

116TH CONGRESS
2D SESSION

S. 3544

To assist older Americans and people with disabilities affected by COVID–
19.

IN THE SENATE OF THE UNITED STATES

MARCH 19, 2020

Mr. CASEY (for himself, Mr. BOOKER, Mr. BROWN, Mr. MENENDEZ, Mr. JONES, Mr. PETERS, Ms. DUCKWORTH, Mrs. GILLIBRAND, Ms. SINEMA, Mr. BLUMENTHAL, Mr. KAINE, Ms. HASSAN, Mr. REED, Ms. WARREN, Ms. SMITH, Mr. TESTER, Mr. SANDERS, Mrs. SHAHEEN, Ms. BALDWIN, Ms. KLOBUCHAR, Ms. ROSEN, Mr. MARKEY, Ms. CORTEZ MASTO, and Mr. MERKLEY) introduced the following bill; which was read twice and referred to the Committee on Finance

A BILL

To assist older Americans and people with disabilities
affected by COVID–19.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE; TABLE OF CONTENTS.**

4 (a) IN GENERAL.—This Act may be cited as the
5 “Coronavirus Relief for Seniors and People with Disabil-
6 ities Act of 2020”.

7 (b) TABLE OF CONTENTS.—The table of contents for
8 this Act is as follows:

Sec. 1. Short title; table of contents.

TITLE I—SUPPLEMENTAL APPROPRIATIONS

Sec. 101. Supplemental appropriations.

TITLE II—MEDICAID

Sec. 201. Expanded access to medical assistance for Medicare costs during the COVID–19 public health emergency.

Sec. 202. Authority to award Medicaid HCBS grants to respond to the COVID–19 public health emergency.

TITLE III—NUTRITION SERVICES

Sec. 301. Definitions.

Sec. 302. Congregate nutrition services criteria.

Sec. 303. Home delivered nutrition services criteria.

1 **TITLE I—SUPPLEMENTAL**
 2 **APPROPRIATIONS**

3 **SEC. 101. SUPPLEMENTAL APPROPRIATIONS.**

4 The following sums are hereby appropriated, out of
 5 any money in the Treasury not otherwise appropriated,
 6 for the fiscal year ending September 30, 2020, and for
 7 other purposes, namely:

8 DEPARTMENT OF HEALTH AND HUMAN
 9 SERVICES

10 CENTERS FOR MEDICARE & MEDICAID SERVICES

11 SURVEY AND CERTIFICATION ACTIVITIES

12 For an additional amount for survey and certification
 13 activities authorized under sections 1862(g) and 1864 of
 14 the Social Security Act (42 U.S.C. 1395y(g), 1395aa) and
 15 section 353 of the Public Health Service Act (42 U.S.C.
 16 263a), \$154,400,000, to remain available through Sep-
 17 tember 30, 2021: *Provided*, That such amount is des-

1 ignated by the Congress as being for an emergency re-
 2 quirement pursuant to section 251(b)(2)(A)(i) of the Bal-
 3 anced Budget and Emergency Deficit Control Act of 1985.

4 ADMINISTRATION FOR COMMUNITY LIVING

5 AGING AND DISABILITY SERVICES PROGRAMS

6 For an additional amount for “Aging and Disability
 7 Services Programs”, for carrying out the Older Americans
 8 Act of 1965 (42 U.S.C. 3001 et seq.) (“OAA”),
 9 \$2,851,800,000, to remain available through September
 10 30, 2021, of which—

11 (1) \$1,000,000,000 shall be for providing sup-
 12 portive services under part B of title III of such Act
 13 (42 U.S.C. 3030d et seq.);

14 (2) \$1,650,000,000 shall be for providing home
 15 delivered nutrition services under subpart 2 of part
 16 C of title III of such Act (42 U.S.C. 3030f et seq.);

17 (3) \$185,900,000 shall be for providing support
 18 services for family caregivers under part E of title
 19 III of such Act (42 U.S.C. 3030s et seq.); and

20 (4) \$15,900,000 shall be for providing elder
 21 rights protection activities under title VII of such
 22 Act (42 U.S.C. 3058 et seq.): *Provided*, That State
 23 matching requirements under sections 304(d)(1)(D),
 24 309(b)(2), and 373(g)(2) of the OAA (42 U.S.C.
 25 3024(d)(1)(D), 3029(b)(2), and 3030s–1(g)(2))

1 shall not apply to any amount appropriated under
2 this heading: *Provided further*, That the amount ap-
3 propriated under this heading is designated by Con-
4 gress as being for an emergency requirement pursu-
5 ant to section 251(b)(2)(A)(i) of the Balanced Budg-
6 et and Emergency Deficit Control Act of 1985 (2
7 U.S.C. 901(b)(2)(A)(i)).

