



**H B S**

Healthcare Business Specialists

**CARES Act Provider Relief Fund  
Healthcare Business Specialists  
Sponsored by Azalea Health and ChartSpan  
April 10, 2020**





# HBS

Healthcare Business Specialists

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**[Become a fan and Like us on Facebook for more  
RHC information](#)**



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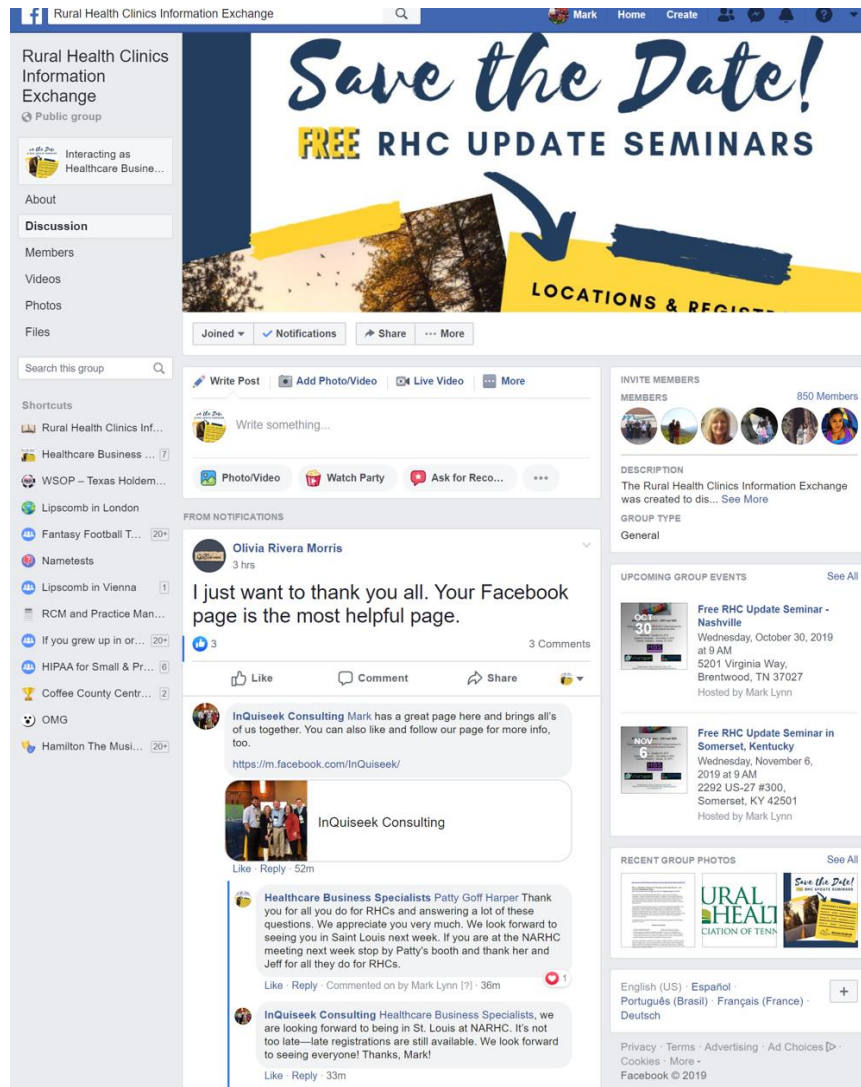
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**[www.ruralhealthclinic.com](http://www.ruralhealthclinic.com)**

**[RHC Information Exchange Group on Facebook](#)**

• *"A place to share and find information on RHCs."*



## RHC Information Exchange Group on Facebook

Join this group to post or ask questions regarding RHCs. Anyone is welcome to post about meetings, seminars, or things of interest to RHCs

<https://www.facebook.com/groups/1503414633296362/>



# HBS

Healthcare Business Specialists

- What does Healthcare Business Specialists do?
- Listing of Services

<https://tinyurl.com/w63xbp9>

- We prepare Medicare and Medicaid Cost Reports for Rural Health Clinics.
- We prepare Program evaluations of RHCs.
- We help clinics startup as RHCs.
- Emergency Preparedness for RHCs.
- We prepare TennCare Quarterly Reports
- Our Cost Reporting Brochure can be found at the following link:
- [RHC Cost Report Brochure](#)



### COVID-19 RESOURCES FOR RHCS

Healthcare Business Specialists is using this COVID-19 website to provide resources for our RHCs. We have provided links to valuable information as you deal with this world-wide pandemic.

