

CARES ACT PROVIDER RELIEF FUND

Attention all healthcare providers in Puerto Rico
Access to Federal Cares Act Healthcare Relief Funds
Funds are still available!

- ✓ There are at least 6,000 providers in Puerto Rico that can apply for money, and only around 72 providers have applied for the 2nd tranche of the available funds.
- ✓ Simply follow the instructions and submit your 2018 data related to your total income.
- ✓ This should be done as soon as possible at: <https://www.hhs.gov/providerrelief>.

On March 27, 2020, the U.S. Congress passed the **CARES Act**, a federal law that includes **\$100 billion** for the U.S. Department of Health and Human Services (HHS) to distribute to all healthcare providers, including Puerto Rico, to cover new costs and loss of revenue related to the COVID-19 pandemic. The \$100 billion has been allocated as follows:

First Tranche (Already Disbursed)

1. HHS gave **\$30 billion** to Medicare-enrolled providers, and allocated based on Traditional Medicare or Fee-for-service (FFS) Medicare billing in 2019.
2. Around 6,079 providers or healthcare systems in Puerto Rico received \$41,889,822.

Second Disbursement Tranche (In Progress)

3. **Additional \$20 billion for all Medicare-enrolled providers.** This amount is allocated based on 2018 net income per patient from all health programs, including Medicare Advantage, commercial plans and Medicaid. HHS is aware that the first tranche based on FFS did not help providers that predominantly bill Medicare Advantage, commercial plans and Medicaid. Providers must have submitted only one bill to traditional Medicare in 2019 to be eligible, and we already know that around 6,000 providers in Puerto Rico are in this group.
 - Starting April 24, a portion of providers will automatically receive an advance payment based on income data submitted in the Centers for Medicare and Medicaid Services (CMS) cost reports.
 - **Providers without cost reporting data in CMS's files will need to submit their income information to the website that opened this week: <https://www.hhs.gov/providerrelief> to obtain additional general distribution funds.**
 - Those who receive funds automatically will also need to submit their income information through the website. Payments will go out weekly and continuously as the information is validated.

- Providers must sign an attestation confirming they received the funds, accepting the terms and conditions, and confirming the CMS cost report.
- 4. **\$10 billion** is for hospitals in high impact areas that have been particularly **affected** by the COVID-19 outbreak.
- 5. **\$10 billion** goes to **rural health clinics and hospitals**, allocated starting the week of April 27.
- 6. **\$400 billion** goes to **indigenous healthcare facilities**, distributed according to operational expenses.

Third Disbursement Tranche (Pending)

7. **A portion of the remaining \$29.5 billion** is for reimbursing healthcare providers, based on Medicare fees, for COVID-19-related treatment **of uninsured citizens** since February 4, 2020. Providers can enroll in the program starting April 27, 2020, and begin filing claims in early May 2020. For more information, go to hrsa.gov/coviduninsuredclaim.
8. Another portion of the **remaining \$29.5 billion** will provide separate funding to **providers not enrolled** in Medicare, such as Skilled Nursing Facilities (SNFs), dentists and providers that exclusively accept Medicaid.

On April 23, 2020, Congress passed additional funds for the Payroll Protection Program (PPP), and the Health Care Enhancement Act (HCEA), which provides **\$75 billion** in additional relief to healthcare providers. HHS will make decisions on how to allocate this \$75 billion in the coming weeks.

Frequently Asked Questions and Answered

1. **Does the \$20 billion currently available cover costs for Medicare Advantage providers?**
Yes. The allocation is based on the net income from 2018 patients for all payers.
2. **Do I need to file a cost report?**
Yes. Follow the HHS link to submit your 2018 income data to ensure a timely payment.
3. **During the first FFS round, I received payments equivalent to 30 days of operation. How many days will we receive for this second round that includes MA – another 30, 60 or 90 days?**
The allocation is not based on a determined operational period of time. A provider will receive a share of the \$20 billion based on its proportional share of the 2018 healthcare expenses from all payers.