



PRF Reporting Technical Assistance Session

'Last Chance' Q&A

March 22, 2022

Provider Relief Bureau (PRB)

Vision: Healthy Communities, Healthy People



Speakers

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Agenda

- Important Dates and Details
- Q&A
 - General
 - NHIC
 - Allowable Expenses and Use of Funds
 - Data and Documentation
 - Lost Revenues
 - Reporting Compliance



Reporting Period 2 (RP2) Dates and Details

1. Reporting Period 2 ends on March 31, 2022 at 11:59pm ET
2. Providers are required to report on the use of funds during RP2 if you received and retained one or more payments exceeding \$10,000 in total from July 1, 2020 to December 31, 2020 (Payment Received Period 2)
3. All expenses must have been incurred by December 31, 2021.
4. Unused funds must be returned to HRSA within 30 calendar days after the end of the applicable reporting period
5. Providers who do not submit a completed report are deemed out of compliance and will be required to return all funds to HRSA that were not reported on during the reporting period.



General Reporting

- [PRF Reporting and Auditing Webpage](#)
- [PRF Reporting Resources Webpage](#)
- [PRF Reporting Resource Guide](#)
- [Reporting Frequently Asked Questions](#)
- [What's New In RP2 Fact Sheet](#)
- [June 11 Notice of Reporting Requirements](#)
- **Previously recorded RP2 technical assistance webcasts:**
 - [Reporting Introduction: New Reporting Entities](#) (January 12, 2022)
 - [Reporting Period 2 Introduction: Returning Reporters](#) (January 13, 2022)



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Nursing Home Infection Control

- [Nursing Home Infection Control Reporting Webcast \(February 17, 2022\)](#)
- [Nursing Home Infection Control Webpage](#)

PRF Home Current Payments Reporting Distribution Data Past Payments

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Nursing Home Infection Control Distribution

HRSA recently hosted a Technical Assistance Session for providers required to report on Nursing Home Infection Control Distribution Payments.

- [Replay the Webcast](#) (February 17, 2022)
- [Download the slides](#) (PDF - 1.13 MB)

What is the Nursing Home Infection Control payment?

The Nursing Home Infection Control (NHIC) payment is a component of a Provider Relief Fund (PRF) Targeted Distribution (formally known as the [Skilled Nursing Facility and Nursing Home Infection Control Distribution](#)) awarded to skilled nursing facilities and nursing homes nationwide to help combat the devastating effects of this pandemic.

In addition to direct payments to providers, this Distribution included an incentive payment

Reporting Requirements and Auditing

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Allowable Expenses and Use of Funds

- [Allowable Expenses Webpage](#)
- [Allowable Expenses Fact Sheet](#)
- [Primary Care Providers Allowable Expenses Fact Sheet](#)
- [Personnel Recruitment and Retention Fact Sheet](#)
- [Use of Funds FAQs](#)



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Ownership Changes

- [Ownership Changes Fact Sheet](#)
- [PRF Parent Subsidiary Reporting Fact Sheet](#)



Provider Relief Fund

Ownership Changes Fact Sheet¹



The updated Terms and Conditions for Phase 4 and ARP Rural payments requires recipients to notify HHS of a merger with, or acquisition of, any other health care provider during the Payment Received Period within the Reporting Time Period. HRSA considers all of the ownership changes described below to be reportable events.

Providers may, but are not required to, apply the definitions found in this guidance for reporting on PRF distributions in any reporting period. Only providers required to report on Phase 4 and ARP Rural payments will be required to apply this guidance when reporting on funds.

Ownership Changes Reporting Guidance

For purposes of the PRF, a **Change of Ownership (CHOW)** typically occurs when a selling provider has been purchased (or leased) by another organization. The CHOW results in the **transfer of the seller's Tax Identification Number (TIN)** to the purchaser or lessee.

- If the **purchaser (or lessee)** elects **not to accept** a transfer of the TIN, then its use of any of the seller's unused PRF funds is **not permitted**, and the purchaser or lessee must apply as a new applicant for future PRF funds.

An **acquisition/merger** occurs when a provider is purchasing or has been purchased by another provider, and **only the purchaser's TIN remains**.

- Acquisitions/mergers are distinct from CHOWs. In the case of an acquisition/merger, two entities combine and the **seller's TIN dissolves**. The **TIN of the purchasing entity** remains intact. (In the case of a CHOW, the seller/former owner's TIN typically remains intact and is transferred to the new owner.)

A **consolidation** occurs when **two or more providers** consolidate to **form a new business entity**.

- Consolidations are distinct from acquisitions/mergers. During a consolidation, the **TINs of the consolidating entities dissolve** and a **new TIN** is assigned to the **new, consolidated entity**.

In the case of any of the above transactions, responsibility for PRF reporting lies with the **filing TIN** that **received** the funds.

