

Provider Relief Fund Overview

	General Distributions			Targeted Distributions	
	Phase 1	Phase 2	Phase 3	SNF	Nursing Home Infection Control
Eligible Providers	Medicare providers	Medicaid, CHIP, Assisted Living(AL), Dentists, private pay AL and nursing homes (NH), Phase 1 providers who did not receive a full 2% of annual patient care revenue payment, and Medicare Part A providers who experienced a change in ownership in 2020.	All Phase 2 eligible providers plus behavioral health and providers who began operating in First Quarter 2020.	All Medicare and Medicaid certified/licensed nursing homes with 6 or more beds.	All Medicare and Medicaid certified/licensed nursing homes with 6 or more beds.
Allocation	\$30Billion + \$20B	\$18B	\$20B	\$4.9B	\$5B
Formula	2% of gross patient care revenues for the TIN (originally, used Medicare cost report data, later switched to tax information)	2% of gross patient care revenues for the TIN	2% of gross patient care revenues for the TIN; possible add-on payment	\$50,000 + \$2500 per bed	\$2.5B distributed using the formula = \$10,000 + \$1450 per bed Additional \$2B distributed through monthly incentive payments based upon infection control measure performance
Application timeframe	Automatic payments sent. No application required; financial data was due to HHS by June 3.	Opened June 9, expanded to include private pay AL and NH on Sept. 1. Closed Sept. 14 for most, Sept. 21 for private pay AL and NH	Oct. 5 – Nov. 6	No application, automatically distributed	No application, automatically distributed.

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Distribution Timeline	<p>April 10, April 24 payments.</p> <p>Some received “true up” payments as late as June/July after filing tax and lost revenue information</p>	June – Oct. 2020	Nov. – Dec. 2020	May 22	<p>Aug. 27 for first \$2.5B.</p> <p>Up to \$400M per Monthly Incentive payments: Oct, Nov. , Dec. of 2020 and Jan. 2021.</p> <p>Up to \$400M in a single aggregate incentive payment: Feb. 2021.</p>
Notes					<p>Terms & Conditions limit the use of these funds to “infection control” expenses including testing costs and test results reporting, hiring and retaining staff, expenses to improve infection control, additional services for residents.</p>