

Introduction to the PRF Reporting Portal: Provider Webcast

July 8, 2021

Provider Relief Fund (PRF) HRSA Office of Provider Support

Vision: Healthy Communities, Healthy People



Today's Speakers

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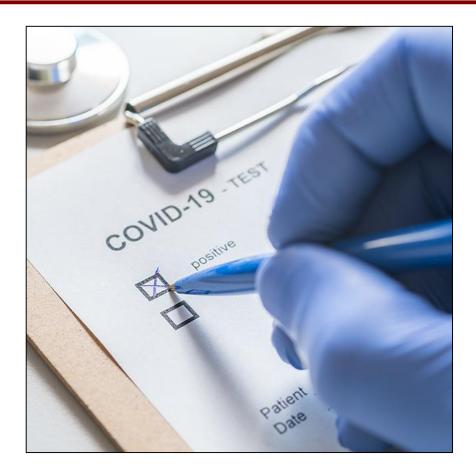
Public Health Analyst Communications Branch







- Provider Relief Fund (PRF) Background
- Reporting Requirements
- Resources
- PRF Reporting Portal Overview
- Questions & Answers







Provider Relief Fund Background

Provider Relief Fund payments may be used to reimburse recipients for health care related expenses to prevent, prepare for, and respond to coronavirus or lost revenues attributable to COVID-19.

The Coronavirus Aid, Relief and Economic Security Act (CARES

- Appropriated \$100B for a Public Health and Social Services Emergency Fund
- The funds are to remain until expended
- Signed into law March 27, 2020

Paycheck Protection Program and Health Care Enhancement Act (PPHCEA)

- Allocated an additional \$75B for the same purpose
- Signed into law April 4, 2020

Coronavirus Response and Relief Supplemental Appropriations Act (CRRSA)

- Allocated an additional \$3B for the same purpose
- Signed into law December 27, 2020





Reporting Requirements

- PRF recipients attest to Terms and Conditions, which require compliance with reporting requirements
- Reporting requirements are statutorily required for PRF payments
- 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 Time Period.
- Recipients of PRF General and Targeted Distributions (including the Nursing Home Infection Control Distribution) are required to report use of funds
- The reporting time periods apply to all past and future PRF payments and recipients not in compliance may be subject to recoupment

These reporting requirements do not apply to the Rural Health Clinic COVID-19 Testing Program or claims reimbursements from the HRSA COVID-19 Uninsured Program and the HRSA COVID-19 Coverage Assistance Fund.





Period of Availability

Reporting Period	Payment Received Period (Payments Exceeding \$10,000 in Aggregate Received)	Period of Availability	Reporting Time Period
Period 1	April 10, 2020 to June 30, 2020	January 1, 2020 to June 30, 2021	July 1, 2021 to September 30, 2021
Period 2	July 1, 2020 to December 31, 2020	January 1, 2020 to December 31, 2021	January 1, 2022 to March 31, 2022
Period 3	January 1, 2021 to June 30, 2021	January 1, 2020 to June 30, 2022	July 1, 2022 to September 30, 2022
Period 4	July 1, 2021 to December 31, 2021	January 1, 2020 to December 31, 2022	January 1, 2023 to March 31, 2023





Reporting Period	Payment Received Period (Payments Exceeding \$10,000 in Aggregate Received)	Period of Availability	Reporting Time Period
Period 1	April 10, 2020 to June 30, 2020	January 1, 2020 to June 30, 2021	July 1, 2021 to September 30, 2021
Period 2	July 1, 2020 to December 31, 2020	January 1, 2020 to December 31, 2021	January 1, 2022 to March 31, 2022
Period 3	January 1, 2021 to June 30, 2021	January 1, 2020 to June 30, 2022	July 1, 2022 to September 30, 2022
Period 4	July 1, 2021 to December 31, 2021	January 1, 2020 to December 31, 2022	January 1, 2023 to March 31, 2023





Unused PRF Payments

Reporting Period	Reporting Time Period	Deadline for Returning Unused Funds	
Period 1	July 1, 2021 to September 30, 2021	October 30, 2021	
Period 2	January 1, 2022 to March 31, 2022	April 30, 2022	
Period 3	July 1, 2022 to September 30, 2022	October 30, 2022	
Period 4	January 1, 2023 to March 31, 2023	April 30, 2023	