8 DEPARTMENT OF AGRICULTURE

9 FOOD AND NUTRITION SERVICE

10 COMMODITY ASSISTANCE PROGRAM

11 For an additional amount for “Commodity Assistance
12 Program”, for necessary expenses to carry out the com-
13 modity supplemental food program established under sec-
14 tion 5 of the Agriculture and Consumer Protection Act
15 of 1973 (7 U.S.C. 612c note; Public Law 93–86),
16 \$55,000,000, to remain available through September 30,
17 2021: *Provided*, That the amount appropriated under this
18 heading is designated by Congress as being for an emer-
19 gency requirement pursuant to section 251(b)(2)(A)(i) of
20 the Balanced Budget and Emergency Deficit Control Act
21 of 1985 (2 U.S.C. 901(b)(2)(A)(i)).

TITLE II—MEDICAID**SEC. 201. EXPANDED ACCESS TO MEDICAL ASSISTANCE
FOR MEDICARE COSTS DURING THE COVID-
19 PUBLIC HEALTH EMERGENCY.**

(a) IN GENERAL.—Section 1902 of the Social Security Act (42 U.S.C. 1396a) is amended—

(1) in subsection (a)(10)(E)—

(A) in clause (iii), by striking “; and” and inserting a semicolon;

(B) in clause (iv), by striking the semicolon and inserting “; and”; and

(C) by adding at the end the following new clause:

“(v) during the period described in subsection (ss), for making medical assistance available for medicare cost-sharing (as defined in section 1905(p)(3)) for—

“(I) individuals who are described in clause (ii), (iii), or (iv); and

“(II) individuals—

“(aa) who are not described in clauses (i) through (iv) but who are eligible for, or enrolled in, the low-income subsidy program under section 1860D–14; and

1 “(bb) whose application for such
2 medical assistance is received by the
3 State (or automatically initiated pur-
4 suant to the transmittal of data under
5 section 1144(c)(3)(B)) before the end
6 of the emergency period defined in
7 section 1135(g)(1)(B).”; and

8 (2) by adding at the end the following new sub-
9 section:

10 “(ss) COVID–19 EMERGENCY ASSISTANCE PE-
11 RIOD.—For purposes of subsection (a)(10)(E)(v), the pe-
12 riod described in this subsection is the period—

13 “(1) beginning with the date of enactment of
14 this subsection; and

15 “(2) ending with the last day of the 12th month
16 that begins after the emergency period defined in
17 section 1135(g)(1)(B).”.

18 (b) TRANSMITTAL OF DATA TO STATES AND AUTO-
19 MATIC ENROLLMENT OF INDIVIDUALS.—Section
20 1144(c)(3) of the Social Security Act (42 U.S.C. 1320b-
21 14(c)(3)) is amended—

22 (1) by striking “Beginning on January 1,
23 2010” and inserting the following:

1 “(A) TRANSMITTAL OF LIS APPLICATIONS
2 TO STATES.—Beginning on January 1, 2010”;
3 and

4 (2) by adding at the end the following new sub-
5 paragraph:

6 “(B) TRANSMITTAL OF LIS ENROLLMENT
7 INFORMATION TO STATES DURING THE COVID-
8 19 PUBLIC HEALTH EMERGENCY.—During the
9 period described in section 1902(ss), the Sec-
10 retary, in coordination with the Commissioner
11 of Social Security, shall electronically transmit
12 to the appropriate State Medicaid agency data
13 related to each individual who is enrolled in the
14 low-income subsidy program under section
15 1860D-14, and such transmittal shall initiate
16 an application of the individual for benefits
17 under the Medicare Savings Program with the
18 State Medicaid agency. In order to ensure that
19 such data transmittal provides effective assist-
20 ance for purposes of State adjudication of ap-
21 plications for benefits under the Medicare Sav-
22 ings Program, the Secretary shall consult with
23 the States regarding the content, form, fre-
24 quency, and manner in which data (on a uni-

1 form basis for all States) shall be transmitted
 2 under this subparagraph.”.

