

In This COVID-19 Update:

- Medicare Accelerated and Advanced Payments
- Telehealth Toolkit

Medicare Accelerated and Advanced Payments Now Available

CMS announced today (March 28) that it is expanding its accelerated and advance payment program for Medicare providers. These payments provide emergency funding and address cash flow issues based on historical payments when there is disruption in claims submission and/or claims processing. These expedited payments are typically offered in natural disasters to accelerate cash flow to the impacted health care providers and suppliers. In this situation, CMS is expanding the program for all Medicare providers throughout the country during the public health emergency related to COVID-19.

To qualify for accelerated or advance payments, the provider or supplier must:

- Have billed Medicare for claims within 180 days immediately prior to the date of signature on the provider's/supplier's request form;
- Not be in bankruptcy;
- Not be under active medical review or program integrity investigation; and
- Not have any outstanding delinquent Medicare overpayments.

Medicare will start accepting and processing the Accelerated and Advance Payment Requests immediately. CMS anticipates that the payments will be issued within 7 days of the provider's request. See an [informational fact sheet](#) on the accelerated/advance payment process and how to submit a request.

CMS guidance on provider eligibility and submission processes from today's announcement differ from those found in the [Medicare Financial Management Manual](#), Overpayments, Chapter 8, Section 150. Providers should contact their MACs, directly, to understand how the MAC will be operationalizing CMS's guidance. CMS is delegating the payment request processing to the MACs. See the [MAC regional coverage map](#).

CMS recently issued an [electronic toolkit](#) regarding telehealth and telemedicine for Long Term Care Nursing Home Facilities. CMS has broadened access to Medicare telehealth services so that beneficiaries can receive a wider range of services from their doctors without having to travel to a healthcare facility.

This document contains electronic links to reliable sources of information regarding telehealth and telemedicine, including the significant changes made by CMS in response to the National Health Emergency. Most of the information is directed towards providers who may want to establish a permanent telemedicine program, but there is information here that will help in the temporary deployment of a telemedicine program as well.

There are specific documents identified that will be useful in choosing telemedicine vendors, equipment, and software, initiating a telemedicine program, monitoring patients remotely, and developing documentation tools. There is also information that will be useful for providers who intend to care for patients through electronic virtual services that may be temporarily used during the COVID-19 pandemic.

For additional questions, please email COVID19@ahca.org and visit www.ahcancal.org/coronavirus for more information and resources.

This message contains confidential information and is intended only for AHCA/NCAL membership. Dissemination, distribution or copying the contents of this email beyond this group is strictly prohibited.



[AHCA](#) | [NCAL](#) | [Provider](#)

© 2020 American Health Care Association. All rights reserved.