- Any unused funds from the period of availability must be returned within 30 days after the end of the Reporting Time Period
- The instructions for returning funds are linked within the partial returns form
- The form link is located in the reporting portal FAQs





Provider Resources

Resources

Post-Payment Notice of Reporting Requirements (June 11, 2021)

Portal Frequently Asked Questions (FAQs)

Provider Relief Fund Frequently Asked Questions (FAQs)

PRF Reporting Portal User Guide - Registration

PRF Reporting Portal User Guide - Reporting

Portal Worksheets

PRF Reporting Portal Video Demonstration & Webinar

Reporting and Auditing Webpage





Provider Resources

Resources:

PRF Resources and Key Links

Reporting and Auditing Requirements Frequently Asked Questions (FAQs) Terms and Conditions General Information

PRF Reporting Portal Resources

Portal FAQs Registration User Guide Reporting User Guide Portal Worksheets





HRSA Health Resources & Services Administration

PRF Reporting Portal Overview



Entity Overview

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HRSA Health Resources & Services Administration	
	Resources & FAQs
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	ceed to the next page. Clicking the "Next' button will save any data at any time, please click the 'Save & Exit' button. Any data you change will
Entity Overview	
* Tax ID Number (TIN) 🚯	
123451234	
* Business Name (as it appears on Form W-9) 🕕	
Prepopulated	
Doing Business As (DBA) Name 🔹	
* Provider Type	
Select from the list of provider types that best describes your r	

and the services is a

Handy Tips and Helpful Hints

- Update your contact information on this page
- The TIN may not be changed and should be the TIN of the Reporting Entity.
- If multiple Provider Types or Provider Sub-Types apply, choose the pair that reflects the majority of the business



Subsidiary Questionnaire

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Subsidiary Questionnaire
To determine whether an entity is the parent organization, the entity must follow the methodology used to determine a subsidiary in their financial statements. If none, the entity with a majority ownership (greater than 50 percent) will be considered the parent organization.
* "Eligible health care providers" means public entities, Medicare or Medicaid enrolled suppliers and providers, and such for-profit entities and not- for-profit entities as the Secretary may specify, within the United States (including territories), that provide diagnoses, testing, or care for individuals with possible or actual cases of COVID-19.
* Does the reporting entity have any subsidiaries that are *"eligible health care providers"?
None
* Did the reporting entity acquire or divest subsidiaries that are *"eligible health care providers" and that received PRF payments during the period of availab- ility of funds?
None
* If the reporting entity is a subsidiary, will a parent entity report on any of the reporting entity's General Distribution payment(s)?

Handy Tips and Helpful Hints

- Collects information about subsidiary entities for any Reporting Entities that are parent organizations
- Collects information about parent entities for any Reporting Entities that are the subsidiary of a parent
- Additional information on subsidiary relationships available in the Reporting Portal User Guide
- Answer questions correctly as answers will affect the data entry on the following pages



Subsidiary Data (if applicable)

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	that acquired or ing the table below		d subsidiaries tha TIN of Acqui	t are eligible healt PRF Receive	th care providers n Percentage o	nust report this ir Did/Do you	nformation to Delete
678541234	Divested	10/01/2020	564564567	\$ 10,000.00	75%	Yes	ŝ
Please enter any additional acquired/divested subsidiaries one at a time. Click the +Add button to add and save to the table above. Only information in the table will be saved. *TIN of Acquired/Divested Subsidiary *Acquired or Divested?							
*Effective Date of t	the Acquisition/Dive	estiture	i	1 1	ease provide the TIN he TIN of an Acquiri	0	ty. If Divested,

- This page is dependent on previous answers to questions and not all providers will be prompted to this screen
- Provide TINs for all subsidiaries that meet the definition of "eligible health care providers," even if there is no General Distribution payment to report on and even if subsidiaries did not receive a PRF payment. Leave TINS in table, even if you receive the error message "TIN ISN'T FOUND"
- Recommended: Download the list of subsidiaries as a spreadsheet to confirm submitted subsidiary TINs



Payments to Recipient

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Payments to Recipient: April 10, 2020 - June 30, 2020	

PRF recipients must report July 1, 2021 through September 30, 2021 on payments received April 10, 2020 through June 30, 2020. The reporting entity must verify that each payment made to the reporting entity (and its subsidiaries, if applicable) received April 10, 2020 through June 30, 2020 is shown in one of the tables below and that payment information is accurate. Payments made to subsidiaries are only included in the tables below if the subsidiary information entered on the previous subsidiary data entry screen is correct. The reporting entity may download a spreadsheet with all of the payment information shown below by clicking the green 'Provider Relief Fund Payments (Spreadsheet)' button below.

