



HHS COVID 19 Medicaid Provider Relief Fund Application Webinar

A practical “how to” guide for Medicaid
PCS Assisted Living Facilities to apply for relief funding
July 9, 2020

*Presented by Richard Rutherford, LTSS CONSULTING INC.
in partnership with the North Carolina Senior Living
Association*



Background of the HHS Provider Relief Program

- In the 21st Century CARES Act, Congress set aside major funding to support Medicare and Medicaid providers in their efforts to prevent the spread of COVID and care for those in their patient base affected by COVID.
- Prior rounds of this funding were targeted for providers other than Medicaid PCS facilities.
- Today's webinar concerns the latest round of funding, which is specifically aimed at Medicaid providers not funded in prior rounds.

NOW IT IS YOUR TURN!



The closing date for Medicaid providers to apply is **July 20, 2020.**

July 2020						
S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	



What is the Criteria for Applying for the Funds?

PROVIDERS WHO:

1. Received no prior payments from other rounds of funding
2. Billed the Medicaid program during the period of 1/1/2018-12/31/2019
3. Filed a federal tax return for 2017, 2018 or 2019
4. Provided patient care after January 1, 2020
5. Have not permanently stopped providing patient care

Program Terms and Conditions

*Terms and
Conditions*

- The terms are not onerous and serve to limit the use of the funds to non-prohibited activities and to support the intended uses of the money.
- You are encouraged to study them.

So who in your company can legally file the application?

- Anyone authorized by the company!

It's probably good to have someone who is good with numbers, such as your accountant or CFO.



Where And How Do You Apply?

- All applications must be submitted directly to the HHS website. No paper!
- No banks or third parties are involved. This is not a forgivable loan program, like the PPP. It is a grant program, with conditions on spending.
- Website address:

<https://www.hhs.gov/coronavirus/cares-act-provider-relief-fund/for-providers/index.html>



HHS.gov Homepage - CARES Act Provider Relief Fund: For Providers

HHS.gov

Coronavirus

U.S. Department of Health & Human Services

I'm looking for...

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Coronavirus (COVID-19)

CARES Act Provider Relief Fund

For Providers

General Information

Data

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COVID-19 News

Optimizing Ventilators

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CARES Act Provider Relief Fund: For Providers

Providers can use the portals below to sign an attestation, accept or return the funds, agree to terms and conditions, submit revenue information, and request reimbursement. Read the descriptions below to find the appropriate portal.

Note:

To be considered for the Medicaid and CHIP Distribution, providers must submit their gross revenues from patient care for CY 2017, 2018, or 2019 by July 20, 2020. Applications submitted after this deadline will not be considered for funding.

CARES Act Provider Relief Fund Payment Attestation Portal

Providers who have been allocated a payment **must** use this portal to sign an attestation confirming receipt of the funds and agree to the terms and conditions within 90 days of payment.

Sign Attestation

Enhanced Provider Relief Fund Payment Portal

Providers eligible for additional allocations **must** provide HHS with information, and these providers **must** also agree to the program Terms and Conditions. This portal is currently open to Medicaid/CHIP Providers.




Frequently Asked Questions (FAQs) on the HHS CARES ACT Website

<https://www.hhs.gov/coronavirus/cares-act-provider-relief-fund/faqs/index.html#medicaid-targeted>

Scroll Further Down the Page To This Section

Medicaid/CHIP Provider Relief Fund Payment Forms and Guidance

HHS expects to distribute \$15 billion to eligible Medicaid/CHIP programs or Medicaid managed care plans. The payment to each provider will be at least 2 percent of reported gross revenue from patient care; the final amount each provider receives will be determined after the data is submitted, including information about the number of Medicaid patients providers serve.

