

Healthcare Law Alert: HHS Releases Reporting Requirement Details for Provider Relief Fund Recipients

10/6/2020

Healthcare providers who received a Provider Relief Fund general and/or targeted distribution exceeding \$10,000 in the aggregate are required to report to the Department of Health and Human Services (HHS) on their use of the funds, as per the Terms and Conditions to which providers attested. HHS has released details of those reporting requirements. If providers do not fully expend their Provider Relief Fund payments by the end of calendar year 2020, they will have until June 30, 2021 to use remaining amounts.

The key reporting dates and actions are as follows:

- January 15, 2021: Reporting portal opens for providers
- February 15, 2021: First reporting deadline for all providers on use of Provider Relief Funds through December 31, 2020
- July 31, 2021: Final reporting deadline for providers who did not fully expend their Provider Relief Funds prior to December 31, 2020

As required by the Terms and Conditions, the Provider Relief Funds may only be used for the following purposes:

- Healthcare-related expenses attributable to coronavirus that another source has not reimbursed and is not obligated to reimburse, which may include general and administrative expenses or healthcare-related operating expenses. These include, but are not limited to, expenses attributable to coronavirus that were incurred in treating confirmed or suspected cases of coronavirus, preparing for possible or actual coronavirus cases, and maintaining healthcare delivery capacity. These are expenses that are incurred over and above what other sources have reimbursed, such as payments received from insurance and/or patients, and amounts received from federal, state, or local governments.
- Provider Relief Fund payments that are not fully expended on healthcare-related expenses attributable to coronavirus may then be applied to lost revenues, represented by a change in net patient care operating income between 2019 and 2020 (revenue less expenses).

Based on these permissible uses of the funds, providers must report the following data:

For expenses attributable to coronavirus:

- General and administrative (G&A) expenses, which include, but are not limited to, mortgage or rent obligations, insurance premiums, personnel, fringe benefits, equipment or software lease payments, utilities, legal fees, and accounting and consulting services.
- Healthcare-related expenses, which include, but are not limited to, supplies, such as PPE, patient screening supplies, and hand sanitizer; equipment, such as ventilators and HVAC upgrades; information technology, such as electronic health record licenses, telehealth infrastructure, increased bandwidth, and teleworking to support remote employees; and facility-related costs, such as the lease or purchase of temporary or permanent structures, or to modify facilities to accommodate patient treatment practices revised due to coronavirus.

For recipients of over \$500,000 in aggregate Provider Relief Fund payments, providers must provide a further detailed expense breakdown.

For lost revenues:

- Total revenue/net charges (net of uncollectible revenue) from patient care
- Revenue by patient care payor mix

Other financial assistance:

Providers must report financial assistance received from other sources, including the following:

- Paycheck Protection Program
- FEMA CARES Act
- CARES Act Testing
- Local/State/Tribal Government assistance
- Business insurance
- Other assistance

Non-financial information:

Providers must report the following non-financial information:

- Employees (i.e., total re-hires)
- Patients (i.e., visits, admissions)
- Facility information (i.e., staffed beds)

Change in ownership

Reporting entities that acquired or divested subsidiaries must report information regarding the change in ownership, including whether the related TIN was acquired or divested, the date of acquisition/divestiture, the TIN(s) included in the acquisition/divestiture, and the percent of ownership for the acquisition/divestiture.

Further information regarding the Provider Relief Fund reporting requirements can be found below:

[Reporting Requirements and Auditing](#) and [Post-Payment Notice of Reporting Requirements](#).

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

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