During this reporting period, PRF recipients will not be able to report on PRF payments made outside of the payment received period April 10 2020 through June 30, 2020.

Rural Health Clinic (RHC) COVID-19 Testing Program payments made to PRF recipients are not included in the summary tables below as these payments have a separate reporting requirement.

If the reporting entity believes that the payment information below is incorrect, the reporting entity should verify that the subsidiary data entered on the previous subsidiary data entry screen is correct. If unable to certify the accuracy of information below, the reporting entity should not proceed with reporting and must contact the Provider Support Line.

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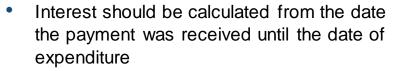
- Payments made to subsidiaries will be included in the summary tables based on the subsidiary information entered on the previous Subsidiary Data page
- Recommended: Reconcile the payment amounts for the reporting period by downloading the Provider Relief Fund Payments Spreadsheet
- Check Point: If any payment information is incorrect, contact the Provider Support Line





Interest, Tax, & Single Audit

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Interest Earned on PRF Payments, Tax Information, and S	ingle Audit Information
Interest Earned on PRF Payments, Tax Information, and S * Amount of interest earned on Skilled Nursing Facility and Nursing Home Infection Co	
* Amount of interest earned on Skilled Nursing Facility and Nursing Home Infection Co if applicable	
* Amount of interest earned on Skilled Nursing Facility and Nursing Home Infection Co if applicable	ontrol payments from payment date until expense date,
* Amount of interest earned on Skilled Nursing Facility and Nursing Home Infection Co if applicable	ontrol payments from payment date until expense date,
* Amount of interest earned on Skilled Nursing Facility and Nursing Home Infection Co if applicable * Amount of interest earned on Other PRF payments from payment date until expense	date, if applicable



- Interest must be broken down into two categories:
 - 1) Total amount of interest earned on Nursing Home Infection Control payments (if applicable)
 - 2) Total amount of interest earned on all other PRF payments
- Select the Fiscal Year End Date that accurately matches the month in which the Reporting Entity concludes its fiscal year.



Payments Summary

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Payments Summary: April 10, 2020 - June 30, 2020					
These totals do not include payments received outside the period Apr rejected (attestation rejected).	il 10, 2020 through June 30, 2020 or where the payments were				
Total Nursing Home Infection Control Payments:	\$240,000.00				
Total Other PRF Payments: \$3,000,000.00					
Total Interest Earned on Nursing Home Infection Control Payments: \$10,000.00					
Total Interest Earned on Other PRF Payments: \$10,000.00					
Gross PRF Payments (including Interest Earned):	\$3,260,000.00				
Total PRF Returned Payments: \$460,000.00					

PHUMUM SERVICES IN

- There is no validation or data entry required on this page
- **Recommended:** Print this page for your records.



Other Assistance Received



Other Assistance Received

The reporting entity must enter the other assistance received by quarter during calendar years 2020 and 2021. All fields marked with an asterisk are required. If zero, the reporting entity must enter a '0'. The number entered may be a value up to 14 digits including 2 decimal places. If the reporting entity is reporting on behalf of subsidiaries, the assistance received for each category must be aggregated across each of the subsidiaries included in the report. The 'Tab' key may be used to navigate between cells during data entry.