3 (c) ADDITIONAL APPROPRIATION FOR ADMINISTRA-
 4 TIVE COSTS FOR THE DEPARTMENT OF HEALTH AND
 5 HUMAN SERVICES AND THE SOCIAL SECURITY ADMINIS-
 6 TRATION.—

7 (1) IN GENERAL.—There are hereby appro-
 8 priated to carry out the requirement of subpara-
 9 graph (B) of section 1144(c)(3) of the Social Secu-
 10 rity Act (42 U.S.C. 1320b–14(c)(3)), as added by
 11 subsection (b), out of any funds in the Treasury not
 12 otherwise appropriated—

13 (A) \$1,000,000 to the Secretary of Health
 14 and Human Services, to remain available until
 15 expended; and

16 (B) \$1,000,000 to the Commissioner of
 17 Social Security, to remain available until ex-
 18 pended.

19 (2) SUPPLEMENT NOT SUPPLANT.—Any
 20 amounts appropriated pursuant to this subsection
 21 shall be in addition to any other amounts otherwise
 22 appropriated pursuant to any other provision of law.

23 (d) BUDGET NEUTRALITY WITH RESPECT TO MEDI-
 24 CARE ADVANTAGE PAYMENTS.—The Secretary of Health
 25 and Human Services shall assess the effect of the amend-

1 ments made by subsection (a) on payments to Medicare
2 Advantage plans under part C of title XVIII of the Social
3 Security Act (42 U.S.C. 1395w–21 et seq.) and make nec-
4 essary adjustments to ensure that, during the COVID–
5 19 emergency assistance period described in subsection
6 (ss) of section 1902 of the Social Security Act (42 U.S.C.
7 1396a) (as added by subsection (a)), risk-adjusted pay-
8 ments under such part with respect to individuals newly
9 enrolled in the Medicare Savings Program (as defined in
10 section 1144 of the Social Security Act (42 U.S.C. 1320b–
11 14)) pursuant to such amendments do not exceed such
12 payments that would have been made under such part
13 with respect to such individuals if such subsection had not
14 been enacted.

15 (e) FEDERAL MEDICAL ASSISTANCE PERCENT-
16 AGE.—Section 1905 of the Social Security Act (42 U.S.C.
17 1396d) is amended—

18 (1) in subsection (b), by striking “and (ff)” and
19 inserting “(ff), and (gg)”;

20 (2) by adding at the end the following:

21 “(gg) INCREASED FMAP FOR ADDITIONAL EXPEND-
22 ITURES FOR MEDICARE COST-SHARING PROVIDED DUR-
23 ING THE COVID–19 PUBLIC HEALTH EMERGENCY.—
24 Notwithstanding subsection (b), the Federal medical as-
25 sistance percentage for a State shall be 100 percent—

1 “(1) with respect to the additional amounts ex-
 2 pended by the State for medical assistance provided
 3 during the period described in section 1902(ss)
 4 under the State plan under this title or a waiver of
 5 such plan that are attributable to the requirements
 6 imposed by section 1902(a)(10)(E)(v);

7 “(2) with respect to expenditures described in
 8 section 1903(a)(7) that—

9 “(A) are made by the State during the pe-
 10 riod described in section 1902(ss); and

11 “(B) the State demonstrates to the satis-
 12 faction of the Secretary are attributable to ad-
 13 ministrative costs related to meeting such re-
 14 quirements; and

15 “(3) with respect to expenditures that are made
 16 by the State to determine whether individuals who
 17 are provided medical assistance for medicare cost-
 18 sharing under section 1902(a)(10)(E)(v)(II) remain
 19 eligible for such assistance after the period described
 20 in section 1902(ss).”.

