

HHS Provider Relief Funds Update

Where are we now?

Learning objectives

- ▲ Learn about recent updates to provider relief reporting, including clarifying guidance, future reporting requirements and reporting portal guidance

Key Dates for PRF Reporting

| | Payment Received Period | Period of Availability | Reporting Time Period |
|-----------------|-----------------------------|-----------------------------|----------------------------|
| Period 1 | APR 10, 2020 – JUN 30, 2020 | JAN 1, 2020 – June 30, 2021 | JUL 1, 2021 – SEP 30, 2021 |
| Period 2 | JUL 1, 2020 – DEC 31, 2020 | JAN 1, 2020 – DEC 31, 2021 | JAN 1, 2022 – MAR 31, 2022 |
| Period 3 | JAN 1, 2021 – JUN 30, 2021 | JAN 1, 2020 – JUN 30, 2022 | JUL 1, 2022 – SEP 30, 2022 |
| Period 4 | JUL 1, 2021 – DEC 31, 2021 | JAN 1, 2020 – DEC 31, 2022 | JAN 1, 2023 – MAR 31, 2023 |



HHS PRF Noteworthy New FAQs

From p. 22 of 4/6/2022 HHS FAQs

Use of Funds

If a provider received Provider Relief Fund payments and ARP Rural payments, can they use these payments for the same eligible expenses or lost revenues? (Modified 4/6/2022)

No. Provider Relief Fund payments and ARP Rural payments must be used for different expenses or lost revenues attributable to coronavirus or COVID-19. A provider may not use an ARP Rural payment to cover eligible health care expenses or lost revenues attributable to coronavirus or COVID-19 if the provider has already reported that their Provider Relief Fund payment(s) have covered the eligible expense or lost revenues. If a provider receives both types of payments, the provider should apply their ARP Rural payment towards eligible health care expenses and lost revenues attributable to COVID-19 before utilizing Provider Relief Fund payments to cover eligible health care expenses or lost revenues attributable to coronavirus. One way to ensure funds are not used for the same expenses or lost revenues attributable to coronavirus or COVID-19 may be to use them for different time periods.



HHS PRF Noteworthy New FAQs

From p. 37 of 4/6/2022 HHS FAQs

Extensions

What if a Reporting Entity missed the reporting deadline and subsequently returned funds, as requested by HRSA, but would now like to receive the funds and report on the use of funds due to extenuating circumstances? (Added 4/6/2022)

HRSA will not reissue funds to those Reporting Entities that did not comply with the Terms and Conditions and subsequently returned funds to the government.



HHS PRF Noteworthy New FAQs

From p. 38 of 4/6/2022 HHS FAQs

Are providers able to request extensions on submissions of their required reports for any of the required reporting periods? (Modified 4/6/2022)

Generally, no. Providers that received one or more payments exceeding \$10,000, in the aggregate, during a Payment Received Period are required to report by the stated deadline for each applicable Reporting Time Period. However, HRSA will provide an opportunity based on extenuating circumstances for Reporting Entities to complete reports and come into compliance in order to retain the funds received during the applicable Payment Received Period. Extenuating circumstances may include, but are not limited to, natural disasters, death or serious illness of the individual(s) responsible for reporting, or not receiving HRSA reporting notifications. This opportunity will be available for all reporting periods. Providers should monitor their email and the PRF webpage for additional information on the process for late report submissions due to extenuating circumstances at <https://www.hrsa.gov/provider-relief>. Reporting entities must follow the process to request the opportunity. HRSA will review the requests for late report submissions due to an extenuating circumstance. If the late submission is approved, the provider must complete the report within the HRSA communicated timeframe.

Providers who are granted additional reporting time due to an extenuating circumstance and do not submit as instructed will be considered out of compliance with program Terms and Conditions. Providers that are out of compliance with the Terms and Conditions must return Provider Relief Fund payments associated with the missed Reporting Time Period.



Polling question

How many Portal reporting phases remain?





What We've Observed for Audit Issues

- ▲ Have a second (or third) set of eyes review what had been input before submitting in the Portal
- ▲ If the Portal contact leaves, make sure that HHS is notified so that any future correspondence reaches the organization and is acted upon
- ▲ Follow the instructions and information provided by HHS, as examples:
 - Calendar year vs fiscal year
 - What to include in net patient service revenue
- ▲ Have sufficient expenditure back-up on file to tell the story when audited down the road

HHS PRF Portal Tidbits

1

Have the HHS Workbook completed beforehand as Portal work sessions timeout after 15 minutes of inactivity

2

Use Portal buttons to navigate rather than web browser navigation buttons

3

Make sure using most recent version of compatible web browser

4

All cells are required data entry fields; enter zero (0) value otherwise

5

Data entry is now cumulative





HHS PRF Allowable Expenditure Brainstorm Session

Questions?

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