	Q1 (2020)	Q2 (2020)	Q3 (2020)	Q4 (2020)	Q1 (2021)	Q2 (2021)	Total
RHC COVID-19 Te: Funds Received	sting						Calculated (Total RHC Payments Deposite
Treasury, Small Business Administration (SE	(A)	*	*	*	*	*	
(e.g., CARES	\$	Ś	Ś	S-	S	S	Calculated

- Providers must report other related assistance received during the period of availability that corresponds to the current reporting period
- All cells are required fields
- The information reported in this table is not used in subsequent calculations in the portal including lost revenues calculations
- RHC COVID-19 Testing Program and RHC COVID-19 Testing and Mitigation Program payments are not PRF payments



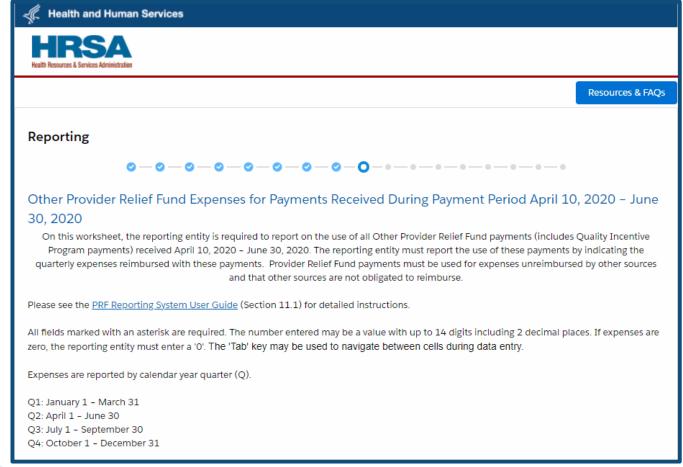
Nursing Home Infection Control Expenses (if applicable)

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Nursing Home Infection Control Expenses for Payments Received During Payment Period April 10, 2020 - June 30, 2020
On this worksheet, the reporting entity is required to report on the use of Skilled Nursing Facility and Nursing Home Infection Control payments (includes Quality Incentive Program payments) received April 10, 2020 – June 30, 2020. The reporting entity must report the use of these payments by indicating the quarterly expenses reimbursed with these payments. Provider Relief Fund payments must be used for expenses unreimbursed by other sources and that other sources are not obligated to reimburse.
Please see the <u>PRF Reporting System User Guide</u> (Section 10.1) for detailed instructions.
All fields marked with an asterisk are required. The number entered may be a value up to 14 digits including 2 decimal places. If expenses are zero, the reporting entity must enter a '0'. The 'Tab' key may be used to navigate between cells during data entry.
Expenses are reported by calendar year quarter (Q). Q1: January 1 – March 31 Q2: April 1 – June 30 Q3: July 1 – September 30 Q4: October 1 – December 31

- Formal Name: Skilled Nursing Facility and Nursing Home Infection Control Distribution
- Enter expenses only for payments received during corresponding payment period
- Enter expenses that correlate to how you used the PRF payment (by quarter)
- Definitions of General and Administrative (G&A)
 Expenses in user guide
- The total dollar value of expenses reported on this page may not exceed the dollar value of the Total Reportable Nursing Home Infection Control Payments
- Reconciliation may be needed for internal purposes if your total expenses do exceed payments.



Other PRF Expenses



- "Other PRF payments" includes all General Distribution payments and Targeted Distribution payments, except for those payments categorized as Nursing Home Infection Control payments
- Enter expenses only for payments received during corresponding payment period
- Enter expenses that correlate to how you used the PRF payment (by quarter)





Unreimbursed Expenses

I Health and Human Services Resources & FAQs Reporting Unreimbursed Expenses Attributable to Coronavirus On this worksheet, the reporting entity is required to report on the net unreimbursed expenses attributable to coronavirus that have not been reimbursed by other sources and that are not obligated to be reimbursed by other sources. Reporting entities must consider other financial assistance received, including other PRF payments, when determining net unreimbursed expenses attributable to coronavirus reported on this worksheet On this worksheet, the reporting entity is required to report on the net unreimbursed expenses attributable to coronavirus (net after other assistance received and PRF payments are applied) by indicating the calendar year quarterly expenses. Please see the PRF Reporting System User Guide (Section 11.1) for detailed instructions. All fields marked with an asterisk are required. The number entered may be a value with up to 14 digits including 2 decimal places. If expenses are zero, the reporting entity must enter a '0'. The 'Tab' key may be used to navigate between cells during data entry. Expenses are reported by calendar year quarter (Q). Q1: January 1 - March 31 Q2: April 1 - June 30 Q3: July 1 - September 30

- Report on the net unreimbursed expenses attributable to coronavirus that have not been reimbursed by other sources and that other sources are not obligated to reimburse
- The net unreimbursed expenses attributable to coronavirus reported to HRSA will not be used in the calculation of expenses or lost revenues



