



Board of Trustee Meeting COVID 19 Funding 04/23/2020

CARES Act:

Part 1:

- \$30 billion is Public Health and Social Services Emergency Funding (PHSSEF)
- Distribution is based on 6.2% of recent year Medicare FFS revenue
- AHS received \$10 million on April 10
- Will need to sign attestation

Part 2:

- General \$20 Billion Distribution
- Distribution is based on % of total net patient revenue, taken into account what was previously received under the \$30 billion distribution
- This methodology appears to account for the fact that providers with lower shares of Medicare FFS payments, such as hospitals with high-Medicaid or Medicare Advantage populations, received proportionally less funds under the first distribution of \$30 billion.
- AHS' share is pending CMS calculation
- Submission of net patient revenue data is expected to open soon

CARES Act: (cont'd)

Part 3:

- \$10 billion for High-impact Area Distribution
- HHS stated that \$10 billion will be allocated to hospitals in areas that have been particularly impacted by COVID-19.
- AHS has submitted requested data
- Amount allocated is unknown

Part 4:

- \$200 million for Telehealth Program
- Up to \$1 million per applicant
- AHS has submitted application on April 17 with \$1.4 million of cost

Part 5:

- Medicare advance payment/loan
- 6 months of Medicare payment possibly available
- Looking into applying

Other Grants:

CMS:

- \$50 million for Assistant Secretary for Preparedness Response. California share is \$4.1 million. California Hospital Association (CHA) submitted application. AHS' share is \$25 thousands. Pending receipt

State:

- \$20 thousands for refugee telehealth through CDPH
- AHS has submitted application April 17

FEMA:

- County may submit application to include providers costs; surge plan possibly.
- AHS may be able to submit as a separate entity
 - Account activation was submitted, pending FEMA approval
- Documentation is key to reimbursement success

Pending programs:

- California Department of Health Care Services (DHCS) submitted an emergency 1115 waiver on April 3, which includes requests to allow WPC budget flexibility and payment for housing, as well as pay for reporting for PRIME and QIP, among other flexibilities
- Potential Medicare reimbursement for uninsured patients

Others:

FMAP Increase:

- Federal Medical Assistance Percentage (FMAP) increase by 6.2%
- For Medi-Cal programs
- Applies to Pre-ACA population
- No application is necessary. It will run through normal course of business

DSH Cut Delay:

- Will make FY20 & 1st Qtr FY21 GPP available funding higher
- Received higher interim cash of \$15 million
- Due to low utilization, it's uncertain how much fund can be earned and recognized as revenue
- California Association of Public Health Systems (CAPH) is working with State to advocate for program flexibility