Providers must submit their data by July 20, 2020. Before applying through the [Enhanced Provider Relief Fund Payment Portal](#)  applicants should:

[Read the Medicaid Provider Distribution Instructions - PDF](#)

[Download the Medicaid Provider Distribution Application Form - PDF](#)

Notice What's Here

- A link to the application portal
- Instructions (pdf)
- Application form (pdf)
- At the bottom of the page - the terms and conditions for use of the funds:

[Medicaid & CHIP Provider Relief Fund Payment Terms and Conditions - PDF](#)

The recipient has received a payment appropriated as part of the Medicaid and CHIP distribution.

Once You Have Located The Right Page:

1. Download, Print and Study the Instructions, Application and Terms and Conditions.
2. In the Application, there are links to 2 worksheets. Complete these, Save and Upload to the portal. (Only the first worksheet will be needed by most providers).

3. Links to worksheets:

<https://hhs.gov/sites/default/files/prf-fte-worksheet.xlsx>

and

<https://hhs.gov/sites/default/files/prf-gross-revenues-worksheet.xlsx>



There are 2 Worksheets to complete

1. FTE Worksheet

2. Gross Revenue Worksheet

Let's look at both!

FTE Worksheet

- Used to report the number of Full Time Equivalent (FTE) Primary Caregivers you might employ. While most of don't employ that type of worker, (read the definition) you must still upload the FTE worksheet at Field 31, even if it is blank and does not apply to you.
- Otherwise, the Portal software won't let you proceed.
- As you will see on the next slide, you can fill in some basic data on the worksheet to tell them it's your business and to confirm you have no FTE Primary Care Providers as defined.

FTE Worksheet (Form 1.0)

(1) Name as shown on your federal income tax return:

(2) Taxpayer identification number (enter without dashes):

(3) Primary provider FTE -> **Enter in Field (27) on the application form**

(4) Primary provider (see instructions for Field 31) information as of 5/31/2020:

Number	Last Name	First Name	NPI	Physician (P), Dentist (D), or Other (O)	FTE
<i>Example</i>	<i>Public</i>	<i>John Q.</i>	<i>12345678910</i>	<i>P</i>	<i>0.75</i>
1					
2					
3					
4					
5					
6					
7					
8					

Some Fields are protected but it does not prevent you from entering your company name, EIN and stating you have NO PRIMARY CARE FTEs.

Gross Revenues Worksheet

- Used where the gross revenues on your tax return are distorted due to an acquisition or sale midyear.
- Unlike the FTE spreadsheet, the software does not force you to upload it, and it need not be uploaded unless it applies (which is unlikely for many of you).
- If you use it, your accountant will need to assist you.

These documents will need to be scanned into your hard drive to upload later:

1. Your most recently filed business Federal tax return (2017, 2018 or 2019) –you'll need data from this return, by the way.
2. Your 941 Employment tax return for Q1 2020 or your Employer's annual FUTA return on form 940, or a statement why you are exempt from either form (i.e., no employees)

Oh Yeah ...There's Some Math:



- Do the calculations required by the Application Form and enter the resulting data on the PDF you printed out.
- Most of what you need comes off the same tax return you are planning to upload. (You don't upload the filled-in form, but it saves time to have it handy when you start the online application.)
- So take the time to muscle your way through the form and get all the numbers right before trying to go into the portal.

Best Practice....

- The form can be edited while you are completing it but you cannot reopen and edit the application once it is submitted!
- Only one application can be submitted.

Therefore, before starting the application, take special care to have all the materials on hand and the numbers correct.



Let's look at the Application:

- Technically there are three pages, but the third page states it is intentionally left blank.

So, really only two pages!



CARES Act Provider Relief Fund

Tax ID Number: _____

Name as shown on your
income tax return: _____

Federal Tax Classification: _____

Business Name (if different): _____

Street 1: _____

Street 2: _____

City: _____ State: _____ Zip: _____

Registration Type: _____

Group NPI (Group Only): _____

(1) Contact Person Name: _____

(2) Contact Person Title: _____

(3) Contact Person Phone
Number: _____

(4) Contact Person Email: _____

(5) Applicant Type: _____

Let's talk about the top of page one:

Reference ID - do not enter

EIN - Validate during the online process. Once online, some data is pre-filled

Federal Tax Classification - is C Corporation, Subchapter S, etc.

