

Provider Relief Fund: General and Targeted Distributions

Updated June 16, 2020

	Medicare Providers	Medicaid and CHIP Providers	Hotspot Hospitals	Nursing Facilities
Portal	Attestation Portal: For \$30B General Distribution Portal: For \$20B and future distributions	Enhanced Provider Relief Fund Payment Portal	Attestation Portal	Attestation Portal
Terms & Conditions	Terms & Conditions: \$30B Terms & Conditions: \$20B	Terms & Conditions: \$15B	Terms & Conditions: \$22	Terms & Conditions: \$4.9B
Eligibility and Payment Methodology	 These funds are disbursed to Medicare FFS providers proportional to their share of 2018 gross receipts or revenue Payments are based on the lesser of 2% of a provider's 2018 (or most recent complete tax year) gross receipts or the sum of losses incurred over March and April 	 Distributions are based on annual patient revenue reported to the portal The payment to each provider will be at least 2 percent of reported gross revenue Available to providers who did not receive funds from general distribution and billed Medicaid this year 	 \$10B to hospitals that provided inpatient care for 100 or more COVID-19 patients through April 10 \$2B to these hospitals based on their DSH and uncompensated care payments A future \$10B distribution will be based on COVID-19 inpatient admissions from January 1 through June 10, 2020 	 Eligible nursing facilities must be certified under Medicare or Medicaid All certified standalone or hospital-based skilled nursing facilities with at least six beds were eligible
Releases and M+ Original Analysis	 <u>Announcement</u> of June 3, 2020, deadline to receive additional funding <u>Distributions</u> from first round by state <u>Announcement</u> of release of additional \$40.4B <u>FAQs</u> on General Distributions <u>Application guide</u> for requesting or confirming funds <u>Providers</u> who attested to receipt of payment from the General Distribution <u>+Insight summary</u> of CARES Act <u>+Insight on \$30B distributions</u> to FFS Medicare providers <u>+Insight</u> on second tranche distributions 	 <u>+Insight</u> on HHS funding distributions to Medicaid providers <u>Instructions</u> on how to apply for the Medicaid and CHIP relief funds The <u>application form</u> <u>Announcement</u> of payments for Medicaid & CHIP providers 	 <u>+Insight</u> on HHS distributions to safety net providers <u>Methodology</u> used to allocate \$12B to hotspot providers A state and county <u>breakdown</u> of the hotspot allocations Data on the <u>395 hospitals</u> that received funding from the \$12B COVID-19 hotspot allocations <u>+Insight</u> on initial announcement of \$12B to hotspots <u>+Insight on distributions</u> to providers in hotspots 	 <u>Announcement</u> of \$4.9B distribution to nursing facilities affected by COVID- 19 A <u>state-by-state</u> <u>breakdown</u> of the \$4.9B distribution

