

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



June 29, 2020

COVID-19 Response

Advocacy Report



Table of Contents

- Government Response to COVID-193**
- Federal Response..... 3**
- State Response 3**
- AAP Priorities..... 4**
- Supporting Frontline Pediatricians 4**
 - Relief for Pediatric Practices.....4
- Improving Health Care Coverage..... 5**
 - Medicaid/CHIP5
 - Telehealth.....5
- Ensuring Children Have Access to Immunizations 5**
 - Preserving the Vaccine Delivery System5
- Supporting Children Globally..... 5**
 - World Health Organization.....5
 - Funding for Global COVID-19 Response6
 - Preventing Future Pandemics6
- State Efforts to Reopen Safely 6**
 - State Reopening Plans6
 - Child Care and Early Education Reopening Plans6
 - School Reopening Plans6
 - Contact Tracing7
 - Testing7
 - Health Equity.....7
- Grassroots Advocacy.....7**
- AAP Advocacy Alerts & Emails 7**
- How to Sign Up for Advocacy Emails 7**
- Engage with AAP on Social Media.....7**

Government Response to COVID-19

The novel coronavirus (SARS-CoV-2) pandemic and attendant respiratory illness COVID-19 have consumed Washington's attention as members of Congress and Executive Branch leaders attempt to contain the outbreak and provide relief to Americans. As a result, the AAP's advocacy efforts are now focused on ensuring federal, state, and local governments respond to the needs of children, families, and pediatricians.

The AAP is in regular communication with legislators and top administration officials. Among AAP's top priorities is ensuring that pediatricians have access to immediate financial relief that enables them to continue providing care to children. While funds from the provider relief fund have now been made available to pediatricians that bill Medicaid and CHIP, more must be done to ensure that pediatric practices are able to provide quality care to children and that children are able to receive timely immunizations. The AAP is calling for stronger federal leadership on Medicaid, telehealth, vaccines, testing, and other core components of pediatric care. The AAP is also focused on ensuring that the response to COVID-19 at all levels of government accounts for children's special needs, including justice-involved youth, children from low-income families, children in the child welfare system, and children in immigrant families.

Federal Response

Congress has passed four pieces of legislation to address the COVID-19 pandemic to date. To read more about those bills and AAP's summary of relevant provisions, please see the **April 15, 2020 Advocacy Report**.

On May 15, the House passed the Health and Economic Recovery Omnibus Emergency Solutions (HEROES) Act. The \$3 trillion coronavirus response legislation included many priorities from House Democrats. Among the provisions important to pediatricians and families are a temporary increase in the Medicaid FMAP, additional financial relief for families, an increase in the child tax credit, and additional resources for the Provider Relief Fund, federal nutrition programs, child care, and child abuse prevention. Additionally, the bill allows 501c(6) non-profits to qualify for the Paycheck Protection Program, which would allow numerous AAP chapters to apply.

The legislation will now head to the Senate, where it is unlikely to gain much traction among the Republican-controlled chamber. The Senate is not expected to address

another legislative response package until after the July 4th holiday.

State Response

COVID-19 has strained state and local governments in an unprecedented way. Governors, state legislators, state agencies, and local governments are charged with the day-to-day work of COVID-19 response efforts. Now, governors are relaxing stay-at-home measures, with some taking a more measured approach than others—in states where the governor's mansion and the legislature are of opposing political parties, governors have faced political pressure with respect to the speed at which restrictions are lifted. States are scaling up contact tracing and rigorous COVID-19 testing in order to curb the spread of the disease with more of the public now leaving their homes and coming into contact with others. These state level actions are further detailed below.

Many state legislatures postponed or adjourned their regular sessions this spring to comply with safe social distancing practices. For those that did not fully adjourn, state lawmakers have found ways to resume legislative business via extensions of session days, one-day special sessions, and other workarounds to provide continuity of legislative business.

The bulk of legislative output is focused on the COVID-19 response and related appropriation of state funding. As states begin the reopening of businesses and institutions and a resumption of economic activity in full, state governments face a daunting budgetary landscape with some states projecting revenue shortfalls of as much as 25% for the upcoming fiscal year that begins July 1 in most states. A report from the **Center on Budget and Policy Priorities (CBPP)**, details how states are looking towards a considerable drop in tax revenues to fund both essential and discretionary programs, with implications for child health and wellness. State governments (with **some exceptions**) must put forth balanced budgets, and, as such, AAP chapters will need to prepare in the coming months and into 2021 to advocate for child health and pediatric practices in a challenging policy environment.