Applicant Type (Field 5) is chosen from the Chart on Page 3 of the Instructions.

“RF” stands for Residential Facility, for example.

Note that an FAQ added on June 25 states that PCS providers should choose OT “Other”. HHS clarified in a phone call “RF” is Correct.



BOTTOM of PAGE ONE

IF FILING TIN INCLUDES FACILITIES

(6) Number of facilities: _____ (7) Beds for all facilities: _____

(8) Total number of FTE: _____

(9) CMS Certification
Number (CCN), if applicable: _____

REVENUES

(10) Gross Revenues: \$ _____

(11) Fiscal Year of Gross Revenues: _____

(12) Percentage of Gross Revenue from Patient Care: _____ %

(13) Lost Revenues due to COVID-19: \$ _____

(14) Increased Expenses due to COVID-19: \$ _____

(15) Upload Gross Revenues
Worksheet (if required): _____

(16) Upload Federal
Tax Form: _____

Bottom of Page one – Revenues

First, this refers to gross revenues (Field 10) – meaning not just Medicaid, but also Medicare (rare for most of you), Private Pay, Insurance, SA, etc.

Where do I find my Gross Revenues? Depends on what you file:

Form 1040 Box 1 of Schedule C

Form 1065 Box 1a

Form 1120 Box 1a

Form 1120-S Box 1a

Form 990 Use Part I, 9 "Program Services revenue"

Form 1041 Box 1 of Form 1040 Schedule C

[Note: you use a Form 1040 Schedule C also for Form 1041]

Note that you must upload your Gross Revenue Worksheet (Field 15) if applicable and your Federal Tax Return (Field 16) here.



Page One – Revenues (cont.)

Note: *If your reported gross revenue is different from what's on the tax return you will upload, then fill in and upload the gross revenue spreadsheet (Field 15). IF SO, CALL YOUR ACCOUNTANT!*

Calculate how much of your gross revenue, *on a percentage basis*, is due to patient care (Field 12).

Also calculate your lost Revenues for the months of March and April 2020 due to COVID 19 (Field 13), as well as any increased expenses due to COVID 19 (FIELD 14).

Note: *Field 13 should be reported as a negative number if COVID cost you money.*

The Application Instructions and FAQs have a lot to say about both of these items – most of which is very helpful. In both cases, it appears there is leeway in presenting your figures.

Lost Revenues Due To COVID

The instructions for Field 13 state:

“You may use any reasonable method of estimating the revenue during March and April 2020 compared to the same period had COVID-19 not appeared. **For example, if you have a budget prepared without taking into account the impact of COVID-19, the estimated lost revenue could be the difference between your budgeted revenue and actual revenue.** It would also be reasonable to compare the revenues to the same period last year.”

Lost Revenues Due To COVID- a way to look at it

Suppose your business plan for 2020 called for you to achieve a 95% occupancy based on better marketing, and an upgraded facility. You might even have begun to see the results of your efforts in early 2020 before the coronavirus hit. Then your building got locked down, perhaps some patients died and replacements did not move in, and your private pay patient headcount slumped. You could reasonably say that the lost revenue is the difference in headcount multiplied by planned revenue per bed.

Increased Expenses Due To Covid

“The term ‘healthcare related expenses attributable to coronavirus’ is a broad term that may cover a range of items and services purchased to prevent, prepare for, and respond to coronavirus, including: supplies used to provide healthcare services for possible or actual COVID-19 patients.”