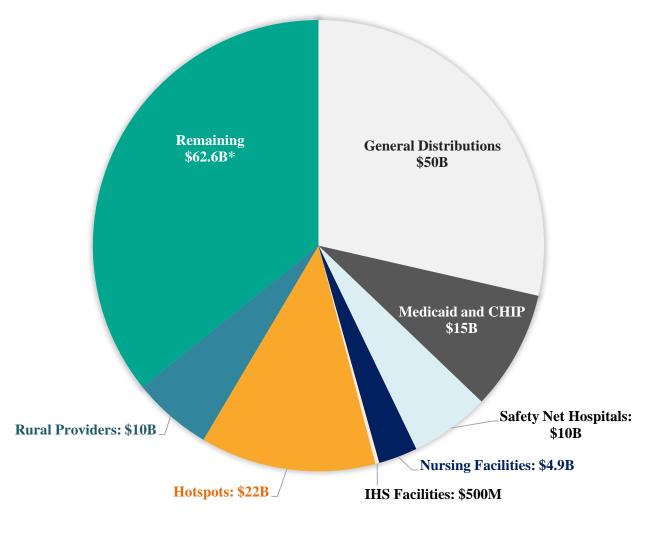


Provider Relief Fund: General and Targeted Distributions

	Uninsured Reimbursement	Safety Net Hospitals	Rural Providers	Indian Health Facilities
Portal	COVID-19 Claims Reimbursement Portal	Attestation Portal	Attestation Portal	Attestation Portal
Terms & Conditions	Terms & Conditions: Treatment Terms & Conditions: Testing	Terms & Conditions: \$10B	Terms & Conditions: \$10B Terms & Conditions: Testing	Terms & Conditions: \$500M
Eligibility and Payment Methodology	 Entities that conducted testing or treatment for uninsured individuals with a COVID-19 diagnosis on or after February 4, 2020 can request claims reimbursement Providers will be reimbursed generally at Medicare rates, subject to available funding 	 Acute care facilities will receive payment based on the facility's Medicare Disproportionate Payment Percentage (DPP), uncompensated care per bed, and net operating margin Children's hospitals will receive funds based on their Medicare DPP and net operating margin Recipients will receive between \$5 and \$50 million 	 Hospitals and Rural Health Clinics each receive a base payment of \$100,000 plus a percent of their annual expenses Rural acute care hospitals and Critical Access Hospitals receive a graduated base amount plus an additional payment to account for their usual operating costs 	 IHS hospitals will receive \$2.81M plus 3% of total operating expenses IHS clinics and urban programs receive a base of about \$180,000 plus an additional payment based on service population and cost per user
Releases and M+ Original Analysis	 <u>Data</u> on the healthcare entities who have received reimbursement Details on <u>which services</u> qualify for reimbursement <u>Testing and treatment codes</u> eligible for reimbursement <u>Questions and answers</u> from webcasts hosted by HRSA on April 29 and 30, 2020 How to initiate the reimbursement <u>process</u> A <u>step-by-step video</u> on how to set up Optum PayTM and receive direct deposits A <u>companion guide</u> on how to submit claims through the portal A <u>checklist</u> for providers on the documentation they will need to submit claims <u>FAQs</u> for the Claims Reimbursement portal 	 <u>+Insight</u> on HHS funding distributions to safety net providers 	 <u>Announcement</u> of distributions to rural providers A state and county <u>breakdown</u> of the allocations to rural providers <u>+Insight</u> on initial announcement of \$10B distribution to rural providers <u>+Insight</u> on distributions to rural providers 	 <u>Announcement</u> of \$500M distribution to Indian Health Service facilities affected by COVID-19







*A portion of the PRF will be used to reimburse healthcare providers for the testing and treatment of uninsured COVID-19 patients.

www.mcdermottplus.com



Provider Relief Fund: Background Information

Responsible Agencies: US Department of Health and Human Services (HHS), Health Resources and Services Administration (HRSA), Office of the Assistant Secretary for Preparedness and Response (ASPR)

Purpose: According to the <u>CARES Act statute</u>, payments from the Provider Relief Fund may be used to prevent, prepare for, and respond to COVID-19 domestically or internationally, for the reimbursement of necessary expenses, or for lost revenues that are attributable to COVID-19. HHS <u>announced</u> that it will also use a portion of the funding to reimburse providers for the costs of delivering COVID-19 care for the uninsured.

Eligible Entities: Eligibility criteria vary for each type of payment distribution (general distributions and targeted distributions). Additional information is available in the Terms and Conditions for each distribution stream, as well as the <u>Provider Relief Fund FAQs</u>.

Balance Billing: Currently, providers who accept Provider Relief Fund Terms and Conditions are prohibited from balance billing for patients with "presumptive or actual" cases of COVID-19.

Attestation: According to HHS, providers who accept funds must sign an attestation agreeing to the terms and conditions—specific to the distribution type—within 90 days of payment. The terms and conditions include significant provisions around provider eligibility, how funds can be used, reporting requirements, and restrictions on balance billing. Providers should read the conditions closely before signing and keep careful record of their COVID-19 expenses and revenue losses, and how they use these funds.

Audits/Reporting:

- Recipients of payments greater than \$150,000 must submit quarterly reports to HHS and the Pandemic Response Accountability Committee. First quarter reporting obligations are expected to be due on July 10.
- HHS maintains a <u>database</u> of providers that have received relief funds, attested, and agreed to the Terms and Conditions.
- HHS must submit a report to the Appropriations Committees of both the US House of Representatives and the US Senate every 60 days until the Provider Relief Fund is expended. This report must detail state-level totals of how funds have been distributed.
- The HHS Office of Inspector General (OIG) is required to complete an audit three years after the fund is exhausted. The OIG has <u>released</u> a strategic plan for this oversight, which will involve auditing Provider Relief Fund recipients to assess whether they met use and reporting requirements and, where appropriate, to recommend recovery of misspent funds



Provider Relief Fund: Resources and Materials

Provider Relief Fund website / CARES Provider Relief line: +1 866 569 3522

Statutes

- Paycheck Protection Program and Health Care Enhancement Act (H.R. 266)
- CARES Act (<u>S. 3548</u>)
- The Families First Coronavirus Response Act (<u>H.R. 6201</u>)