AAP chapters have been an indispensable voice for children on many aspects of the COVID-19 response at the state level. Remaining challenges include persuading families that pediatric clinics are open and ready to ensure the safe provision of well-child care and immunizations. This is critically important as schools discuss reopening plans for the 2020-2021 academic year. The AAP has released **guidance on safe return to in-person education in schools**, which strongly advocates that all policy considerations for

the coming school year should start with a goal of having students physically present in school. With this goal in mind, AAP chapters are working closely with school officials on both the state and local school district levels to ensure that schools reopen safely.

.....

Note: This report covers developments that occurred after May 19, 2020. To view the previous advocacy report containing updates from April 15 to May 19, please click [here](#). The report covering updates that occurred before April 15 is available [here](#).

AAP Priorities

Supporting Frontline Pediatricians

Relief for Pediatric Practices

On June 9, the Department of Health and Human Services (HHS) announced that pediatricians, pediatric medical subspecialists, and pediatric surgeons will finally be able to access financial relief from the CARES Act Provider Relief Fund. Pediatricians, pediatric medical subspecialists, and pediatric surgeons can apply for a new Medicaid and CHIP targeted allocation of approximately \$15 billion.

Any practice or clinician who has billed Medicaid and CHIP, including Medicaid/CHIP managed care plans, from January 2018–December 31, 2019, provided patient care after January 31, 2020, and who has not received any funding from the Provider Relief Fund general distribution (for those with Medicare billings), can apply. HHS has listed eligibility criteria [here](#).

HHS has indicated that providers should expect to receive an initial payment of at least 2% of the reported annual patient care revenue, including all payers. Additional funds may be made available later to account for factors such as a high volume of Medicaid patients.

In response to the announcement, AAP President Sally Goza issued a statement saying: “While today’s announcement brings a measure of relief to pediatricians worried about their financial viability in the short term, important questions remain about whether this funding will offer the breadth and scope of relief our members so desperately need.”

While this funding announcement is a positive first step, the Academy acknowledges that the Medicaid & CHIP Provider

Relief Funding does not go far enough in terms of eligibility and amount. Specifically, the Academy is concerned with the policy decision to exclude practices that received any amount of funding from the general distribution to apply for the Medicaid and CHIP targeted allocation. Additionally, pediatric providers who do not care for Medicaid/CHIP patients are not eligible for relief funds.

Additional information can be found on the [HHS website](#). Further, the AAP has developed a list of answers to **frequently asked questions**. In June, the Academy hosted a **webinar** explaining how pediatricians, pediatric medical subspecialists, and pediatric surgeons can access federal financial relief. Finally, the Section on Administrative and Practice Management (SOAPM) has developed a detailed **application guide** to assist members in applying for the funds.

The June 9 announcement reflected months of AAP advocacy efforts to bring provider relief to pediatricians. Since the pandemic began, the Academy has been **urging** the swift, direct allocation of funding to pediatricians, including subspecialists. AAP has pushed for the funding to account for lost revenue and higher expenses attributable to COVID-19, with as few barriers as possible, and to go to all pediatricians, regardless of Medicaid participation and without cumbersome reporting requirements. Copies of the letters AAP has sent to HHS and Congress advocating for financial relief for pediatricians can be accessed through the COVID-19 Advocacy Resources [page](#) on [aap.org](#).

The Academy’s relentless advocacy to ensure adequate emergency financial relief to support our members continues.



ADVOCACY OPPORTUNITY

Tell your members of Congress to ensure pediatricians receive needed financial support so that you can provide care for children throughout the COVID-19 crisis (under Key Issues).

The Academy has also worked with a number of AAP chapters on their requests for state Medicaid advanced payments during the public health emergency. On May 14, the Centers for Medicare and Medicaid Services (CMS) issued an **informational bulletin** detailing authorities state

Medicaid offices have to make increased payments to providers through managed care. These include adjusting capitation rates to reflect increases in Medicaid fee-for-service payments and using state directed payments to require MCOs to enhance payment to providers during the crisis. The AAP provided chapters with a **template letter** which they could customize and send to their state Medicaid directors in order to begin conversations about how Medicaid can provide additional relief to pediatric practices during this critical time.

Improving Health Care Coverage

Medicaid/CHIP

The AAP continues to **urge Congress** to strengthen Medicaid and CHIP in future COVID-19 response packages. This includes advocating for an additional increase in the federal contribution to state Medicaid programs during the public health emergency while requiring states to maintain strong Medicaid programs. In addition, the AAP is advocating for the inclusion of the *Kids' Access to Primary Care Act*, legislation from Rep. Kim Schrier (D-Wash.) to align Medicaid payment rates with Medicare rates for primary care services. Finally, the Academy is calling on Congress to delay the planned decrease in E-FMAP in CHIP, which is set to take place in October.