Vast amounts of ever-changing information must be assimilated by RHCs regarding the COVID-19 Public Health Emergency (PHE) at a dizzyingly fast pace. It is difficult, even impossible, to keep up with all the changes affecting the operation of a medical clinic or hospital during this unprecedented time. Information has always been a perishable asset, but, never so much as in this time of constant change and guidance from our government. While not getting political, one can not help but be impressed by the dedication and commitment from our governmental agencies in fighting this war with COVID-19 and the government's resolve to win this war without completely sacrificing the financial future of those that survive this war.

In order to help you process, organize, and locate information related to COVID-19 we have organized this site into Topics, so you find information much faster. If you click the links below you will find a chronological list of resources dated from the latest to the oldest. We at Healthcare Business Specialists hope this helps you find the answers you need during this difficult time.

[Telehealth](#)   [State Medicaid and Regulations](#)   [Financial](#)   [Laws and Regulations](#)   [Other Resources](#)

**For Updates, a recording of this webinar, slide presentations, and lots of information on RHCs and COVID-19 go to our COVID-19 Website**

<http://www.ruralhealthclinic.com/covid19>



# Coronavirus Aid, Relief, and Economic Security Act

CARES Act Provider Relief Fund

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## CARES Act Provider Relief Fund

President Trump is providing support to healthcare providers fighting the COVID-19 pandemic. On March 27, 2020, the President signed the bipartisan CARES Act that provides \$100 billion in relief funds to hospitals and other healthcare providers on the front lines of the coronavirus response. This funding will be used to support healthcare-related expenses or lost revenue attributable to COVID-19 and to ensure uninsured Americans can get testing and treatment for COVID-19.

### Immediate infusion of \$30 billion into healthcare system

Recognizing the importance of delivering funds in a fast and transparent manner, \$30 billion is being distributed immediately – with payments arriving via direct deposit beginning April 10, 2020 – to eligible providers throughout the American healthcare system. **These are payments, not loans, to healthcare providers, and will not need to be repaid.**

#### Who is eligible for initial \$30 billion

- All facilities and providers that received Medicare fee-for-service (FFS) reimbursements in 2019 are eligible for this initial rapid distribution.
- Payments to practices that are part of larger medical groups will be sent to the group's central billing office.
  - All relief payments are made to the billing organization according to its Taxpayer Identification Number (TIN).
- As a condition to receiving these funds, providers must agree not to seek collection of out-of-pocket payments from a COVID-19 patient that are greater than what the patient would have otherwise been required to pay if the care had been provided by an in-network provider.
- This quick dispersal of funds will provide relief to both providers in areas heavily impacted by the COVID-19 pandemic and those providers who are struggling to keep their doors open due to healthy patients delaying care and cancelled elective services.

#### How are payment distributions determined

- Providers will be distributed a portion of the initial \$30 billion based on their share of total Medicare FFS reimbursements in 2019. Total FFS payments were approximately \$484 billion in 2019.
- A provider can estimate their payment by dividing their 2019 Medicare FFS (not including Medicare Advantage) payments they received by \$484,000,000,000, and multiply that ratio by \$30,000,000,000. Providers can obtain their 2019 Medicare FFS billings from their organization's revenue management system.
- As an example: A community hospital billed Medicare FFS \$121 million in 2019. To determine how much they would receive, use this equation:  
$$-\$121,000,000/\$484,000,000,000 \times \$30,000,000,000 = \$7,500,000$$