Actual Patient Care Revenue

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Resources & FAQs	 This page is
Reporting	dependent on data from previous
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Actual Patient Care Revenue	appear automatically
The recipient is required to submit calendar year 2019 actual patient care revenue and calendar year 2020 actual patient care revenue.	automatically
All fields marked with an asterisk are required. The number entered may be a value with up to 14 digits including 2 decimal places. If there is no revenue, the reporting entity must enter '0'.	 Provide aggregate actual patient care
* 2019 Actuals (Calendar Year)	actual patient care
S	revenue for
* 2020 Actuals (Calendar Year)	calendar years
S	2019 and 2020
Previous Save & Exit Save & Next	
Contact: Provider support line (866) 569-3522; for TTY dial 711. Hours 7 a.m. to 10 p.m. CT, M-F.	Health Resources & Services Administration

Lost Revenues Questionnaire

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Lost Revenues Questionnaire	
Please report on Lost Revenues using one of the three options: 2019 Actual Revenue, 2020 Budgeted Revenue, or Alternate R Methodology.	easonable
Use this <u>link</u> to access the reporting requirements.	
* Choose your method for calculation of lost revenues	
None	•
Previous Save & Exit Save & Next	
Contact: Provider support line (866) 569-3522; for TTY dial 711. Hours 7 a.m. to 10 p.m. CT, M-F.	
Viewers & Players Privacy Policy Disclaimers Accessibility Freedom of Information Act EEO/No Fea U.S. Department of Health and Human Services USA.gov Whitehouse.gov	ar Act

 Nursing Home Infection Control payments <u>may not</u> <u>be used for lost revenues</u> <u>and will not</u> figure into the calculation of PRF payments applied to the lost revenues

 Many resources available to assist with the lost revenues reporting requirement



Lost Revenues (actuals)

None	
2019 Actual Reve	nue
2020 Budgeted R	levenue
Alternate Reason	able Methodology
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Calculation c	of Lost Revenues Attributable to Coronavirus
	table below with the quarterly revenue information for each calendar year. In the Total Revenue/Net Charges from Patient
	se report the Patient Revenue, split by Payer Type.
All fields marked v	with an asterisk are required. The number entered may be a value with up to 14 digits including 2 decimal places. If there is
	with an asterisk are required. The number entered may be a value with up to 14 digits including 2 decimal places. If there is t for a quarter, the reporting entity must enter '0'. The 'Tab' key may be used to navigate between cells during data en

Q1 (2019) Q2 (2019) Q3 (2019) Q4 (2019) Total (2019) Medicare A+B * * * * * Calculated Medicare A+B * * * * * Calculated Medicare A+B * * * * * * *

Option i per reporting requirements is the difference between actual patient care revenues.

 Lost revenues will be calculated for each quarter during the period of availability, as a standalone calculation

2019 baseline

 Quarters where lost revenues were demonstrated are totaled to determine an annual lost revenues amount. The annual lost revenues are then added together to determine a total that can be applied to PRF payments



Lost Revenues (Budgeted)

* Choose your method for calculation of lost revenues		
None		
2019 Actual Revenue		_
2020 Budgeted Revenue		0
Alternate Reasonable Methodology		di re
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Calculation of Lost Revenues Attributable to Coronavirus		
Please fill out the table below with the quarterly revenue information for each calendar year. In the Total Revenue/Net Charges from Patient Care section, please report the Patient Revenue, split by Payer Type.	•	R
All fields marked with an asterisk are required. The number entered may be a value with up to 14 digits including 2 decimal places. If there is no revenue to report for a quarter, the reporting entity must enter '0'. The 'Tab' key may be used to navigate between cells during data entry.		
Reporting Entities electing to calculate lost revenues attributable to coronavirus using the difference between their 2020/2021 budgeted and 2020/2021 actual patient care revenue must submit their 2020 budgeted amount of patient care revenue. Recipients must also submit: 1) a copy of their 2020 budget, which must have been approved before March 27, 2020, and	•	0
2) an attestation from the Reporting Entity's Chief Executive Officer, Chief Financial Officer, or similar responsible individual, attesting under 18 USC § 1001 that the exact budget being submitted was established and approved prior to March 27, 2020.		 ne
2020 Budgeted 2020 Actuals 2021 Budgeted 2021 Actuals		
Total Revenue/Net Charges from Patient Care (2020 Budgeted)		