21 **SEC. 202. AUTHORITY TO AWARD MEDICAID HCBS GRANTS**
 22 **TO RESPOND TO THE COVID-19 PUBLIC**
 23 **HEALTH EMERGENCY.**

24 (a) IN GENERAL.—The Secretary is authorized to
 25 award grants to States in accordance with this section to

1 enhance access to home and community-based services
2 during the COVID–19 public health emergency period.

3 (b) DEFINITIONS.—In this section:

4 (1) COVID–19 PUBLIC HEALTH EMERGENCY
5 PERIOD.—The term “COVID–19 public health emer-
6 gency period” means the portion of the emergency
7 period defined in paragraph (1)(B) of section
8 1135(g) of the Social Security Act (42 U.S.C.
9 1320b–5(g)) beginning on or after the date of the
10 enactment of this Act.

11 (2) ELIGIBLE INDIVIDUAL.—The term “eligible
12 individual” means an individual who is eligible for or
13 enrolled for medical assistance under a State Med-
14 icaid program.

15 (3) HOME AND COMMUNITY-BASED SERV-
16 ICES.—The term “home and community-based serv-
17 ices” means, with respect to a State Medicaid pro-
18 gram, home and community-based services (includ-
19 ing home health and personal care services) that are
20 provided under the State’s qualified HCBS program
21 or that could be provided under such a program but
22 are otherwise provided under the Medicaid program.

23 (4) INDIAN TRIBE.—The term “Indian tribe”
24 means an Indian tribe, a tribal organization, or an
25 urban Indian organization (as such terms are de-

1 fined in section 4 of the Indian Health Care Im-
2 provement Act (25 U.S.C. 1603)), and includes a
3 tribal consortium of Indian tribes or tribal organiza-
4 tions (as so defined).

5 (5) MEDICAID PROGRAM.—The term “Medicaid
6 program” means, with respect to a State, the State
7 program under title XIX of the Social Security Act
8 (42 U.S.C. 1396 et seq.) (including any waiver or
9 demonstration under such title or under section
10 1115 of such Act (42 U.S.C. 1315) relating to such
11 title).

12 (6) SECRETARY.—The term “Secretary” means
13 the Secretary of Health and Human Services.

14 (7) STATE.—The term “State” has the mean-
15 ing given such term for purposes of title XIX of the
16 Social Security Act (42 U.S.C. 1396 et seq.).

17 (8) QUALIFIED HCBS PROGRAM.—The term
18 “qualified HCBS program” means a program pro-
19 viding home and community-based services operating
20 under a State Medicaid program, whether or not op-
21 erating under waiver authority.

22 (c) GRANTS TO STATES.—

23 (1) IN GENERAL.—During the COVID–19 pub-
24 lic health emergency period, the Secretary may

1 award grants to States with applications meeting the
2 requirements of paragraph (2).

3 (2) APPLICATION REQUIREMENTS.—A State
4 seeking a grant under this section shall submit an
5 application to the Secretary at such time, in such
6 form and manner, and containing such information
7 as the Secretary shall require.

8 (3) LIMITATIONS.—

9 (A) TERMINATION OF AUTHORITY.—The
10 Secretary shall not award any grants under this
11 section with respect to a State that submits an
12 application after the date that is 60 days after
13 the end of the COVID–19 public health emer-
14 gency period.

15 (B) USE OF FUNDS.—A State to which a
16 grant is made under this section shall only use
17 grant funds in accordance with subsection (d).

18 (C) MAINTENANCE OF STATE EFFORT.—
19 Federal funds paid to a State pursuant to this
20 section must be used to supplement, but not
21 supplant, the level of State funds expended for
22 home and community-based services for eligible
23 individuals programs in effect for such individ-
24 uals at the time the grant is awarded under
25 this section.

1 (4) MONTHLY GRANT PAYMENT AMOUNTS.—

2 (A) IN GENERAL.—Subject to paragraph
3 (5), the Secretary shall pay to each State that
4 is awarded a grant under this section, for each
5 month during the State’s grant period (as de-
6 fined in subparagraph (C)), an amount equal to
7 15 percent of the amount determined for the
8 State under subparagraph (B).

