

# PRF Phase 4 and ARP Rural Distribution Application Now Open

The Provider Relief Fund (PRF) [Application and Attestation Portal](#) is now open for Phase 4 and American Rescue Plan (ARP) Rural Distribution applications. Distributions received can be used for changes in a provider's operating revenues and expenses incurred between January 1, 2020, and March 31, 2021. In order to streamline the process, providers will apply for both programs through a single application, and eligible providers can receive payments from both programs. All applications must be submitted by October 26, 2021, at 11:59 p.m. EST.

Here's how to apply:

## 1. Determine Eligibility

**Phase 4** – To be eligible for funding from the \$17 billion Phase 4 PRF distribution, an applicant must meet *all five* of the following eligibility requirements:

1. An applicant must be a:
  - Provider or supplier who bills Medicare fee-for-service (Parts A, B, and C), Medicaid (fee-for-service or managed care) and/or Children's Health Insurance Program (CHIP);
  - Dental service provider;
  - State-licensed or certified assisted living facility;
  - Behavioral health provider; or
  - Provider who received a prior Targeted Distribution payment;
2. The applicant must have filed a federal income tax return in 2018, 2019, or 2020 (or be exempt from the requirement to file federal income taxes);
3. The applicant must have provided patient care after January 31, 2020;
4. The applicant must not have permanently ceased providing patient care directly or indirectly through included subsidiaries; and
5. The applicant must have gross receipts or sales from providing patient care reported on Form 1040, Schedule C if they are an individual that provides patient care.

If you are currently terminated or excluded from participation in Medicare, Medicaid, Medicare Advantage, or other federal health care programs, or currently have your Medicare billing and participation privileges revoked, you are not eligible to apply for Phase 4 funding (even if you meet the eligibility requirements listed above).

**ARP Rural Distribution** – To be eligible for the ARP \$8.5 billion rural distribution, an applicant must meet *one of the three* following eligibility requirements:

1. The applicant is a rural health clinic (as defined in Sec. 1862(aa)(2) of the Social Security Act);
2. The applicant is a provider located in a rural area (as defined in Sec. 1886(d)(8)(E) of the Social Security Act); or
3. The applicant: (i) is a provider that billed Medicare fee-for-service (Parts A and/or B), Medicaid Advantage (Part C), Medicaid (fee-for-service or managed care), and/or CHIP for health care-related services between January 1, 2019, and September 30, 2020; and (ii) operates in or serves patients in rural areas, as determined by The Federal Office of Rural Health Policy.

## 2. Gather Revenue and Tax Information and Documentation

A provider will need certain revenue, tax and banking information, and documentation to complete the application. To determine what information and documents are needed, see [HRSA's sample application](#).

## 3. Submit your Tax Identification Number (TIN) for Validation

If you are a provider who has not previously received funds under a PRF General or Targeted Distribution, the Health Resources and Services Administration (HRSA) advises you to submit your TIN for IRS validation in the Application and Attestation Portal before starting the application. TIN validation can take up to 10 days, so starting this process as soon as possible is suggested. If you are a provider that previously received a PRF General Distribution payment, your TIN is already validated — you do not need to recomplete this step.

## 4. Complete the Application

Once TIN validation is confirmed, complete the funding application and upload supporting documentation (if prompted) within the Application and Attestation Portal. As noted above, a single application will be used for both PRF Phase 4 and ARP Rural Distributions.

### (i) Payment Distribution

Once all applications are submitted, HSRA will review and calculate payment amounts based on the total number of applicants, reported financial data, administrative claims, and available funding. If you receive a payment and wish to keep the funding, you will be required to attest to the terms and conditions using the application and attestation portal.

**Remember, all applications must be submitted by October 26, 2021, at 11:59 p.m. EST.**

Our Chambliss team will continue to analyze and report on HHS' guidance on these topics. Please contact [Jed Roebuck](#), [Courtney Keehan](#), or your relationship attorney if you have questions or need additional information.



**Bloomberg Law Interviews Chambliss on the Latest With HHS Provider Relief Funds**

Jed shared insight in Bloomberg Law's recent article "[Providers Want More Time to Report, Spend Pandemic Relief Funds](#)" on the lengthy reporting process requirements and the challenges health care providers have endured throughout the many rounds of guidance announced by HHS...

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### **HHS Announces 60-Day Grace Period for PRF Reporting and \$25.5 Billion in COVID-19 Provider Funding**

HHS announced a 60-day grace period (beginning on October 1, 2021, and ending on November 30, 2021) for the September 30, 2021, deadline for PRF Reporting Period 1. They also announced the availability of \$25.5 billion in COVID-19 provider funding...

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