- Option ii per reporting requirements is the difference between budgeted and actual revenue
- 2020 Budgeted Revenue: The difference between budgeted (prior to March 27, 2020) and actual patient care revenues
- Lost revenues will be calculated for each quarter during the period of availability, as a standalone calculation
- 2019 baseline
- Required
 - Budget approved prior to March 27, 2020
 - Attestation on accuracy of budget submitted
- Only one document per upload; merge files if needed (max 2GB)



Q1 (2020)

Q3 (2020)

O2 (2020)

Total (2020)

Q4 (2020)

Lost Revenues (Alternate Method)

hoose your method for	calculation of lost	revenues			
None					
2019 Actual Revenue					
2017 Actual Revenue					
2020 Budgeted Reven	lue				
Alternate Reasonable	Methodology				
<u> </u>					
C Health and Huma	an Services				
HRSA					
Health Resources & Services Administration	n				
					Resource
Reporting					
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Alternate Metho	d of Calculat	ting Lost Revenues	Attributable to Co	oronavirus	
		ting Lost Revenues			
Please fill out the table	below with the c	calculated quarterly lost re	evenues amount for each	n calendar year.	digits including 2 decima
Please fill out the table All fields marked with a	below with the c an asterisk are rec		evenues amount for each must be entered as a pos	a calendar year. sitive value with up to 14	
Please fill out the table All fields marked with a	below with the c in asterisk are rec crease in revenu	calculated quarterly lost re quired. The lost revenues r	evenues amount for each must be entered as a pos	a calendar year. sitive value with up to 14	
Please fill out the table All fields marked with a places. If there is an ind cells during data entry.	below with the c in asterisk are rec crease in revenu	calculated quarterly lost re quired. The lost revenues r	evenues amount for each must be entered as a pos	a calendar year. sitive value with up to 14	
Please fill out the table All fields marked with a places. If there is an ind cells during data entry.	below with the c on asterisk are rec crease in revenu	calculated quarterly lost re quired. The lost revenues r les during a quarter, the r	wenues amount for each must be entered as a pos reporting entity must ent	n calendar year. sitive value with up to 14 ver '0'. The 'Tab' key may	be used to navigate bet
Please fill out the table All fields marked with a places. If there is an ind cells during data entry.	below with the c in asterisk are rec crease in revenu	calculated quarterly lost re quired. The lost revenues r	evenues amount for each must be entered as a pos	a calendar year. sitive value with up to 14	
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Please fill out the table All fields marked with a blaces. If there is an ind cells during data entry. Lost Revenues	below with the connected of the second secon	ealculated quarterly lost re quired. The lost revenues r les during a quarter, the r Q2	evenues amount for each must be entered as a pos reporting entity must ent Q3	a calendar year. sitive value with up to 14 er '0'. The 'Tab' key may	be used to navigate bet

- Option iii per reporting requirements
- Alternate Reasonable Methodology: Calculated by any reasonable method of estimating revenues
- If there is an increase in revenues during any quarter during the period of availability, the Reporting Entity must enter '0' to indicate that there were no lost revenues

Required

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- A narrative document describing methodology, explanation, and a description
- A calculation of lost revenues
- Optional: Supporting Document
- Only one document per upload; merge files if needed (max 2GB)



Financial Summary

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		Unused Other PRF After Lost Revenues Reimbursement 🌒		\$835,142.00				

- Financial Summaries are prepopulated values based on calculations from data entered during the reporting process
- There is no validation or data entry required on this page
- Verify the accuracy of the financial summary information on this page
- The PRF Financial Summary may be printed using the web browser
- The PRF reconciliation will only include line items relevant to a Reporting Entity report





Health Care Metrics

HRSA Health Resources & Services Administration
Resources & FAQs
Reporting
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Personnel, Patient, and Facility Metrics HHS is collecting this information in an effort to quantify the impact of COVID-19 on the reporting entity's personnel, patients, and facilities.
Fill out the tables below with the quarterly Personnel, Patient, and Facility Metrics for calendar year 2019-2021. See the <u>PRF Reporting Portal User</u> Guide (Section 15.1) for detailed instructions.
All fields marked with an asterisk are required. The number entered must be a whole number up to 8 digits. If a metric is zero, the reporting entity must enter '0'. The 'Tab' key may be used to navigate between cells during data entry.
Expenses are reported by calendar year quarter (Q).
Q1: January 1 – March 31 Q2: April 1 – June 30 Q3: July 1 – September 30 Q4: October 1 – December 31
Personnel Metrics Patient Metrics Facility Metrics