Telehealth

State Medicaid agencies continue to **develop and update** guidance and bulletins on the provision of services via telehealth care and providing for more flexibility. State Medicaid agencies and payers have tied these changes to telehealth policy to the end of the public health emergency or set other end dates. In order to ensure that children and families continue to have access to these services, the AAP has sent a **letter to payers** urging them to extend all current telehealth flexibilities until 90 days after the expiration of the public health emergency. State AAP chapters continue to work with public and private payers to ensure these telehealth policies remain available.

Federal advocacy staff are continuing to advocate for expanded access and adequate payment of telehealth services to Congress and the administration. For more information on the Academy's telehealth efforts, please visit **this page**.

Ensuring Children Have Access to Immunizations

Preserving the Vaccine Delivery System

AAP continues to strongly advocate for improved investment in the existing vaccine delivery system to combat declining

childhood immunization rates during the COVID-19 pandemic. Specifically, the Academy is urging the administration and Congress to address financial strain and deficiencies in the vaccine financing system and implement critical policy changes to the Vaccines for Children (VFC) program.

In June, the Academy developed an advocacy strategy consisting of several policy proposals to help to preserve the vaccine delivery system for children. These policies include providing prospective Medicaid vaccine payments, increasing regional maximum fees, appropriately valuing vaccine codes, allowing borrowing between public and private vaccine stock, prioritizing delivery of seasonal flu vaccine to VFC providers, and reducing VFC regulatory burden and increasing collaboration with providers on quality initiatives. A one-pager outlining these policies can be found **here**.

On June 3, AAP sent another **letter** to HHS urging enhanced support for the country's existing child and adolescent immunization infrastructure that relies heavily on pediatric practices, and highlighted the policies included in AAP's vaccine advocacy strategy. A similar **letter** was sent to congressional leadership, which also urged for swift passage of the *VACCINES Act* (H.R. 2862) to help increase vaccination rates and confidence nationally. Furthermore, the Academy is actively engaging with members of Congress to garner support for policies to preserve the vaccine delivery system for children.

AAP also developed a **template letter** for chapters to share with their state congressional delegations, customizable for use on chapters' letterhead, amplifying our call to congressional leaders to support pediatric practices in our broader effort to protect children from vaccine preventable diseases.

Supporting Children Globally

World Health Organization

In April, the administration announced its decision to stop U.S. funding for the World Health Organization (WHO), prompting **this response** from the AAP which urges the President to reverse his decision and reinstate vital funding for the WHO. The following month, on May 29, President Trump announced his intent to withdraw the U.S. from the WHO. In response to the announcement, the AAP released a **statement** urging the administration to reconsider its position and continue to work with the WHO to combat COVID-19 and promote the health of children globally. The AAP's statement and concerns were highlighted in a **CNN article** covering the administration's announcement. The

following week, the AAP joined 500 organizations and individuals in a **Global Health Council letter** to the administration expressing grave concern about the decision to terminate relations with the WHO in the midst of a global pandemic, outlining the vital role the WHO plays worldwide, and urging the administration to reconsider its decision to withdraw.

Funding for Global COVID-19 Response

The HEROES Act, passed by the House of Representatives on May 15, did not include any funding for global health or international affairs, which is crucial to combatting this pandemic. In response, the AAP joined coalition partners in a **Global Health Council letter** to Senate appropriators advocating for no less than \$12 billion for global health preparedness and response to the pandemic in the next supplemental appropriations legislation being negotiated.

Preventing Future Pandemics

COVID-19 has demonstrated the need for a coordinated national and global response to pandemics. Several bills have been introduced in Congress to address this need, including the bipartisan *Global Health Security and Diplomacy Act of 2020* (S. 3829), which was introduced on May 21 by Senators Risch, Cardin, and Murphy. This bill would strengthen interagency coordination and diplomatic engagement around pandemic preparedness activities, establishing a coordinator for global health security and diplomacy at the Department of State. Additionally, the bill authorizes U.S. participation in and funding for the Coalition for Epidemic Preparedness Innovations (CEPI), enabling the U.S. to join its allies in an effort to find a COVID-19 vaccine.

AAP continues to advocate for pandemic preparedness and joined partners in a **Johns Hopkins Center for Health Security letter** to appropriators in support of the Health Defense Operations budget designation to increase investments in pandemic preparedness for the FY 2021 appropriations cycle.

State Efforts to Reopen Safely

State Reopening Plans

Over the last several months, states have taken steps to develop and implement **plans to reopen**. Generally, states are taking a gradual approach to reopening and doing so in stages. To guide reopening decision-making, states are utilizing various **public health criteria** to ensure the process is done in a safe and secure manner.

In addition to individual state reopening plans, several states have joined together to take a regional approach in

reopening. Connecticut, Delaware, Maine, Pennsylvania, New Jersey, New York, and Rhode Island formed the Northeast Multi-State Council to Get People Back to Work and Restore the Economy; Illinois, Indiana, Kentucky, Michigan, Minnesota, Ohio, and Wisconsin have formed the Midwest Partnership to Reopen the Region's Economy; and California, Colorado, Nevada, Oregon, and Washington formed the Western States Pact.

