

Healthcare Law Alert: Medicare Providers Get Second Chance to Apply for Provider Relief Fund Grant

August 17, 2020

Certain Medicare providers now have another opportunity to apply for the Health & Human Services (HHS) Provider Relief Fund payments, the financial relief offered under the CARES Act to healthcare providers impacted by COVID-19. Eligible providers, as detailed further below, include those who experienced a change in ownership, making them previously ineligible for the initial phase of funding, as well as providers who rejected and returned the initial round of funds and now wish to reapply. In addition, eligible providers include those who missed the June 3, 2020 deadline to apply for additional funding, equal to 2 percent of their total patient care revenue, from the first phase of Provider Relief Fund payments under the General Distribution. This included many Medicaid, Children's Health Insurance Program (CHIP), and dental providers with low Medicare revenues.

The following eligible providers may now submit their application for possible funds [on the online Portal](#) by **August 28, 2020**:

- Providers who were ineligible for the Phase 1 General Distribution because:
 - They underwent a change in ownership in calendar year 2019 or 2020 under Medicare Part A; and
 - Did not have Medicare Fee-For-Service revenue in 2019.
- Providers who received a payment under Phase 1 of the General Distribution but:
 - Missed the June 3 deadline to submit revenue information – including many Medicaid, CHIP, and dental providers with low Medicare revenues that assumed they were ineligible for additional distribution targeted at Medicare providers or had planned to apply for a Medicaid and CHIP specific distribution; or
 - Did not receive Phase 1 General Distribution payments totaling approximately 2 percent of their annual patient revenue.
- Providers who previously received Phase 1 General Distribution payment(s), but rejected and returned the funds and are now interested in reapplying.

The aggregate funding for any provider will only be up to 2 percent of the provider's reported total revenue from patient care. For providers who have already received and retained a General Distribution payment from HHS, the previous amount received and kept will be taken into account when determining any eligible amount for this Phase 2 of the General Distribution payment. All payment recipients must accept the HHS Terms and Conditions.

If you have any questions about this alert or any other Healthcare Law issue, please contact:

John D. Fanburg, Managing Member and Chair, [Healthcare Law](#), at 973-403-3107 or jfanburg@bracheichler.com

Carol Grelecki, Member, [Healthcare Law](#), at 973-403-3140 or cgrelecki@bracheichler.com

Joseph M. Gorrell, Member, [Healthcare Law](#), at 973-403-3112 or jgorrell@bracheichler.com

Susan E. Frankel, Associate, [Healthcare Law](#), at 973-364-5209 or sfrankel@bracheichler.com