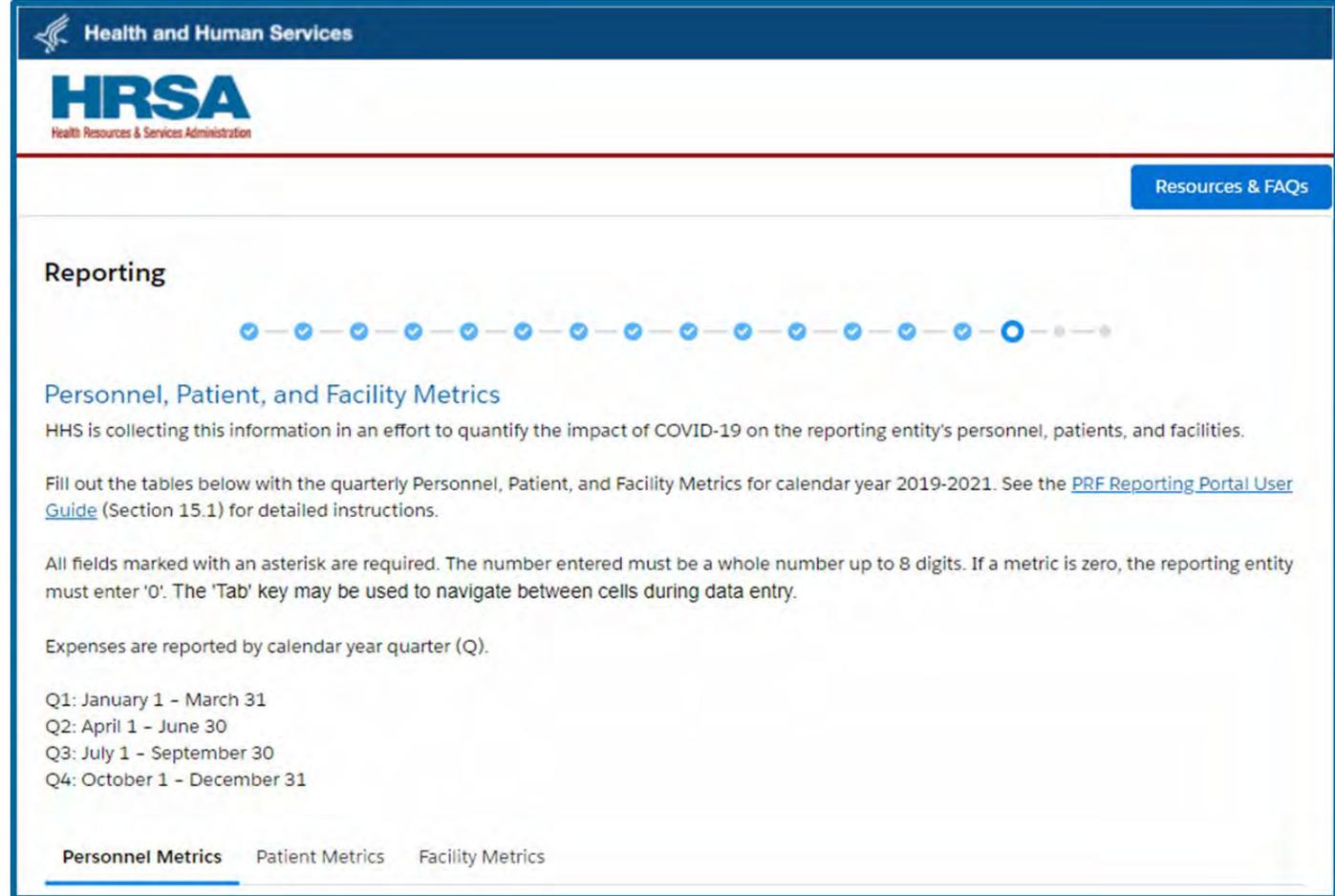
¹ While this fact sheet provides information to assist providers on reporting questions related to change in ownership, it is not intended as legal advice. For accounting questions, please consult your financial advisor or accounting professional.

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Personnel, Patient, and Facility Metrics

- 3 Tables will capture different metrics, but all data fields are required.
- If the value for a cell is zero, enter “0.”
- Values should be considered as of the quarter end date.
- Definitions are provided in the Reporting Portal User Guide and FAQs.



The screenshot displays the HRSA Reporting Portal interface. At the top, the header includes the Department of Health and Human Services logo and the HRSA logo (Health Resources & Services Administration). A navigation bar on the right contains a button for 'Resources & FAQs'. The main content area is titled 'Reporting' and features a progress indicator with 15 steps, where the 14th step is currently active. Below this, the section is titled 'Personnel, Patient, and Facility Metrics'. The text explains that HHS is collecting this information to quantify the impact of COVID-19. It instructs users to fill out tables for quarterly metrics for 2019-2021, referencing a 'PRF Reporting Portal User Guide' for details. It also notes that asterisks indicate required fields and that zero values should be entered as '0'. A note specifies that expenses are reported by calendar year quarter (Q). The quarters are listed as: Q1: January 1 - March 31; Q2: April 1 - June 30; Q3: July 1 - September 30; Q4: October 1 - December 31. At the bottom, there are three tabs: 'Personnel Metrics' (which is selected), 'Patient Metrics', and 'Facility Metrics'.



