Coronavirus Relief Fund (CRF)

Provider Relief Program



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Information & Frequently Asked Questions



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Funding Information

Funds were awarded to the State of Ohio as Federal Financial Assistance from the U.S. Department of Treasury. Funds were awarded under the Social Security Act, as amended by section 5001 of the Coronavirus Aid, Relief, and Economic Security Act ("CARES Act") as the Coronavirus Relief Fund (CRF). The State of Ohio is distributing a portion of these funds to providers as relief to assist with the impacts from the COVID-19 pandemic.

The funding is being disbursed based on calculations of determined need as assessed by the state of Ohio. Payments will be made to critical providers who have experienced business interruptions and increased costs as a result of the COVID-19 pandemic. Provider relief funds can be used to continue to provide services and to address costs related to business interruption and increased costs resulting from the COVID-19 health emergency. The Ohio Department of Medicaid (MCD), the Ohio Department of Aging, Ohio Department of Developmental Disabilities, and Ohio Department of Mental Health and Addiction Services, worked collaboratively and prepared funding allocations to provide critically-needed economic support to several provider types including: Skilled Nursing Facilities; Private Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs/IID); MyCare Waiver Providers; Ohio Home Care Waiver Providers (OHCW); PASSPORT Waiver Providers; Home Health Waiver Providers; Assisted Living Providers; Critical Access, Rural and Distressed Hospitals; and Behavioral Health Providers. These funds will be distributed through OBM and not through any existing state health and human service agency line item. While recognizing the importance of all health care and community support services, these funds will be distributed to providers that are more heavily relied upon for essential services through the Medicaid program. Provider relief payments will be made by OBM to providers upon completion of registration and certification online through OBM's Ohio Grants Partnership website.

Federal Assistance Information

Funds are considered federal financial assistance and have been assigned a Catalog of Federal Domestic Assistance (CFDA) or Assistance Listing Number of 21.019. Fund payments are considered to be federal financial assistance subject to the Single Audit Act (31 U.S.C. §§ 7501-7507) and the related provisions of the Uniform Guidance, 2 C.F.R. § 200.303 regarding internal controls, §§ 200.330 through 200.332 regarding subrecipient monitoring and management, and subpart F regarding audit requirements.

Covered Period

The U.S. Department of Treasury has determined that CRF funds may only cover costs *incurred* during the covered period between **March 1, 2020 and December 30, 2020**.

Responsibilities, Records, & Future Audits

The U.S. Treasury has limited compliance to the related provisions of the Uniform Guidance, 2 C.F.R. § 200.303 regarding internal controls, § 200.330 through § 200.332 regarding subrecipient monitoring and management, and subpart F regarding audit requirements.





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Effective internal controls must be established and maintained (2 C.F.R. § 200.303). Jurisdictions should maintain documentation evidencing that the funds were expended in accordance with federal, state, and local regulations.

The CRF is subject to future audits to ensure appropriate use with ultimate recoupment by Treasury. Records must be made available to OBM, the Ohio Auditor of State, Independent Public Auditors that perform audits on behalf of Ohio Auditor of State, the federal government, and/or other oversight entities for audit or review

Eligibility

The following is a brief description of each of the methodologies used to distribute CRF Provider Relief Payments. The methodology and data are not subject to review or appeal.

Behavioral Health Provider Distribution Methodology

Provider payments will be distributed as follows:

- The majority of the relief funding will be directed to providers who are experiencing financial distress as demonstrated by a significant reduction in Medicaid payments in recent months compared to prior period payments. Provider payment amounts will be allocated based on each provider's portion of the aggregate payment deficit using available funds. These payments will be capped at \$750,000 per provider agency.
- A smaller portion of the funding will be allocated equally across community behavioral health providers to help offset expenses related to the pandemic response (such as PPE).

Rural and Distressed Hospital Provider Distribution Methodology

• Relief payments are being made available to Rural Access Hospitals, Critical Access Hospitals, and distressed hospitals by estimating a normal three months revenue based on historical claims data.

Long Term Care Provider Distribution Methodology

Infection Control Incentive Payment:

 The Skilled Nursing Infection Control Incentive Payment is available to nursing homes that demonstrated a strong focus on infection control as evidenced by their performance on

their initial focused infection control survey. Qualifying skilled nursing facilities in Ohio will receive \$17.27 per April Medicaid Day.

Home Health:

• All Medicaid providers of home health services, private duty nursing, RN assessment and RN consultation services who have billed for services in the last 9 months are

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eligible for COVID Relief money. Approximately \$13.5 million will be allocated among qualifying Medicaid providers on the basis of 2019 or 2020 Medicaid revenue.

