

CARES Act Provider Relief Fund: Medicaid, CHIP and Dental Providers Distribution

Overview

The Department of Health and Human Services (HHS) extended the deadline for [CARES Act Medicaid provider distribution](#) to **August 3**. There's a lot of information to understand about the program and application portal, and the TIN validation takes some time. However, if you submit your TIN before the deadline but don't receive validation until after the deadline, you will still be able to submit your application.

To learn about the program and application process:

- [Review the Medicaid and CHIP Distribution FAQs](#) for information about eligibility, payment processing, and using the portal
- [Read the Medicaid and CHIP Provider Distribution Fact Sheet](#)
- [Watch a recording](#): Register/log in to watch a previous webinar session

Before you apply:

1. [Read the Medicaid Provider Distribution Instructions](#)
2. [Download the Medicaid Provider Distribution Application Form](#)
3. [Read the Terms and Conditions](#)

The [application form](#) corresponds with the information you will provide in the [online application portal](#), helping you prepare the materials you'll need.

Program Eligibility

The language about this funding is centered around medical providers, which makes it a bit confusing, but **most IDD service providers are eligible**. Below is a summary of eligibility clarification available in the [Provider Relief Fund General Information](#) and [Medicaid, CHIP, and Dental Providers Distribution](#) FAQs.

- HHS presumes that all Medicaid providers have been impacted by the pandemic and all clients are potentially COVID-19 patients. Thus, if you are a Medicaid provider, you are eligible for COVID-19 relief funding.
- A "Medicaid provider" is defined as a provider whose services are funded by Medicaid. **If you bill the state (via Regional Center) for services reimbursed by Medicaid, including under waivers, you are eligible.**
- DDS submitted to HHS a list of tax identification numbers (TINs) for all their Medicaid providers. From the HHS perspective, the measure of eligibility as a Medicaid provider is whether your TIN is on that list.
- The quickest way to find out if your TIN is on that list is to [begin your application through the Portal](#). The Portal will not let you proceed from the page where you enter your TIN if it was not on their list.



A lot of IDD providers seem to be hung up on the program criteria highlighted below. **Don't be.** HHS considers you eligible if your TIN is on the list of Medicaid providers that they received from DDS.

To be eligible to apply, the applicant must meet all of the following requirements:

- 1. must not have received payment from the \$50 billion General Distribution; and*
- 2. must have directly billed **Medicaid** or CHIP for healthcare-related services during the period of January 1, 2018, to December 31, 2019, or (ii) own (on the application date) an included subsidiary that has billed **Medicaid** or CHIP for healthcare-related services during the period of January 1, 2018, to December 31, 2019; and*
- 3. must have either (i) filed a federal income tax return for fiscal years 2017, 2018 or 2019 or (ii) be an entity exempt from the requirement to file a federal income tax return and have no beneficial owner that is required to file a federal income tax return. (e.g. a state-owned hospital or healthcare clinic); and*
- 4. must have provided patient care after January 31, 2020; and*
- 5. must not have permanently ceased providing patient care directly, or indirectly through included subsidiaries; and*
- 6. if the applicant is an individual, have gross receipts or sales from providing patient care reported on Form 1040, Schedule C, Line 1, excluding income reported on a W-2 as a (statutory) employee.*

Additional Information and Application Tips

- Your relief allocation is at least 2% of your revenue for services in the year you chose to provide; this could be 2017, 2018, or 2019.
- You are still eligible for this fund even if you received a PPP loan or State of Emergency (SOE) billing for absences.
- If you received any CARES Act funds as a Medicare provider, you are ineligible to receive these funds under that same tax identification number (TIN).
- You can't use federal funds such as the PPP loan for the same expense twice.
- Take screenshots of every page throughout the application process, so you have record of what you were asked and what you agreed to at the time you applied.
- Track all your COVID-19 expenses in one place in case you need to show them.
- Frequently check the website for new terms and conditions.