Tables will capture different metrics, but all cells 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





Health Resources & Services Administration
Resources & FAQs
Reporting
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Survey
The reporting entity should consider the impact of the PRF payments received April 10, 2020 through June 30, 2020 in responding to the survey below.
Financial Effects of PRF Payment(s):
For the reporting entity and its subsidiaries, in reference to the PRF payment(s) received April 10, 2020 through June 30, 2020:
* The PRF payment(s) had a significant impact on overall operations (e.g., general and administrative expenses, healthcare related expenses).
None
* The PRF payment(s) helped maintain solvency and/or prevent bankruptcy.
None
* PRF payment(s) significantly affected the ability to (select all that apply):
Options Selected





Review and Submit

Itealth and Human Services	
HRSA Health Resources & Services Administration	
	Resources & FAQs
Reporting	
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Review & Submit	
Warning: Please scroll to the bottom of this page and certify that all data entered is accurate before submitting yo	our report.
Your previous answers have been pre-populated below. Click on a section header to collapse/expand it.	
> Entity Overview	
> Subsidiary Questionnaire	
> Subsidiary Data	
> Payments to Recipient	
> Interest Earned on PRF Payments, Tax Information, and Single Audit Information	
> Payments Summary	

- Headers in this section are collapsible
- Once reviewed, certify that the above information is accurate to the best of your knowledge
- Print using the web browser and save a copy for your records



Questions and Answers



As an entity, we are a parent reporting on behalf of many subsidiaries. Our subsidiaries received both general and targeted Distribution payments. Will we need to register more than once?





Will HRSA allow early reporting if all PRF payments have been fully expended as of June 30, 2021?





Does the greater than \$10,000 reporting threshold apply to payments made cumulatively in the Payment Received Period?





If a provider received more than \$10,000 during multiple Payment Received Periods and has spent all of the PRF payments, will HRSA permit them to report once?





If a provider received only \$5,000 in Payment Received Period 1 and \$8,000 in Payment Received Period 2, are they required to report?





Is there a reporting template available?





If a PRF recipient is applying for FEMA reimbursement but has not received approval for funding, should that be accounted for in its PRF reporting? If so, how should it be noted?





After initial review of the reports, does HRSA intend to notify PRF recipients whether the agency is in agreement with the report?





What is the process for returning unused funds that remain after reporting is complete?





When does the period of availability for a payment begin?





How do I know when my payment was received?





If rent or mortgages were paid but staff worked remotely, could that be claimed as an expense?





If a PRF recipient has more lost revenues January 2020 through June 2021 than it received PRF payments for the first reporting period (July 1 to September 30, 2020), can that lost revenues be carried forward and included in the lost revenue amounts reported during the second reporting period (January 1 to March 31, 2022)?





Is hazard pay, including an agency-wide one time hazard pay for all staff (perhaps 3% of annual salary), still an approved use of funds for time worked between 7/1/21 and 12/31/21, despite conditions currently improving?





If we received payment in December 2020 what is the reporting period, can this be transferred to 2021 due to receipt in 12/2020?





How will a non-federal entity determine the amount of expenditures and/or lost revenues to report on its SEFA for FYEs ending on or after June 30, 2021?





Resources and Technical Assistance

Post-Payment Notice of Reporting Requirements (June 11, 2021)

Portal Frequently Asked Questions (FAQs)

Portal User Guide - Registration

Portal User Guide - Reporting

Portal Worksheets

Reporting Portal Registration Tutorial

Provider Relief Fund Reporting Tutorial

Reporting Specific FAQs

Reporting and Auditing Webpage

Reporting One-Pager

Stakeholder Toolkit



Technical Assistance

Reporting Technical Assistance Sessions

Session 1: July 14, 2021 | 3:00pm ET Register Now

Session 2: July 20, 2021 | 3:00pm ET Register Now

Provider Support Line

- > (866) 569-3522 for TTY dial 711
- > Hours of operation are 8 a.m. to 10 p.m. CT, Monday thru Friday





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