9 (B) AVERAGE MONTHLY HCBS EXPENDI-
10 TURES.—The amount determined for a State
11 under this subparagraph is the amount equal
12 to—

13 (i) the sum of—

14 (I) the average annual amount of
15 State expenditures under title XIX of
16 the Social Security Act (42 U.S.C.
17 1396 et seq.) that are attributable to
18 providing medical assistance for home
19 and community-based services for the
20 3 most recent fiscal years for which
21 data is available; and

22 (II) the average annual amount,
23 if any, received by the State pursuant
24 to an MFP demonstration project
25 conducted under section 6071 of the

1 Deficit Reduction Act of 2005 (42
2 U.S.C. 1396a note) for the 3 most re-
3 cent fiscal years for which data is
4 available; divided by

5 (ii) 12.

6 (C) GRANT PERIOD DEFINED.—In this
7 paragraph, the term “grant period” means,
8 with respect to a State, the period of months—

9 (i) beginning with the month in which
10 the Secretary approves the State’s applica-
11 tion for a grant under this section; and

12 (ii) ending with the twelfth month
13 that begins after the end of the COVID-
14 19 public health emergency period.

15 (5) GRANTS TO INDIAN TRIBES.—

16 (A) IN GENERAL.—During the COVID-19
17 public health emergency period, the Secretary
18 may award grants to an Indian tribe in the
19 same manner, and subject to the same require-
20 ments, as apply to a State, except as otherwise
21 provided in this paragraph.

22 (B) APPLICATION.—Any Indian tribe seek-
23 ing a grant under this section shall submit to
24 the Secretary an application that includes (in
25 addition to any other information the Secretary

1 shall require) an identification of the population
2 and service area or areas to be served by the
3 activities and programs that will be funded by
4 the grant.

5 (C) MONTHLY GRANT PAYMENT
6 AMOUNTS.—

7 (i) IN GENERAL.—The Secretary shall
8 pay to each Indian tribe that is awarded a
9 grant under this section, for each month
10 during the tribe's grant period (as defined
11 in clause (iii)), an amount equal to 15 per-
12 cent of the amount determined for the
13 tribe under clause (ii).

14 (ii) TRIBAL SHARE OF MONTHLY
15 HCBS EXPENDITURES.—The amount deter-
16 mined for an Indian tribe under this clause
17 is equal to—

18 (I) the total of the average an-
19 nual amount of State expenditures
20 made by a State or States under title
21 XIX of the Social Security Act (42
22 U.S.C. 1396 et seq.) that are attrib-
23 utable to providing medical assistance
24 for home and community-based serv-
25 ices to eligible individuals who reside

1 in the service area or areas identified
2 by the tribe pursuant to subparagraph
3 (B) for the 3 most recent fiscal years
4 for which data is available; divided by
5 (II) 12.

6 (iii) GRANT PERIOD.—The term
7 “grant period” has the same meaning with
8 respect to an Indian tribe as the term has
9 with respect to a State under paragraph
10 (4)(C).

11 (D) REDUCTION OF STATE GRANT
12 AMOUNTS.—If any State in which lies a service
13 area or areas identified by an Indian tribe in a
14 successful grant application pursuant to sub-
15 paragraph (B) is also awarded a grant under
16 this section, the Secretary shall reduce the
17 amount payable to such State each month
18 under paragraph (4) by the portion of the
19 amount payable to the Indian tribe under this
20 paragraph that is attributable to expenditures
21 by the State.

22 (d) PERMISSIBLE USES OF FUNDS.—

23 (1) IN GENERAL.—A State to which a grant is
24 made under this section may use grant funds—

1 (A) to work with community partners such
2 as Area Agencies on Aging, Independent Living
3 Centers, nonprofit home and community based
4 service providers, and other entities providing
5 home and community-based services;

6 (B) during the COVID–19 public health
7 emergency period, for the purposes described in
8 paragraph (2); and

9 (C) after the end of such period, for the
10 purposes described in paragraph (3).

11 (2) PERMISSIBLE USES DURING THE EMER-
12 GENCY PERIOD.—The purposes described in this
13 paragraph for which a State may use grant funds
14 awarded under this section are the following:

15 (A) To increase rates for home health and
16 direct service worker agencies to provide home
17 and community-based services under the State
18 Medicaid program, provided that any agency or
19 individual that receives payment under such an
20 increased rate increases the compensation it
21 pays its home health or direct service workers.