#### What to do if you are an eligible provider

- HHS has partnered with UnitedHealth Group (UHG) to provide rapid payment to providers eligible for the distribution of the initial \$30 billion in funds.
- Providers will be paid via Automated Clearing House account information on file with UHG or the Centers for Medicare & Medicaid Services (CMS).
  - The automatic payments will come to providers via Optum Bank with "HIHSPAYMENT" as the payment description.
  - Providers who normally receive a paper check for reimbursement from CMS, will receive a paper check in the mail for this payment as well, within the next few weeks.
- Within 30 days of receiving the payment, providers must sign an attestation confirming receipt of the funds and agreeing to the terms and conditions of payment. The portal for signing the attestation will be open the week of April 13, 2020, and will be linked on this page.
- HHS' payment of this initial tranche of funds is conditioned on the healthcare provider's acceptance of the [Terms and Conditions - PDF](#).

[https://www.hhs.gov/provider-relief/index.html?fbclid=IwAR1IE741tt6IzrYllKpda1Y81Bguqa5aR5W8zTYwcp\\_owMGESVI-SeATU8E](https://www.hhs.gov/provider-relief/index.html?fbclid=IwAR1IE741tt6IzrYllKpda1Y81Bguqa5aR5W8zTYwcp_owMGESVI-SeATU8E)

# CARES Act Provider Relief Fund Overview

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- A provider can estimate their payment by dividing their 2019 Medicare FFS (not including Medicare Advantage) payments they received by \$484,000,000,000, and multiply that ratio by \$30,000,000,000.

Providers can obtain their 2019 Medicare FFS billings from their organization's revenue management system.

- As an example: A community hospital billed Medicare FFS \$121 million in 2019. To determine how much they would receive, use this equation:

- $\$121,000,000 / \$484,000,000,000 \times \$30,000,000,000 = \$7,500,000$

# How are payment distributions determined

| # | Description  | Amount          |
|---|--|-----------------|
| 1 | Medicare FFS reimbursements(484 Billion (2019))  | 484,000,000,000 |
| 2 | RHCs should look at their Medicare Net payments per the P S and R from 2019. We will use \$100,000 in this example   | 100,000         |
| 3 | Divide the RHC Medicare net payments by the Total Medicare FFS reimbursements which will equal some astronomically low number  | 2.06612E-07     |
| 4 | Medicare is disbursing \$30 Billion on April 10, 2020  | 30,000,000,000  |
| 5 | Multiply the \$30 billion by the percentage of total funding your RHC receives from Medicare each year (that astronomically low number) and this should be approximately what you received in your EFT today | \$6,200         |

“I’ve been briefed on every contingency you can possibly imagine, many contingencies,” the president said. “A lot of positive. Different numbers. All different numbers. Very large numbers. And some small numbers too, by the way.” – President Donald Trump

# Is this different than the CMS Accelerated and Advance Payment Program?

Yes. The CMS Accelerated and Advance Payment Program has delivered billions of dollars to healthcare providers to help ensure providers and suppliers have the resources needed to combat the pandemic. The CMS accelerated and advance payments are a loan that providers must pay back. [Read more information from CMS.](#)

## What are the Priorities for the remaining \$70 billion

The Administration is working rapidly on targeted distributions that will focus on providers in areas particularly impacted by the COVID-19 outbreak, rural providers, providers of services with lower shares of Medicare reimbursement or who predominantly serve the Medicaid population, and providers requesting reimbursement for the treatment of uninsured Americans.