More On Expenses

Expenses also include:

“Equipment used to provide healthcare services for possible or actual COVID-19 patients; workforce training; developing and staffing emergency operation centers; reporting COVID-19 test results to federal, state, or local governments; building or constructing temporary structures to expand capacity for COVID-19 patient care or to provide healthcare services to non-COVID-19 patients in a separate area from where COVID-19 patients are being treated; and acquiring additional resources, including facilities, equipment, supplies, healthcare practices, staffing, and technology to expand or preserve care delivery.”

And To Top It Off...

“Providers may have incurred eligible health care related expenses attributable to coronavirus prior to the date on which they received their payment. Providers can use their Provider Relief Fund payment for such expenses incurred on any date, so long as those expenses were attributable to coronavirus and were used to prevent, prepare for, and respond to coronavirus. HHS expects that it would be highly unusual for providers to have incurred eligible expenses prior to January 1, 2020.”

How Can you Use the Money?

The term “lost revenues that are attributable to coronavirus” means any revenue that you as a healthcare provider lost due to coronavirus. This may include revenue losses associated with fewer outpatient visits, canceled elective procedures or services, or increased uncompensated care. Providers can use Provider Relief Fund payments to cover any cost that the lost revenue otherwise would have covered, so long as that cost prevents, prepares for, or responds to coronavirus.

How Can you Use the Money? (cont.)

Thus, these costs do not need to be specific to providing care for possible or actual coronavirus patients, but the lost revenue that the Provider Relief Fund payment covers must have been lost due to coronavirus. HHS encourages the use of funds to cover lost revenue so that providers can respond to the coronavirus public health emergency by maintaining healthcare delivery capacity.

So, can you use Provider Relief Fund payments to cover:

- Employee or contractor payroll - YES
- Employee health insurance - YES
- Rent or mortgage payments - YES
- Equipment lease payments -YES
- **Electronic health record fees - YES**

Page 2 – Payer Mix (Take your time on Page 2)

- At the top of Page 2, break down your revenue sources by category at Fields 17-23.
- The percentage is calculated against the gross revenue from the tax return shown on Page One.
- Most of you don't receive Medicare Part A, B or C, so enter zero in Fields 17 and 18.
- **It is my understanding that these are accrual basis numbers.**
“Medicaid” (Field 19) will be your PCS money. SA should go into Field 22, “Other Government Payer”. Percentages must total 100%.

ENTER PAYER MIX

(17) Medicare Part A + B: _____ %

(18) Medicare Part C: _____ %

(19) Medicaid: _____ %

(20) Commercial Insurer: _____ %

(21) Self-Pay: _____ %

(22) Other government payer: _____ %

(23) Other: _____ %

(24) Total: _____ %

(25) Total Amount received from Treasury SBA / PPP for Filing TIN and subsidiary TINs as of 5/31/2020: \$ _____

(26) Total of payments received from FEMA for Filing TIN and subsidiary TINs as of 5/31/2020: \$ _____

(27) Primary Provider FTE under filing TIN as of 5/31/2020: _____

(28) Non-Primary FTE under filing TIN as of 5/31/2020: _____

(29) Other FTE under filing TIN as of 5/31/2020: _____

(30) Number of Locations as of 5/31/2020: _____

(31) Upload FTE
Worksheet: _____(32) Upload IRS Form 941
for Q1 2020: _____

Page 2 (cont.)

Note that after the Payer Mix section, Page 2 asks for FTE numbers.

Three FTE categories are listed:

- Primary (Field 27),
 - Non-Primary (Field 28), and
 - Other (Field 29).
-
- Reading the definition, it appears most of you do not employ “primary” FTEs. Your aides, and those who provide care, should be entered in Non-Primary (Field 28). Office staff and other non-caregivers go under “Other” (Field 29).
-
- You will see spaces for the FTE Spreadsheet (Field 31) and the 941 Form (Field 32).

Page 2 (cont.)

- You must upload an FTE Spreadsheet, as noted earlier, or the software will not let you proceed.
- Note that you enter your PPP loan data here at (Field 25). THIS DOES NOT DISQUALIFY YOU FOR THE HHS FUNDING. They just want to know about it.

