

**The Families First Coronavirus Response Act (FFCRA) Funding Provisions (H.R. 6201)**  
**Chart No. 6**

| Funding Agency                              | Purpose   | Amount  | Requirements/Administration   |
|---|---|---|---|
| <b>US Health &amp; Human Services (HHS)</b> | FFCRA provides temporary enhanced funding for the Federal share of cost for Medicaid to relieve state budgetary pressure caused by COVID-19's likely impacts on state Medicaid expenditures and tax revenues, | <p>6.2 percentage point increase in the Federal Government's share of cost for state Medicaid programs.</p> <p>For Louisiana Medicaid beneficiaries and services, excluding the Expansion Group,* the Federal Government pays 66.8 percent of Medicaid costs. Under the FFCRA, beginning January 1, 2020 and ending the first quarter in which the COVID-19 public health emergency is <i>not</i> in effect, the federal share of cost for those Medicaid beneficiaries and services will increase from 66.8 percent to 73 percent. Because Medicaid is an entitlement program, the amount by which federal funding will increase is not limited to a fixed appropriation and instead will vary based on Medicaid beneficiary-eligibility levels and overall program costs.</p> | <p>The FFCRA places a set of conditions on states in order for them to receive the enhanced federal funding. To qualify for the funding enhancement, the State of Louisiana may <i>not</i>:</p> <ul style="list-style-type: none"> <li>• Make changes to Medicaid eligibility rules and procedures that are more restrictive than those in place as of January 1, 2020.</li> <li>• Charge higher premiums than were in place as of January 1, 2020.</li> <li>• Impose cost sharing for COVID-19 testing, services, and treatments.</li> <li>• Terminate coverage for Medicaid members who were enrolled in the program on or after March 18, 2020 unless the member (1) moves out of state, (2) voluntarily disenrolls, or (3) is deceased.</li> <li>• Increase local governments' share of cost—in percentage terms—for</li> </ul> |

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|                |         | *The Federal cost share for Louisiana's Medicaid Expansion group is currently 90%. It is unclear whether the 6.2% point increase will apply to this group. | Medicaid expenditures.      |

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| HHS            | FFCRA provides provisions to require universal coverage of COVID-19 testing without cost sharing by both private and public (Medicaid and Medicare) insurers. | Will vary based on number of tests. | <ul style="list-style-type: none"> <li>• States have the option to enroll uninsured individuals in Medicaid <i>for purposes of COVID-19 testing only</i>. While Medicaid costs typically are shared by states and the Federal Government, the Federal Government will cover 100 percent of the costs of providing COVID-19 testing to this population through Medicaid.</li> <li>• Additionally, for individuals who are uninsured and do not otherwise have coverage for COVID-19 testing (such as if a state chooses not to cover such testing through Medicaid), the FFCRA provides up to \$1 billion to reimburse health care providers for tests performed for such individuals. This funding would flow to health care providers through the Federal National Disaster Medical System.</li> </ul> |

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| <p><b>US Department of Agriculture –Food and Nutrition Service (USDA-FNS)</b></p> | <p>The FFCRA includes provisions related to nutrition assistance, including to the Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC), the Temporary Emergency Food Assistance Program (TEFAP) and the Older Americans Act senior nutrition program (OAA).</p> | <p>The additional funding for WIC, TEFAP, and OAA are intended to support nutrition access for individuals adversely impacted by the current public health crisis, such as those who have recently lost their jobs. Therefore, how much additional funding for each of these programs Louisiana will receive will depend on the number of new recipients.</p> <p>Unlike these programs, SNAP is an entitlement program for which funding automatically increases as more people become eligible (for example, during an economic downturn). Consequently, H.R. 6201 does not explicitly increase funding for SNAP, although it is likely Louisiana will receive increased SNAP funding as the economy contracts and caseloads increase.</p> | <p>The FFCRA provides the following:</p> <ul style="list-style-type: none"> <li>• <b>Increases Programmatic Flexibility.</b> <ul style="list-style-type: none"> <li>○ Allows states to develop plans increasing SNAP benefits for families with children unable to access free or reduced-priced meals due to COVID-19 school closures.</li> <li>○ Waives (for the duration of the current public health emergency as declared by the federal Secretary of Health and Human Services) the requirement that certain adults without children work a minimum of 20 hours per week to receive SNAP benefits.</li> <li>○ Waives (for the duration of the current public health emergency as declared by the federal Secretary of Health and Human Services) the requirement that eligibility assessments for SNAP and WIC be conducted in person and allows states to request waiver of any</li> </ul> </li> </ul> |

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|                |         |        | <p>additional requirements believed to impede recipients during the crisis.</p> <ul style="list-style-type: none"> <li>• <b>Provides Additional Funding for Certain Existing Programs.</b> <ul style="list-style-type: none"> <li>○ Increases WIC nutrition assistance by \$500 million nationally.</li> <li>○ Increases TEFAP by \$400 million nationally.</li> <li>○ Increases OAA senior nutrition program assistance by \$250 million nationally.</li> </ul> </li> </ul> |