## How the payments apply to different types of providers

All relief payments are being made to providers and according to their tax identification number (TIN). For example:

- *Large Organizations and Health Systems:* Large Organizations will receive relief payments for each of their billing TINs that bill Medicare. Each organization should look to the part of their organization that bills Medicare to identify details on Medicare payments for 2019 or to identify the accounts where they should expect relief payments.
- *Employed Physicians:* Employed physicians should not expect to receive an individual payment directly. The employer organization will receive the relief payment as the billing organization.
- *Physicians in a Group Practice:* Individual physicians and providers in a group practice are unlikely to receive individual payments directly, as the group practice will receive the relief fund payment as the billing organization. Providers should look to the part of their organization that bills Medicare to identify details on Medicare payments for 2019 or to identify the accounts where they should expect relief payments.
- *Solo Practitioners:* Solo practitioners who bill Medicare will receive a payment under the TIN used to bill Medicare.

## **Ensuring Americans are not surprised by bills for COVID-19 medical expenses**

The Trump Administration is committed to ensuring that Americans are protected against financial obstacles that might prevent them from getting the testing and treatment they need from COVID-19.

- As announced in early April, a portion of the \$100 billion Provider Relief Fund will be used to reimburse healthcare providers, at Medicare rates, for COVID-related treatment of the uninsured.
  - As a condition, providers are obligated to abstain from "balance billing" any patient for COVID-related treatment.
- The Families First Coronavirus Response Act requires private insurers to cover an insurance plan member's cost-sharing payments for COVID-19 testing.
- President Trump has also secured commitments from private insurers, including Humana, Cigna, UnitedHealth Group, and the Blue Cross Blue Shield system to waive cost-sharing payments for treatment related to COVID-19 for plan members.



# What if you did not get an EFT today?

Apr 10, 2020 @ 12:43:41 PM US/Central [GMT-6]

From: Bill Finerfrock, Executive Director [bf@capitolassociates.com](mailto:bf@capitolassociates.com)

Some RHCs have reported that they have not received a deposit for the Provider Relief Fund.

If you have not received a deposit and you received Medicare Payments in 2019 and are therefore eligible **you should call the CARES Provider Relief hotline at (866) 569-3522.**

NARHC is also making inquiries to try to understand what may have happened and will post an update if and when we learn more. I have called the hotline and they can only provide limited assistance at this time. They will have a "look-up" tool that will allow them to see, real-time that status of your payment; however, I was told that the operators are having difficulty with the look-up tool. You will need to provide them with the name of the clinic as enrolled in Medicare as well as your tax ID Number associated with that enrollment. You can try to hotline today but you may need to call back next week due to the problems with the look-up tool. Bill

# Direct Deposit Relief Funds HHS Relief Fund Payment Terms and Conditions

<https://www.hhs.gov/sites/default/files/relief-fund-payment-terms-and-conditions-04092020.pdf>

## Relief Fund Payment Terms and Conditions

- The Payment means the funds received from the Public Health and Social Services Emergency Fund (“Relief Fund”). The Recipient means the healthcare provider, whether an individual or an entity, receiving the Payment.
- The Recipient certifies that it billed Medicare in 2019; currently provides diagnoses, testing, or care for individuals with possible or actual cases of COVID-19; is not currently terminated from participation in Medicare; is not currently excluded from participation in Medicare, Medicaid, and other Federal health care programs; and does not currently have Medicare billing privileges revoked.
- The Recipient certifies that the Payment will only be used to prevent, prepare for, and respond to coronavirus, and shall reimburse the Recipient only for health care related expenses or lost revenues that are attributable to coronavirus.
- The Recipient certifies that it will not use the Payment to reimburse expenses or losses that have been reimbursed from other sources or that other sources are obligated to reimburse.
- The Recipient shall submit reports as the Secretary determines are needed to ensure compliance with conditions that are imposed on this Payment, and such reports shall be in such form, with such content, as specified by the Secretary in future program instructions directed to all Recipients.
- Not later than 10 days after the end of each calendar quarter, any Recipient that is an entity receiving more than \$150,000 total in funds under the Coronavirus Aid, Relief, and Economic Security Act (P.L. 116-136), the Coronavirus Preparedness and Response Supplemental Appropriations Act (P.L. 116-123), the Families First Coronavirus Response Act (P.L. 116-127), or any other Act primarily making appropriations for the coronavirus response and related activities, shall submit to the Secretary and the Pandemic Response Accountability Committee a report. This report shall contain: the total amount of funds received from HHS under one of the foregoing enumerated Acts; the amount of funds received that were expended or obligated for each project or activity; a detailed list of all projects or activities for which large covered funds were expended or obligated, including: the name and description of the project or activity, and the estimated number of jobs created or retained by the project or activity, where applicable; and detailed information on any level of sub-contracts or subgrants awarded by the covered recipient or its subcontractors or subgrantees, to include the data elements required to comply with the Federal Funding Accountability and Transparency Act of 2006 allowing aggregate reporting on awards below \$50,000 or to individuals, as prescribed by the Director of the Office of Management and Budget.
- The Recipient shall maintain appropriate records and cost documentation including, as applicable, documentation required by 45 CFR § 75.302 – Financial management and 45 CFR § 75.361 through 75.365 – Record Retention and Access, and other information required by future program instructions to substantiate the reimbursement of costs under

