family caregivers of adults by enacting the [PAID Leave Act](#) (S. 3513).

Medicare and Medicaid

- **Medicare.** The CARES Act requires Medicare Part D plans to provide up to a 90-day supply of a prescription medication if requested by a beneficiary during the COVID-19 emergency period, and makes clear that Medicare beneficiaries will not be responsible for any cost sharing for a COVID-19 vaccine, once developed. The law also expands Medicare's coverage of telehealth to allow more beneficiaries to receive care and dialysis treatment at home and individuals to be recertified for hospice care.
- **Medicaid.** The CARES Act extends funding for the Money Follows the Person and spousal impoverishment protections for married individuals receiving home and community-based services (HCBS) until November 30, 2020. The law also allows state Medicaid programs to pay for direct support professionals and caregivers trained to help with activities of daily living to assist people with disabilities while they are in the hospital.

What's Still Urgently Needed: Medicare and Medicaid

Increase the FMAP. Medicaid and state governments must have the resources they need to ensure they can care for low-income older adults and people with disabilities who are at most risk of serious illness. Congress should therefore increase the FMAP beyond the 6.2 percent authorized in the Families First bill to 12 percent [as requested](#) by the National Governors Association. Congress should require that HHS extend any FMAP bump to the 1915(k) Community First Choice Program. In addition, Congress should authorize 100% FMAP to states that expand eligibility for their Medicare Savings Programs.

Expand Enrollment Periods. The ability for people to enroll in Medicare has been severely impeded. Medicare enrollment periods should be extended until October 15, 2020, or three months after the end of a federal or state emergency declaration with respect to COVID-19, whichever is later. During the emergency, Medicare coverage should also become effective immediately after enrollment for new enrollees or, at the enrollee's option, retroactive to the date the individual was first eligible. A national special open enrollment period (SEP) is also needed to allow those without insurance or who are in non-ACA compliant plans to enroll in coverage in the marketplaces.

Suspend Medicare Premiums. To make health care more affordable during this emergency, Congress should suspend Medicare premiums for all enrollees with income below 200% FPL (\$25,520).

Expand Access to HCBS and Medicare Savings Programs. Congress should pass the [Coronavirus Relief for Seniors and People with Disabilities Act](#) (S. 3544), which would provide grants to states to increase their Home and Community-Based Services (HCBS) to ensure older adults can receive the services they need in their homes and communities rather than nursing facilities, and auto-enroll all low-income Medicare beneficiaries into Medicare Savings Programs. In addition, Congress should expand eligibility for the Qualified Medicare Beneficiary program to 150% of the federal poverty level to eliminate cost barriers to care and treatment for low-income older adults and people with disabilities.

Make HCBS extensions permanent. Congress should make Money Follows the Person and HCBS spousal impoverishment protections permanent. The uncertainty of their continuation past November 30, 2020, makes it difficult for states to administer and operationalize these important programs and protections, particularly during a crisis.

Ensure interpretation services are available for telehealth. Congress should require Medicare providers to provide telehealth interpretation services for patients. While professional interpretation services are always important for quality care, this is even more vital for telehealth as people with limited English proficiency may not be able to rely on family or other supports to help them understand information.

Support SHIP Counselors & Senior Medicare Patrol. Congress should provide additional funding and support to enable SHIP counselors and the Senior Medicare Patrol to provide assistance remotely from their own homes.

Appropriations

Congress passed a companion [Appropriations Bill](#) that includes supplemental funding for programs critical to low-income older adults.

- **Administration for Community Living.** \$955 million to support Older Americans Act and Title III B activities, including funding of Aging and Disability Resource Centers and Centers for Independent Living, nutrition services, supports for family caregivers, and elder justice protection activities including the long-term care ombudsman.

- **Centers for Medicare & Medicaid Services (CMS).** \$100 million to support additional infection control surveys for nursing facilities.
- **Legal Services Corporation.** \$50 million to help address civil legal aid needs for low-income Americans. This funding can help low-income clients facing job losses, eviction, domestic violence, and consumer scams resulting from the coronavirus crisis.
- **Community Services Block Grant (CSBG).** \$1 billion to help communities address the consequences of increasing unemployment and economic disruption.
- **Homeless Assistance Grants.** \$4 billion to address the impact of COVID-19 among individuals and families who are homeless or at risk of homelessness, and to support additional homeless assistance, prevention, and eviction prevention assistance. Additional eviction prevention activities including rapid rehousing, housing counseling, and rental deposit assistance will mitigate the adverse impacts of the pandemic on working families.
- **Project-Based Rental Assistance.** \$3 billion for housing providers to help more than 4.5 million low-income households made up of more than 9.6 million individuals currently assisted by HUD to safely remain in their homes or access temporary housing assistance in response to economic and housing disruptions caused by COVID-19. This includes \$50 million for seniors and \$15 million for people with disabilities to fund rental assistance, service coordinators, and support services for the more than 114,000 affordable households for seniors and over 30,000 affordable households for low-income persons with disabilities.
- **Low Income Home Energy Assistance Program (LIHEAP).** \$900 million to provide utility assistance to low-income households.
- **Supplemental Nutrition Assistance Program.** \$15.5 billion in funding that was authorized under the Families First Coronavirus Act for SNAP.
- **The Emergency Food Assistance Program (TEFAP).** \$450 million for food banks.
- **Social Security Administration.** \$38 million for its role in helping carry out the rebates, in addition to \$300 million to support essential telework, communication needs, and salaries and benefits of Federal employees impacted by office closures. Funding to process disability and retirement workloads and backlogs when SSA offices reopen to the public is also included.
- **Substance Abuse and Mental Health Services Administration (SAMHSA).** \$425 million for SAMHSA to increase access to mental health services in our communities through Community Behavioral Health Clinics, suicide prevention programs, and emergency response spending that can target support where it is most needed, such as outreach to those experiencing homelessness.

What's Still Urgently Needed

Strengthen Communication in Nursing Facilities and other Licensed Congregate Settings. With visitation restrictions in place, required facilitation of communication between residents and ombudsman programs is needed to ensure residents have access to information and an advocate, in the absence of in-person conversations. Funding is also needed to facilitate residents' communication with family and friends, including phones, tablets, and other mobile devices, along with adequate wi-fi capacity inside the setting.

Increase Access to Food Assistance. Congress should increase the minimum SNAP benefit levels by a minimum of 15 percent to ensure older adults and their families have access to food during this period.

Increased Funding for Legal Services and Elder Abuse & Scam Prevention. Provide increased funding for Older Americans Act Title III B funding to combat the heightened risk for elder abuse and neglect, and provide other targeted legal assistance to older adults. Congress should also pass the Stop Senior Scams Act (S.149) and other measures to mitigate the number of scams and spreading of misinformation.

Conclusion

We are pleased that Congress took quick action on a range of bipartisan relief measures for the millions of people suffering across the nation. We will continue to use our voice and our expertise to push for measures that are more explicitly targeted toward older adults and people with disabilities in future relief packages. We will also continue to update our network on additional policy developments as we plan future trainings and materials to help advocates understand and utilize the new policies. **Questions, contact info@justiceinaging.org.**