



Hart Health
Strategies Inc.

Infrastructure Investment and Jobs Act

Summary of the Health Provisions Contained in the Bipartisan Infrastructure Framework

The Senate passed the \$550 billion *Infrastructure Investment and Jobs Act* (H.R. 3684), known as the bipartisan infrastructure framework, by a vote of 69-30 on August 10. The [bill](#) contains traditional infrastructure-related provisions to fund roads, bridges, transit, and broadband build-out. The Senate then moved to consideration of a fiscal year (FY) 2022 budget resolution, containing reconciliation instructions for passage of President Joe Biden's broader economic agenda and Democratic party priorities, including climate change, taxes, and health care reform. The chamber passed the budget resolution by a 50-49 party line vote. House Speaker Nancy Pelosi (D-Calif.) has said that her chamber will not vote on the bipartisan infrastructure legislation until the Senate passes a broader reconciliation bill. Any further action on the bipartisan infrastructure framework therefore is not expected until Congress returns from August recess on September 20.

Key health provisions in the bipartisan package include the following:

Make PPE in America

Sec. 70953: Requirement of long-term contracts for domestically manufactured personal protective equipment

Any contracts for personal protective equipment (PPE) awarded by the Department of Homeland Security, the Department of Health and Human Services (HHS), or the Department of Veterans Affairs would have a minimum length of two years. The measure would require the products to be made in the U.S., except in limited circumstances. The bill would also allow the transfer of excess PPE from HHS to the Strategic National Stockpile (SNS), and allow for the sale of drugs, vaccines, medical devices, or other supplies from the SNS during a public health emergency (PHE).

Spending Pay-Fors

Sec. 90001: Extension of direct spending reductions through fiscal year 2031 (\$8.7 billion)

The bill would extend required cuts to mandatory spending – sequestration – for one year, through FY 2031. It would also extend the 2% cap on sequestration from Medicare programs through FY 2031, with other appropriate changes to ensure all of the savings are retained in the budget window.

Sec. 90004: Requiring manufacturers of certain single-dose container or single-use package drugs payable under part B of the Medicare program to provide refunds with respect to discarded amounts of such drugs (\$3 billion)

Beginning on January 1, 2023, the measure would require pharmaceutical manufacturers to provide refunds to the HHS based on the amount of Medicare Part B single-use drugs that were unused or discarded each quarter. Amounts would be deposited into the Federal Supplementary Medical Insurance

Trust Fund. HHS would conduct periodic audits of the manufacturers and of claims submitted by providers and could impose civil monetary penalties on manufacturers that do not comply with the refund requirement.

Sec. 90006: Moratorium on implementation of rule relating to eliminating the anti-kickback statute safe harbor protection for prescription drug rebates (\$49 billion)

The bill would prohibit HHS from implementing or enforcing a November 2020 final rule related to drug rebates before January 1, 2026. The rule generally prohibits plan sponsors under Medicare Part D or pharmacy benefit managers (PMBs) from receiving manufacturers' rebates.

Sec. 90007: Rescission of COVID-19 appropriations (\$41.8 billion)

The measure would rescind a total of \$41.8 billion in unobligated coronavirus relief funds, while leaving unspent money in the Provider Relief Fund (PRF) untouched.