## Required Reporting for CARES Act Provider Relief Fund

**Not later than 10 days after the end of each calendar quarter**, any Recipient that is an **entity receiving more than \$150,000 total in funds** under the Coronavirus Aid, Relief, and Economics Security Act (P.L. 116-136), the Coronavirus Preparedness and Response Supplemental Appropriations Act (P.L. 116-123), the Families First Coronavirus Response Act (P.L. 116-127), or any other Act primarily making appropriations for the coronavirus response and related activities, shall submit to the Secretary and the Pandemic Response Accountability Committee a report.

This report shall contain: the total amount of funds received from HHS under one of the foregoing enumerated Acts;

- the amount of funds received that were expended or obligated for each project or activity;
- a detailed list of all projects or activities for which large covered funds were expended or obligated,
- the name and description of the project or activity,
- the estimated number of jobs created or retained by the project or activity
- and detailed information on any level of sub-contracts or subgrants awarded by the covered recipient or its subcontractors or subgrantees, to include the data elements required to comply with the Federal Funding Accountability and Transparency Act of 2006 allowing aggregate reporting on awards below \$50,000 or to individuals, as prescribed by the Director of the Office of Management and Budget.

# Sample Form to Report Provider Relief Funds if you receive more than \$150,000

## CARES Act Provider Relief Fund – Due 10 Days after the end of each Quarter

Covered Quarter: \_\_ / \_\_ /2020 - \_\_ / \_\_ /2020

Is the covered recipient receiving more than \$150,000 from any Act whose primary function is to appropriate funds for the coronavirus response and related activities? Yes No

What is the total amount of funds received from HHS through such an Act? \$ \_\_\_\_\_

Below, please provide a list of projects/activities for which large amounts of covered funds were expended or obligated.

| Name of Project/Activity | Description of Project/Activity | Estimated number of Jobs Created/Retained (if applicable) | Amount of funds received that were expended or obligated |
|--------------------------|---------------------------------|---|--|
|                          |                                 |   |  |
|                          |                                 |   |  |
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|                          |                                 |   |  |
|                          |                                 |   |  |
|                          |                                 |   |  |

If applicable, please provide detailed information below on any level of sub-contracts or subgrants awarded by the covered recipient or its subcontractors or subgrantees compliant with the Federal Funding Accountability and Transparency Act of 2006.

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Agreement: <https://www.hhs.gov/sites/default/files/relief-fund-payment-terms-and-conditions-04092020.pdf>

Source: [https://www.hhs.gov/provider-relief/index.html?fbclid=IwAR14a-9ISQiuRTFNmtJ3QpUJ4VjdcUHrdhhc6PQ3IYHYFK\\_Z\\_D1QkZLCJnQ](https://www.hhs.gov/provider-relief/index.html?fbclid=IwAR14a-9ISQiuRTFNmtJ3QpUJ4VjdcUHrdhhc6PQ3IYHYFK_Z_D1QkZLCJnQ)



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Thank you. Look for more Pop-up Webinars

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