22 (B) To provide paid sick leave, paid family
23 leave, and paid medical leave for home health
24 workers and direct service workers.

1 (C) To provide hazard pay, overtime pay,
2 and shift differential pay for home health work-
3 ers and direct service workers.

4 (D) To provide home and community-
5 based services to eligible individuals who are on
6 waiting lists for programs approved under sec-
7 tions 1115 or 1915 of the Social Security Act
8 (42 U.S.C. 1315, 1396n).

9 (E) To purchase emergency supplies and
10 equipment necessary to enhance access to serv-
11 ices and to protect the health and well-being of
12 home health workers and direct service workers.

13 (F) To pay for home health worker and di-
14 rect service worker travel to conduct home and
15 community-based services.

16 (G) To recruit new direct service workers
17 and home health workers.

18 (H) To support family care providers of el-
19 igible individuals with needed supplies and
20 equipment and pay.

21 (I) To pay for training for direct service
22 workers and home health workers that is spe-
23 cific to the COVID–19 public health emergency.

24 (J) To pay for assistive technologies, staff-
25 ing, and other costs incurred during the public

1 health emergency in order to facilitate community
2 integration and ensure an individual's person-
3 centered service plan continues to be fully imple-
4 mented.

5 (K) To support direct service workers and
6 home health workers going to nursing facilities,
7 hospitals, institutions, and quarantine settings
8 to provide services to eligible individuals who
9 usually receive home and community-based
10 services and have chosen to temporarily move to
11 a more restrictive setting.

12 (L) To prepare information and public
13 health and educational materials in accessible
14 formats about prevention, treatment, recovery
15 and other aspects of COVID-19 for eligible in-
16 dividuals, their families, and the general com-
17 munity served by home health and direct service
18 agencies, including formats accessible to people
19 with low literacy or intellectual disabilities.

20 (M) To pay for American sign language in-
21 terpreters to assist in providing home and com-
22 munity-based services to eligible individuals and
23 to inform the general public about COVID-19.

24 (N) To allow for day service providers to
25 shift to providing home-based services.

1 (O) To pay for COVID–19 testing in home
2 settings.

3 (P) To pay for other expenses deemed ap-
4 propriate by the Secretary and which meet the
5 criteria of the home and community-based set-
6 tings rule.

7 (3) PERMISSIBLE USES AFTER THE EMER-
8 GENCY PERIOD.—The purpose described in this
9 paragraph for which a State may use grant funds
10 awarded under this section is to assist eligible indi-
11 viduals who had to relocate to a nursing facility or
12 institutional setting from their homes during the
13 COVID–19 public health emergency period in—

14 (A) moving back to their homes (including
15 by paying for moving costs);

16 (B) resuming home and community-based
17 services;

18 (C) receiving mental health services and
19 necessary rehabilitative service to regain skills
20 lost while relocated during the public health
21 emergency period; and

22 (D) continuing home and community-based
23 services for eligible individuals who were served
24 from a waiting list for such services during the
25 public health emergency period.

1 (e) REPORTING REQUIREMENTS.—

2 (1) STATE REPORTING REQUIREMENTS.—Not
3 later than 18 months after the end of the COVID–
4 19 public health emergency period, any State that
5 received a grant under this section shall submit a re-
6 port to the Secretary that contains the following in-
7 formation:

8 (A) Activities and programs that were
9 funded using grant amounts.

10 (B) The number of eligible individuals who
11 were served by such activities and programs.

12 (C) The number of eligible individuals who
13 were able to resume home and community-
14 based services as a result of such activities and
15 programs.

16 (2) HHS REPORT.—Not later than 18 months
17 after the end of the COVID–19 public health emer-
18 gency period, the Secretary shall issue a public sum-
19 mary of the grants awarded under this section.

20 (f) APPROPRIATION.—

21 (1) IN GENERAL.—Subject to paragraph (2),
22 there are appropriated for fiscal year 2020 from any
23 funds in the Treasury not otherwise appropriated
24 such sums as are necessary to carry out this section,
25 to remain available until expended.