BANKING INFORMATION

(33) Bank Name: _____ (34) ABA Routing Number: _____
(35) Account Holder Name: _____ (36) Account Number: _____

OPTIONAL FIELDS

(37) Optional Field Code #1: _____ (38) Optional Field #1: _____
(39) Optional Field Code #2: _____ (40) Optional Field #2: _____
(41) Optional Field Code #3: _____ (42) Optional Field #3: _____

OPTIONAL UPLOADS

(43) Optional Upload Code #1: _____ (44) Optional Upload #1: _____

(45) Optional Upload Code #2: _____ (46) Optional Upload #2: _____

(47) Optional Upload Code #3: _____ (48) Optional Upload #3: _____

Bottom of Page 2 - Banking

- Enter the specifics on where the money will go when the funding comes to you.
- Your Account Holder name (FIELD 35) is the name the Bank has on your account.
- Be careful entering the bank account and routing numbers. *There is no going back to change it if you enter them incorrectly.*

You have it all together. Now What?

First you click on the Portal Link on the website.

<https://cares.linkhealth.com/#/>

It takes you to a page where you either apply for or enter an Optum ID.

The Department of Health and Human Services has contracted with UnitedHealth Group to administer Provider Relief Fund payments. Therefore, some steps in the process involve existing UnitedHealth Group tools. Specifically, you'll need to set up an Optum ID in order to access the portal. The process will not involve credentialing or contracting with UnitedHealth Group, and the information you submit will be used to administer the Provider Relief Fund payment.

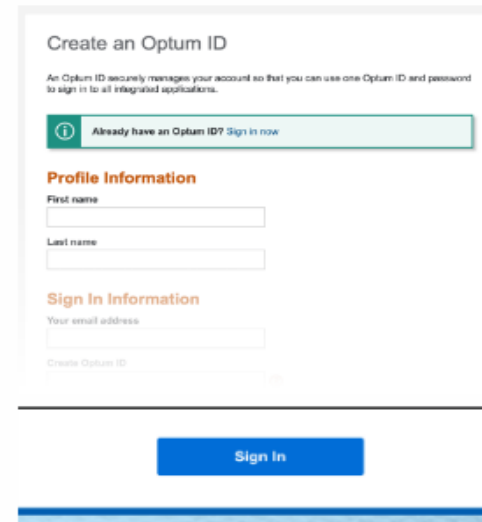
Set up Optum ID

1. If you do not have an Optum ID

You will need to create an Optum ID to access the portal, [start registration here](#) to begin.

2. If you have an Optum ID already

You can access the portal at the top right of the webpage to sign in or [sign in with Optum ID here](#).



The screenshot shows a web form titled "Create an Optum ID". Below the title is a sub-header: "An Optum ID securely manages your account so that you can use one Optum ID and password to sign in to all integrated applications." There is a green button with a white 'i' icon and the text "Already have an Optum ID? Sign in now". Below this is a section titled "Profile Information" with two input fields: "First name" and "Last name". Below that is a section titled "Sign In Information" with two input fields: "Your email address" and "Create Optum ID". At the bottom of the form is a blue button labeled "Sign In".

After you sign in with your Optum ID

You then have to validate your EIN – this can take some time!

Begin Validating TIN

TIN validation may take 1-2 business days to process. [Click the tabs to learn more.](#) Actual screens may look different.

Organization TIN Dashboard

Please see status details and complete any actions required below.

Organization Tax ID Number: **123456789**, Provider Name: **John Smith**

Action required for this TIN:

- [Validate TIN](#)

Not available yet:

Revenue and Tax Information
Attest to Payment and Terms



Validate TIN

Available Now

[Get Started](#)



Revenue and Tax Information

Not Available Yet

You will be able to confirm revenue and tax information once TIN Validation is complete.



