

## Last Chance for COVID-19 Provider Relief Funds

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The federal government has extended the deadline to September 13 for Medicare and other providers, including long-term care facilities, to apply for CARES Act provider relief funds.

This Phase 2 funding supplements the [\\$50 billion of Phase 1 funding](#) already distributed and expands the scope of providers eligible for funding.

After several application extensions, this is likely the last opportunity for providers to apply for federal COVID-19 relief funds. Those eligible to apply include Medicare, Medicaid, CHIP and dental providers who missed out on Phase 1 funding. Eligibility also extends to assisted living facilities that did not bill the Medicare or Medicaid programs. The U.S. Department of Health and Human Services (DHHS) has worked cooperatively with states and other third parties to develop a list of these eligible facilities.

Eligible providers can apply for Phase 2 funding of up to 2% of their annual "patient care" revenues (less funding already received). As broadly defined, patient care includes "health care, services and support in a medical setting, at home, or in the community." Still, this definition leaves some ambiguity and requires facilities to exercise some reasonableness and self-restraint.

At the same time, facilities may only use provider relief funds for "health care related expenses or lost revenues that are attributable to coronavirus." Facilities must certify that they will not use the funds to reimburse expenses or losses that have been reimbursed from other sources.

While Pennsylvania facilities initially struggled in combatting COVID-19 with limited emergency funding, many now report being flush with funding from various federal and state relief programs. They now face the complicated task of reconciling and allocating this funding to their COVID-19 expenses, and then reporting to DHHS concerning proper use of this funding. This reconciliation process will begin October 1, and facilities that accepted payments exceeding \$10,000 from the Provider Relief Fund must complete their reporting [within 45 days after the calendar year](#).

With these caveats in mind, those facilities still eligible for Phase 2 funding should apply through the [Provider Relief Fund Application and Attestation Portal](#). All applicants who apply by 11:59 p.m. Sunday will be considered for funding.

If you have any questions about this latest round of funding or how to apply, please [contact me](#) or any member of the [Barley Snyder Senior Living Industry Group](#) or [Health Care Industry Group](#).

**WRITTEN BY:**

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**Christopher J. Churchill**

Partner

Tel: (717) 399-1571

Email: [cchurchill@barley.com](mailto:cchurchill@barley.com)