1 (2) AVAILABILITY OF APPROPRIATIONS.—
 2 Amounts made available under paragraph (1) shall
 3 not be available for the awarding of grants to States
 4 that do not submit an application for such a grant
 5 before the date described in subsection (c)(3)(A).

6 (3) UNUSED GRANT FUNDS.—A State that re-
 7 ceives a grant under this section shall return to the
 8 Secretary any portion of such grant that is unused
 9 as of the date that is 1 year after the last day of
 10 the COVID–19 public health emergency period, and
 11 such returned portion shall revert to the Treasury.

12 **TITLE III—NUTRITION SERVICES**

13 **SEC. 301. DEFINITIONS.**

14 Section 302 of the Older Americans Act of 1965 (42
 15 U.S.C. 3022) is amended—

16 (1) by redesignating paragraphs (2) through
 17 (4) as paragraphs (3) through (5), respectively; and

18 (2) by inserting after paragraph (1) the fol-
 19 lowing:

20 “(2) COVID–19 PUBLIC HEALTH EMERGENCY
 21 PERIOD.—The term ‘COVID–19 public health emer-
 22 gency period’ means the portion of the emergency
 23 period defined in paragraph (1)(B) of section
 24 1135(g) of the Social Security Act beginning on or
 25 after the date of the enactment of this Act.”.

1 **SEC. 302. CONGREGATE NUTRITION SERVICES CRITERIA.**

2 (a) DEFINITIONS.—In this section:

3 (1) AREA AGENCY ON AGING; STATE AGENCY.—

4 The terms “area agency on aging” and “State agency”
5 have the meanings given the terms in section
6 102 of the Older Americans Act of 1965 (42 U.S.C.
7 3002).

8 (2) COVID–19 PUBLIC HEALTH EMERGENCY

9 PERIOD.—The term “COVID–19 public health emer-
10 gency period” has the meaning given the term in
11 section 302 of such Act (42 U.S.C. 3022).

12 (b) TRANSFERS.—For purposes of section 308(b)(4)
13 of the Older Americans Act of 1965 (42 U.S.C.
14 3028(b)(4)), during the COVID–19 public health emer-
15 gency period the Secretary of Health and Human Services
16 shall allow a State agency or an area agency on aging,
17 without prior approval, to transfer not more than 100 per-
18 cent of the funds received by the State agency or area
19 agency on aging, respectively, and attributable to funds
20 appropriated under paragraph (1) or (2) of section 303(b)
21 of such Act (42 U.S.C. 3023(b)), between subpart 1 and
22 subpart 2 of part C of such Act (42 U.S.C. 3030d–21
23 et seq.) for such use as the State agency or area agency
24 on aging, respectively, considers appropriate to meet the
25 needs of the State or area served.

1 **SEC. 303. HOME DELIVERED NUTRITION SERVICES CRI-**
2 **TERIA.**

3 Section 337 of the Older Americans Act of 1965 (42
4 U.S.C. 3030g) is amended—

5 (1) by inserting “(a)” before “The Assistant
6 Secretary”; and

7 (2) by adding at the end the following:

8 “(b) For purposes of determining priority for the de-
9 livery of nutrition services under this subpart, during the
10 COVID–19 public health emergency period, the Assistant
11 Secretary shall give the same priority, as the Assistant
12 Secretary gives to an individual who is homebound by rea-
13 son of illness, to—

14 “(1) an individual who is unable to obtain nu-
15 trition because the individual is under a quarantine,
16 practicing social distancing, or otherwise unable to
17 leave home, due to the emergency;

18 “(2) a person under age 18, or an individual
19 with a disability, who resides in the same home as
20 the recipient if, according to criteria determined by
21 the area agency on aging, provision of such nutrition
22 services to the person or individual is in the best in-
23 terest of the recipient; and

24 “(3) an individual with a disability who—

25 “(A) is at home during the public health
26 emergency period; and

1 “(B) usually receives services in a day pro-
2 gram, at the individual’s place of work, or
3 through a visiting direct service worker who
4 may not be able to continue to provide services
5 during the public health emergency period.”.

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