Attest to Payment and Terms

Not Available Yet

Once payment has been issued, you will be able to attest to fund distribution.

Add Organization TIN

* Required Fields

Organization TIN* ⓘ

Provider Name (as shown on IRS Form W-9 for this TIN)*

Add TIN

You May Call Support : 866-569-3522

You may get an email if EIN validation fails

From: NO-REPLY-LINKHHS <noreply.trackit@uhc.com>
Date: June 16, 2020 at 2:50:05 PM EDT
To: [REDACTED]
Subject: Problem with TIN Validation: CARES Provider Relief Fund

June 16, 2020

TIN Validation Was Not Successful

Based on the information provided on the CARES Act Provider Relief Fund Payment Attestation Portal, we were not able to successfully complete Taxpayer Identification Number (TIN) validation for the TIN ending in 929.

Contact Us

Please contact the provider support line at 866-569-3522; for TTY dial 711 if you have any questions. Hours of operation are 7 a.m. to 10 p.m. Central Time, Monday - Friday.

Program eligibility and allocation of funds is determined by HHS, subject to adjustment (as may be necessary) and available funding; see details at <https://www.hhs.gov/coronavirus/cares-act-provider-relief-fund/index.html>.

Terms and conditions will apply.

This email was sent by United HealthCare Services, 9700 Health Care Lane, Minnetonka, MN 55343 USA on behalf of the U.S. Department of Health & Human Services , 200 Independence Ave SW, Washington, DC 20201.

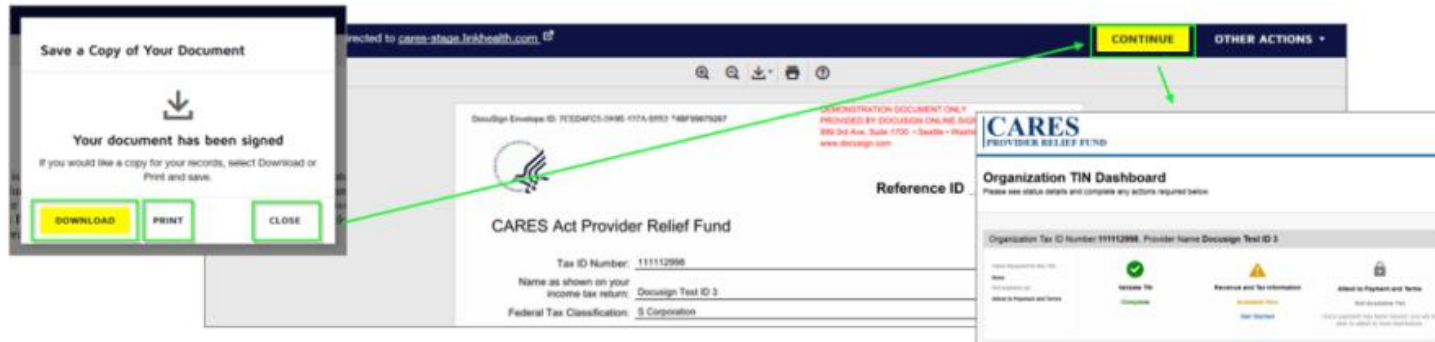
Once your EIN is validated, you can enter the data and upload the documents

The online entry follows the form. Next is Docusign for electronic signature.

CONFIRM REVENUE AND TAX INFORMATION

Complete the Request

Click the tabs to learn more.



✔ Post-Signing Experience

- The provider will see a pop-up that gives the option to **Download** or **Print** the completed documents.
- The provider should click **Close** to exit.
- A completed copy of the documents will appear.
- The provider should click **Continue** and will be redirected to their Organization TIN Dashboard.

Once You Have Signed the forms, Be Sure To make A Copy!



QUESTIONS?

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How long does this take?

They are working “as fast as they can...”

You will eventually get an email stating the money is coming-
and when it comes you will have to sign back into the portal to
attest you got it – and intend to follow the rules!

