

Coronavirus Response & Relief Supplemental Appropriations Act Public Law (P.L.) 116-260

At-a-Glance Guide

July 14, 2023

	Testing	Vaccination
Purpose of Funding	To expand access to COVID-19 testing, contact tracing, surveillance, containment and mitigation.	To expand access to COVID-19 vaccines.
Appropriating Statute	Coronavirus Response and Relief Supplemental Appropriations Act, 2020 Div. M, Title III (CRRSAA) (P.L. 116-260)	Coronavirus Response and Relief Supplemental Appropriations Act, 2020 (P.L. 116-260)
Key Activities Authorized by Statute	<ul style="list-style-type: none"> • COVID-19 testing, contact tracing, surveillance, containment, and mitigation • Support for workforce, epidemiology, and use by employers in other settings • Scale up testing by public health, academic, commercial, hospital laboratories, community-based testing sites, mobile testing sites, health care facilities, and other entities engaged in COVID-19 testing • Purchase, construct, alter, renovate, or equip non-federally owned facilities to improve COVID-19 preparedness and response capability 	<ul style="list-style-type: none"> • To plan, prepare for, promote, distribute, administer, monitor, and track COVID-19 vaccines to ensure broad-based distribution, access, and vaccine coverage
Amount Provided to the IHS	\$790 million	\$210 million
Period of Availability	FY 2021 – FY 2022	FY 2021 – FY 2024
Consultation/Confer Dates	<ul style="list-style-type: none"> • Tribal Consultation: January 4, 2021 • Urban Confer: January 4, 2021 	<ul style="list-style-type: none"> • Tribal Consultation: January 4, 2021 • Urban Confer: January 4, 2021
Letter to Tribal/UIO Leaders	<u>January 15, 2021</u>	<u>February 2, 2021</u>
Allocation Methodology	<ul style="list-style-type: none"> • \$550 million to IHS and Tribal Health Programs, using existing distribution methodologies for program increases in Hospitals and Health Clinics, Purchased/Referred Care, Alcohol and Substance Abuse, Mental Health, 	<ul style="list-style-type: none"> • \$190 million to IHS and Tribal Health Programs, using existing distribution methodologies for program increases in Hospitals and Health Clinics, Purchased/Referred Care, Community

	<p>Community Health Representatives, and Public Health Nursing</p> <ul style="list-style-type: none"> • \$50 million to UIOs by providing an equal payment for each UIO and an additional payment based on each UIO's total number of Urban Indian users • \$190 million to purchase and distribute COVID-19 tests, test kits, testing supplies, therapeutics, and related personal protective equipment through the IHS National Supply Service Center at no cost to IHS, Tribal, and Urban Indian Health programs 	<p>Health Representatives, and Public Health Nursing.</p> <ul style="list-style-type: none"> • \$10 million to UIOs by providing an equal payment for each UIO and an additional payment based on each UIO's total number of Urban Indian users • \$10 million for additional public health support activities, including additional resources for Tribal Epidemiology Centers, the development and production of culturally appropriate education materials, partnerships with national AI/AN organizations and academic institutions, and other critical support activities
<p>Financial Reporting Requirements</p>	<p>Statute requires Tribal funding recipients to provide:</p> <ul style="list-style-type: none"> • An update to the COVID-19 testing plans required by the Paycheck Protection and Health Care Enhancement Act (P.L. 116-139), which must be publicly available • Quarterly reports outlining the uses of the funding, as well as commitments and obligations. <ul style="list-style-type: none"> ○ Categories of uses for reporting: <ul style="list-style-type: none"> ▪ Salary ▪ Fringe ▪ Equipment ▪ Travel ▪ Supplies ▪ Contractual ▪ Indirect ▪ Other 	<p>N/A</p>

Reimbursement of Allowable Costs

N/A

Funds can be used to restore (either directly or through reimbursement), obligations incurred for coronavirus vaccine promotion, preparedness, tracking, and distribution prior to the enactment of this Act (December 27, 2020).