Administration Resources

<u>HHS</u>

- A <u>timeline</u> of general and targeted distributions from the PRF, along with eligibility and formulas for each distribution stream
- The application form for the Medicaid and CHIP relief funds, as well as instructions on how to apply
- <u>Announcement</u> of enhanced Provider Portal, relief fund payments for safety net hospitals, Medicaid & CHIP providers
- A strategic plan from the OIG to conduct oversight of the distribution and use of relief funds
- Announcement of almost \$4.9 billion distribution to nursing facilities affected by COVID-19
- A state-by-state breakdown of the \$4.9 billion distribution to nursing facilities
- <u>Details</u> on the \$500 million distribution to tribal hospitals, clinics, and urban health centers
- Extension of the compliance deadline by an additional 45 days, bringing the total window to 90 days
- Announcement that providers must submit revenue information by June 3 to receive additional relief funds
- Information on how funds from the initial \$30 billion were distributed, broken down by state
- Information on how funds from the initial \$30 billion were distributed, broken down by congressional district
- <u>Announcement</u> of the release of an additional \$40.4 billion to Medicare providers based on their share of 2018 net patient revenue, to providers in hotspots, rural providers, and allocations to reimburse providers for treatment of the uninsured
- <u>Details</u> on distributions to hospitals in hotspots and rural communities
- HHS announcement <u>extending the deadline</u> for attestation and acceptance of Terms and Conditions for funds from 30 to 45 days, a deadline that has since been extended for an additional 45 days
- <u>Terms and Conditions</u> for each of the distribution streams, including general distributions, funding for testing, relief for rural providers and providers in hotspots, and compensation for care to uninsured COVID-19 patients

<u>HRSA</u>

- Details on <u>which services</u> qualify for reimbursement through the COVID-19 Claims Reimbursement portal
- Information on which <u>testing and treatment codes</u> are eligible for reimbursement through the COVID-19 Claims Reimbursement portal

www.mcdermottplus.com



- Information on how to initiate the reimbursement process
- A <u>step-by-step video</u> on how set up Optum PayTM and receive direct deposits
- A <u>companion guide</u> on how to submit claims through the portal
- A <u>checklist</u> for providers on the documentation they will need to submit claims
- FAQs for the COVID-19 Claims Reimbursement portal

<u>CDC</u>

- Updated frequently: A list of providers who received a payment from the General Distribution of the Provider Relief Fund who have attested payments and agreed to the Terms and Conditions
- Updated frequently: A <u>dataset</u> of the healthcare entities who have agreed to the Terms and Conditions and received claims reimbursement for testing or treatment of uninsured COVID-19 patients.
- Details on the 395 hospitals that received payments from the \$12 billion COVID-19 hotspot allocations

Portals

- Enhanced Provider Relief Fund Payment Portal for Medicaid and CHIP providers
- CARES Act Provider Relief Fund Payment <u>Attestation Portal</u>
- General Distribution Portal
- COVID-19 Uninsured Program Portal

Terms and Conditions

- Relief funds from the <u>\$20 billion General Distribution</u> for Medicare FFS providers
- Relief funds from the \$30 billion General Distribution for Medicare FFS providers
- Payments for <u>testing</u> from the Families First Coronavirus Response Act
- Reimbursement for COVID-19 care for <u>uninsured patients</u>
- Relief funds to hotspot hospitals
- Testing funding for <u>Rural Health Clinics</u>
- Relief funds for <u>rural providers</u>
- Relief funds to Skilled Nursing Facilities
- Relief funds to <u>Indian Health Service</u> facilities
- Relief funds to Medicaid and CHIP providers
- Relief funds to <u>safety net</u> providers



FAQs

- Updated frequently: <u>FAQs</u> on the General Distribution Portal
- FAQs for the COVID-19 Claims Reimbursement portal
- Questions and answers from webcasts hosted by HRSA on April 29 and 30 about the COVID-19 Claims reimbursement portal

Original Analysis from McDermott+Consulting

- June 9 HHS Announces <u>Funding Distributions</u> to Medicaid Providers and Safety Net Hospitals, and Additional Hotspot Funding
- May 19 House Approves <u>HEROES Act</u>
- May 4 HHS Distributes \$22B to Hotspots and Rural Providers
- April 25 HHS Announces Additional Distributions from Emergency Fund
- April 23 <u>Congress Supplements</u> the Emergency Fund
- April 6 HHS Distributes <u>\$30B to FFS Medicare Providers</u>
- March 27 <u>CARES Act</u> Offers Relief, Support for US Healthcare Sector During COVID-19 Response
- March 19 The Families First Coronavirus Response Act: What You Need to Know