AAP chapters have been engaged in the development and implementation of reopening plans and continue to advocate for the needs of children and their families as reopening efforts move forward.

Child Care and Early Education Reopening Plans

Central to state economies reopening is the need for safe, high quality child care and early education programs to allow parents to return to the workplace. During the pandemic, a majority of child care and early education programs closed, with a limited number open to serve essential workers. States have started to allow these **programs** to reopen based on state and local public health guidelines, which are being incorporated into overall state reopening plans. Guidelines include daily temperature checks, use of PPE, smaller class sizes, and increased sanitation procedures. AAP chapters are working with state child care offices and child care advocates to ensure that children can return to safe child care and early education environments. On the federal level, the AAP endorsed legislation that would provide \$50 billion to stabilize the child care sector and support providers to safely reopen and operate.

School Reopening Plans

As the summer progresses, states and local school districts are considering measures that schools should take to safely educate children while reducing transmission of COVID-19. Though largely left to local districts to decide what will work best in their communities, states are releasing **guidance** for local districts to take into consideration. Measures such as social distancing, disinfecting shared equipment, use of masks and other PPE, daily temperature testing and student exclusion policies are among the decisions that school districts will be making.

With the uncertainty of the pandemic and a prediction of a surge in COVID-19 cases in the fall, some school districts are looking at continuing distance education, while others are looking at hybrid models which send a portion of students to school at a time while continuing distance education at home the other days of the week.

Schools will also be grappling with new physical and behavioral health needs in response to the COVID-19 pandemic. A concern over the spread of vaccine preventable diseases after a sharp drop in vaccination rates and an increase in students with mental health issues following months of quarantine are expected to test already under-resourced school nursing and mental/behavioral health staff. With schools expecting cuts to funding due to a steep decline in state revenues, pediatrician advocacy will be crucial to ensuring that children are receiving the care they need in schools.

Contact Tracing

As states begin to reopen to allow increased economic activity, **contact tracing** is a critical component of mitigating the spread of COVID-19. States are at the forefront of contract tracing activity and are actively standing up programs across the country. However, states are taking varying **approaches** to contact tracing, including different models, how coordination is done between state and local health departments, what technology is employed, how programs are funded, and other important components.

Testing

Testing has become a priority as states begin to reopen. Testing for COVID-19 allows state and local public health departments gain a more accurate picture of how the disease is spreading and allows state leaders to make better informed decisions as states progress through reopening phases.

Several states have created task forces or workgroups to recommend testing strategies and analyze results. AAP chapters have been engaged in testing efforts, focusing on ensuring children are included in statewide testing efforts.

Health Equity

COVID-19 has **affected** minority populations at a greater rate comparative to their representation in the US population. As a result of this, several states have created task forces or work groups to examine why the pandemic has disproportionately affected minority populations and recommend improvements to provide a more equitable distribution of economic, health, and social programs and services going forward. AAP has pressured HHS and

Congress to collect, analyze, and report disaggregated data on testing, hospitalization, and mortality by race and ethnicity. AAP chapters are engaged as well, advocating for public policies that address the systemic issues facing minority populations during the pandemic and beyond.

Grassroots Advocacy

AAP Advocacy Alerts & Emails

The Academy sends regular advocacy-focused communications to its members. These emails include timely advocacy action alerts, policy updates and breaking child health news from Washington.

These communications help keep AAP members informed on the latest updates from the nation's capital and offer opportunities to speak up for children's health, including ways to directly contact members of Congress.

The Academy also sends an email every Friday that Congress is in session, spotlighting the key child health activities, events and policy developments from the week.

How to Sign Up for Advocacy Emails

Email kids1st@aap.org with your name, AAP ID if known, and your preferred e-mail address. If you have questions about federal advocacy, contact the AAP Washington Office at 202-347-8600.

Engage with AAP on Social Media

Twitter is a powerful tool that allows individuals and organizations to amplify messages, connect with new and diverse networks, and gain access to local-, state- and federal-level decision-makers. As a pediatrician, Twitter also offers you the opportunity to be part of a community that encourages the exchanging of ideas around child health, while not being constrained by time or geography.

To stay up to date on child health news, follow and engage with AAP on social media via @AmerAcadPeds, @AAPPres, @AAPNews, and @healthychildren. You can also subscribe to AAP's official #tweetiatrician list on Twitter by visiting <https://twitter.com/AmerAcadPeds/lists/tweetiatricians>. Request to be added by emailing AAP's Social Media Strategist, Helene Holstein, at hholstein@aap.org.