Reporting Portal, Data, and Documentation

➤ Portal Resources

- [Portal FAQs \(PDF\)](#)
- [Registration User Guide \(PDF\)](#)
- [Reporting User Guide \(PDF\)](#)
- [Portal Worksheets \(Excel\)](#)
- [PRF Financial Summary \(Excel\)](#)

➤ [Patient Metrics Fact Sheet](#)

➤ [Non Financial Data FAQs](#)

➤ [Supporting Data FAQs](#)

A complete walkthrough and demo of the PRF Reporting Portal can be found in these previously recorded webcasts:

- [New Reporting Entities | Download the slides](#) (January 12, 2022)
- [Returning Reporters | Download the slides](#) (January 13, 2022)



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Lost Revenues

➤ [Lost Revenues Guide - Reporting Period 2](#)

➤ [Lost Revenues FAQ's](#)

January 2022



Provider Relief Fund

Lost Revenues Guide - Reporting Period 2

As specified in the [PRF Post-Payment Notice of Reporting Requirements](#), June 11, 2021, Provider Relief Fund (PRF) recipients who received one or more payments exceeding \$10,000 in the aggregate during a Payment Received Period are required to report in each applicable Reporting Period.

This Guide is for information purposes as providers consider their options to account for lost revenues in the reporting process. When reporting lost revenues, providers do not need to account for a specific expense to "use" funding by the deadline. Instead, they need to be able to document that the loss occurred during the relevant time period. As explained in more detail below, providers have three options for accounting for lost revenues. This Guide aims to convey the flexibility and range of options for documenting lost revenues. It is not intended as legal advice. Please reference the [PRF Reporting webpage](#) and [reporting-specific Frequently Asked Questions](#) for more reporting information.

Lost Revenues Reimbursement

PRF payment amounts (excluding Nursing Home Infection Control Distribution payments) may be applied to patient care lost revenues. "Patient care" means health care, services and supports, as provided in a medical setting, at home/telehealth, or in the community.

The following list shows items **not** considered patient care - including (but not limited to):

- Insurance
- Non-Patient Care Dining Services
- Fundraising Events
- Prescription sales revenues
- Grants or tuition
- Amounts of charity care adjustments
- Baddebt
- Retail, auxiliary, or parking services
- Real estate revenues (exception for nursing and assisted living facilities' real estate revenues where resident fees are allowable)
- Amounts of contractual adjustments from all third party payers
- Any gains and/or losses on investments

Documentation requirements for lost revenues calculations are defined within the *Data Elements* section in the [Reporting Requirements Notice](#) and summarized below:

Lost Revenues Options	Option i	Option ii	Option iii
<i>Definition of Option</i>	<i>difference between actual patient care revenues</i>	<i>difference between budgeted and actual patient care revenues</i>	<i>any reasonable method of estimating revenues</i>
PRF Reporting Portal option	2019 Actual Revenue	Budgeted Revenue	Alternate Reasonable Methodology
Base period for calculation	2019	2020 and 2021	Not prescribed*
Calculation method	Actuals vs. Actuals	Budget vs. Actuals	Not prescribed *
Frequency of Calculation	Quarterly	Quarterly	Quarterly
Duration of lost revenues period	Each quarter during the period of availability	Each quarter during the period of availability	Each quarter during the period of availability in which lost revenues were determined
Service lines to include in revenues	All patient care services	All patient care services	All patient care services (as appropriate for methodology)
Budget approval date	Not applicable	Before March 27, 2020	Not prescribed *

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Reporting Compliance and Returning Funds

- [Reporting Non-Compliance Fact Sheet](#)
- [Returning Funds Webpage \(NEW\)](#)
- [Returning Funds Fact Sheet](#)

PRF Home Current Payments **Reporting** Distribution Data Past Payments

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Returning Funds

Who Must Return Funds?

Recipients of Provider Relief Fund (PRF) payments, under several circumstances, are required to return funds to the Health Resources and Services Administration (HRSA).

1. Providers who **rejected a payment** in the [PRF Application and Attestation Portal](#).
2. Providers with **remaining unused funds** that cannot be expended on allowable expenses or lost revenues attributable to coronavirus by the applicable deadline to use funds for each reporting period.
3. Providers who **failed to submit a required report** must return all funds that were not reported on during a specific reporting period.

Timeframe to Return

Funds must be returned within:

1. **15 calendar days** of rejecting a PRF payment in the Application and Attestation Portal; or
2. **30 calendar days** after the end of the applicable Reporting Time Period or applicable grace period, as explained in the [Frequently Asked Questions](#).

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