

CARES Act Provider Relief Fund Authorizes Immediate Distribution of \$30 Billion

Starting Friday, April 10th, The Department of Health and Human Services (HHS) is distributing \$30 billion through the [CARES Act Provider Relief Fund](#) to all facilities and providers that received Medicare Fee-For-Service (FFS) reimbursements in 2019. ASTRO [advocated](#) for HHS to provide such direct financial aid to radiation oncologists to offset increased costs and reduced patient volumes during the COVID-19 pandemic.

Radiation oncologists that participated in the Medicare FFS program can expect to receive a portion of the \$30 billion based on their percentage of 2019 Medicare Fee-For-Service total revenues. Physicians can estimate their payment by dividing their 2019 Medicare FFS (not including Medicare Advantage) payments by \$484 billion (total 2019 Medicare FFS payments). The funding is a payment to providers, not a loan, and will not need to be repaid.

The CARES Act Provider Relief Fund is part of the \$100 billion fund established by the Coronavirus Aid, Relief, and Economic Security (CARES) Act. The relief funding is designated to provide financial support to both providers heavily impacted by COVID-19 and those struggling to keep their practices afloat due to declines in patient volumes. ASTRO joined other physician groups [urging](#) Congress to include physicians in the fund.

HHS is working with UnitedHealth Group (UHG) to deliver the initial \$30 billion. Payments will be made through an Automated Clearing House account with information already on file with UHG or the Centers for Medicare and Medicaid Services (CMS). Physicians who normally receive a paper check in the mail for payment, will receive a paper check within a few weeks.

The relief payments are being made to physicians based on their tax identification numbers. For example:

- Solo Practitioners: Solo practitioners who bill Medicare will receive a payment under the TIN used to bill Medicare.
- Physicians in a Group Practice: Individual physicians and providers in a group practice are unlikely to receive individual payments directly, as the group practice will receive the relief fund payment as the billing organization. Providers should look to the part of their organization that bills Medicare to identify details on Medicare payments for 2019 or to identify the accounts where they should expect their relief payments.
- Employed Physicians: Employed physicians should not expect to receive an individual payment directly. The employer organization will receive the relief payment as the billing organization.
- Large Organizations and Health Systems: Large organizations will receive relief payments for each of their billing TINs that bill Medicare. Each organization should look to the part of their organization that bills Medicare to identify details on Medicare payments for 2019 or to identify the accounts where they should expect relief payments.

Beginning on April 13th, providers will have 30-days to sign an attestation through an HHS portal linked from hhs.gov/providerrelief confirming receipt of the relief funds. If a provider does not wish to comply with the Terms and Conditions for receiving the relief funds, then they must contact HHS within 30 days and remit the full payment.

The Administration plans to use the remaining \$70 billion for targeted distributions that will focus on providers in areas hit particularly hard by COVID-19, including rural providers, providers of services with lower shares of Medicare reimbursement and those who predominately provide care to Medicaid populations, as well as for care for uninsured populations.

ASTRO is pleased with this first set of payments, but more is needed to help struggling practices; therefore, ASTRO continues urging Congress to provide additional funding in future COVID-19 relief legislation.

More information about the CARES Act Provider Relief Fund can be found at the following link:
<https://www.hhs.gov/provider-relief/index.html>