Assisted Living:

- Distribution of provider relief funds is not limited to Medicaid providers of the assisted living service. All licensed residential care facilities (RCF) with an active ODH license as of July 2020 are eligible. The total number of licensed RCF is 765.
- The amount of funding received by each RCF is based on the total number of licensed beds at the facility. The total number of licensed beds is 64,585.
- The funds were allocated based on the total number of licensed residential care facility beds at each facility.

Nursing Facilities:

- As of 06/30/20, there are a total of 930 active Medicaid nursing facility providers statewide.
- To calculate the distributions, the per diem nursing facility rates as of 6/30/20 were multiplied by a percentage sufficient to distribute all funds across eligible nursing facilities.
- Nursing Facility Medicaid Days from the Calendar Year 2019 cost reports were utilized.
- For those nursing facilities without CY 2019 cost reports, days were imputed based on licensed beds adjusted for occupancy and Medicaid utilization.
- Distributions are available for the owner of record of a nursing facility on June 30, 2020.

ICFIIDs

- As of 07/01/2020, active private ICFIID providers statewide totaled 419 ICFIID facilities.
- To calculate the distributions, the per diem facility rates at 7/1/2019 were multiplied by a percentage sufficient to distribute all funds across eligible ICFIIDs.
- ICFIID Medicaid Days from ICFIIDs with full year 2019 cost reports were utilized.
- For those ICFIIDs without a full year 2019 cost report, days were imputed based on 2020 MITS days adjusted by the number of months the ICFIIS operated for the year.
- Distributions are available for the payor of record for an ICFIID on June 30, 2020.

PASSPORT and Ohio Home Care Waiver:

- All active Medicaid providers of PASSPORT services are eligible for COVID Provider Relief Funds.
- Approximately \$13.2 million will be allocated among qualifying Medicaid providers on the basis of 2019 or 2020 Medicaid revenue.





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Frequently Asked Questions

How can providers spend the funds?

The state of Ohio has determined that these payments are necessary to respond to the impact of the COVID-19 health emergency on our state's critical systems of care providers. The funding is being disbursed based on calculations of determined need as assessed by the state of Ohio. Payments will be made to critical providers who have experienced business interruptions and increased costs as a result of the COVID-19 pandemic. Provider relief funds can be used to continue to provide services and to address costs related to business interruption and increased costs resulting from the COVID-19 health emergency. Individual providers can determine how to best spend the funding depending on your individual situation with respect to client needs and the impact of COVID-19.

Will funds be disbursed directly to eligible providers or is there a registration process?

Eligible providers must complete a registration and certification online at <u>https://grants.ohio.gov/fundingopportunities.aspx</u>. Providers should locate the funding opportunity **CARES Act – Coronavirus Relief Fund Provider Relief Payments** and click the hyperlink. The form will pop-up to be completed (ensure your pop-up blocker is disabled in your settings) and once complete, please click the register button at the bottom.

What information is required to register?

To register for this economic support relief payment, a Provider must have a valid Medicaid Provider Number or for non-Medicaid Assisted Living Facilities an Ohio Department of Health License Number, National Provider Identification Number, and Tax Identification Number. For providers that have a DUNS (Dun and Bradstreet) number, then that will be required to be entered as well. Those providers that do not have a DUNS should enter "0" in the field to ensure completion of the registration. Registrations will be approved, and payments made based on information provided from the Ohio Office of Medicaid in coordination with the Ohio Department of Aging, Ohio Department of Developmental Disabilities, and Ohio Department of Mental Health and Addiction Services.

What payment method will funds be distributed?

Eligible providers with an approved application will be paid based on information within the State of Ohio's accounting system. Providers that have established an electronic funds transfer (EFT) with the State of Ohio will receive funds in that manner, all others will be distributed via check. Those that have a State of Ohio supplier account should use the look-up feature during registration to ensure the accounting system information is linked to the registration. Providers do not have to be in the State of Ohio's accounting system in order to receive payment.





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Will reporting be required?

Providers must continue all currently required reporting to state agencies and to the federal government and must maintain documentation of costs related to COVID-19 business interruptions and unanticipated costs incurred due to the COVID-19 public health emergency. The U.S. Department of Treasury is finalizing reporting requirements and providers will be notified if specific reporting becomes necessary.

How long should providers retain records relating to the CRF and supporting expenditures?

Records shall be maintained for a period of five (5) years.

What types of records should be retained?

Recipients of Coronavirus Relief Fund payments shall maintain and make available upon request all documents and financial records sufficient to establish compliance with subsection 601(d) of the Social Security Act, as amended, (42 U.S.C. 801(d)).

Are these economic relief payments subject to tax?

The State will be issuing a 1099 because reporting circumstances may vary depending on your organization type and specific laws and rules. Payment recipients should consult with an accounting professional for guidance related to tax reporting and payment.

Who do I contact with questions?

The Ohio Grants Partnership and the Office of Medicaid are available to answer any questions or concerns that you may have via e-mail at <u>mailto:CRFprovider@obm.ohio.gov</u>.

