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April 27, 2020

Welcome to America's Physician Groups' "Healthcare on the Hill," where you can get the latest on healthcare happenings in our nation's capital--and with a special focus on the value-based care movement.

As our nation--and the world--continues to face the many challenge presented by COVID-19, we are working to ensure you have the very latest information on the virus and our rapidly changing healthcare landscape.

Think someone else may enjoy "Healthcare on the Hill?" [Forward this email and have them click here](#) to be added to our subscription list. And remember, you can always visit our [website](#) for more news and resources.

***Valinda Rutledge
Senior Vice President of Federal Affairs
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CMS Announces End to Its Advanced Payment Program, Reevaluation of Accelerated Payments

The Centers for Medicare and Medicaid Services (CMS) [announced](#) yesterday that it will be suspending its Advanced Payment Program to Part B suppliers effective immediately while also reevaluating all pending and new applications under its accelerated payment

program. CMS approved over 21,000 applications totaling \$59.6 billion in payments to Part A providers, including hospitals, while Part B providers and suppliers have received \$40.4 billion in payments over just under 24,000 applications through both programs.

Both are designed to give providers emergency funding and address cash flow issues during the disruption in claims submission or claims processing, including during a public health emergency or Presidentially declared disaster. The Public Health and Social Services Emergency Fund (PHSSEF) and the Paycheck Protection Program (PPP) will continue moving forward, offering opportunities for financial assistance as the public health emergency stands.

General and Uninsured Allocation Funding Released for Providers

The Department of Health and Human Services (HHS) began distribution of a second round of funding from the PHSSEF for healthcare providers to provide reimbursement for COVID-19 related expenses and lost revenue from the pandemic. The general allocation of \$20 billion will be distributed to facilities and providers impacted by COVID-19, based on eligible providers' 2018 net patient revenue from all payor sources. A portion of providers will automatically be sent an advance payment based off the revenue data they submit in CMS cost reports. Providers who receive funds must also sign an [attestation](#) confirming receipt of funds, agree to the terms and conditions of payment, and confirm the CMS cost report.

Providers can register at the [COVID-19 Uninsured Program Portal](#) to request claims reimbursement for COVID-19 testing or treatment for uninsured COVID-19 patients conducted on or after February 4, 2020 once it goes live later today. Providers may begin submitting claims electronically on May 6, 2020.

President Trump Signs Law for an Additional \$484 Billion in Funding

Last week, President Trump signed the \$484 billion "Paycheck Protection Program and Health Care Enhancement Act." This legislation includes \$300 billion in additional funding for the PPP and \$75 billion for providers under the PHSSEF to support COVID-19 related expenses and revenue losses.

You can find a summary of the bill [here](#) and loan guidance from the Small Business Association (SBA) [here](#).

Some Public Hospitals Eligible for Paycheck Protection Program Funding

The Department of the Treasury released [guidance](#) clarifying that some government-entity owned hospitals may be eligible for PPP loans. The PPP was launched as part of the

Coronavirus Aid, Relief, and Economic Security (CARES) Act to assist small businesses in keeping workers on the payroll amidst the COVID-19 pandemic.

Hospitals that are partially owned by state and local governments and receive less than half of their total funds from public sources (excluding Medicaid) are eligible for a PPP loan. It is hoped that this flexibility will extend additional assistance to rural hospitals.

APG Sends Letter to HHS Requesting Risk Adjusted Payment for Audio-only Telehealth Services

Last week, APG sent a [letter](#) to HHS and CMS advocating for audio-only telehealth services to qualify for risk adjusted payment. As it currently stands, part of the criteria for risk adjusted payment for telehealth services hinges upon a face-to-face encounter that uses an interactive audio and video telecommunications system such as a video-equipped smartphone.

APG asks that the criteria be expanded to include audio-only technology such as landline phones and non-smartphones in order to accommodate patients who may not have access to such technology and rural and underserved areas without access to broadband internet technologies.

APG Sends Letter of Recommendations to Congress for Next Phase of COVID-19 Stimulus

APG sent a [letter](#) to House and Senate leadership last week providing numerous recommendations on how best to address the critical needs of physicians and patients across America as they face the challenges of brought on by COVID-19. As Congress works on extending financial relief and support to healthcare provider, APG continues to strongly advocate here in Washington to ensure that our physician group members have the resources they need to continue caring for the patients and communities they serve.

APG Host Deep Dive Webinar on the Future of APMs

APG, along with CareJourney and senior leadership from CMS, will host a **Deep Dive webinar** on Thursday, May 21 from 2:00 pm to 3:00 pm ET to discuss the future of APMs. Additional details and the agenda will be provided shortly. You can register [here](#).



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