

General Distribution \$50 Billion	<ul style="list-style-type: none"> • Tranche 1: \$30 billion to Medicare providers based on their share of total 2019 Medicare fee-for-service expenditures <i>Distributed April 10 and April 17</i>
	<ul style="list-style-type: none"> • Tranche 2: \$20 billion to Medicare providers based on the <u>lesser</u> of 2% of a provider’s net patient revenue or the sum of incurred losses for March and April. <u>If a provider’s Tranche 1 payment is at least 2% of annual patient revenue, it may not receive a Tranche 2 payment.</u> <i>Distributed on a rolling basis to providers that submitted the required data by June 3</i>
Medicaid Distribution ~\$15 Billion	<ul style="list-style-type: none"> • \$15 billion to providers that: (1) billed Medicaid between January 1, 2018 and December 31, 2019;* and (2) have <u>not</u> received a General Distribution payment <i>HHS launched a portal for providers to submit data that HHS will use to determine individual provider distributions</i>
Hot Spot Hospitals \$22 Billion	<ul style="list-style-type: none"> • \$12 billion to the 395 hospitals that provided inpatient care to 100+ COVID-19 patients through April 10 <i>Distributed on or around May 1</i>
	<ul style="list-style-type: none"> • \$10 billion based on COVID-19-positive inpatient admissions through June 10 (methodology TBD) <i>Providers must submit data to HHS by June 15 at 9:00 pm ET; timing of HHS distribution of funding not yet known</i>
Safety Net Hospitals \$10 Billion	<ul style="list-style-type: none"> • \$10 billion to safety net hospitals defined as having: (1) a Medicare Disproportionate Patient Percentage (DPP) of 20.2% or greater; (2) average uncompensated care per bed of \$25,000 or more; and (3) profitability of 3% or less, as reported to CMS in its most recently-filed cost report <i>Anticipated distribution this week</i>
Rural Providers \$10 Billion	<ul style="list-style-type: none"> • \$10 billion to rural acute care general hospitals, Critical Access Hospitals, Rural Health Clinics and Community Health Centers located in rural areas <i>Distributed on or around May 1</i>
Uninsured Claims Unspecified	<ul style="list-style-type: none"> • Unspecified amount based on claims submitted to HHS by providers for testing or treating uninsured COVID-19 patients on or after February 4 (reimbursed at Medicare rates) <i>Claims reimbursement is ongoing; payments began on May 18</i>
IHS \$500 Million	<ul style="list-style-type: none"> • \$500 million for Indian Health Service (IHS) facilities <i>Distributed on or around May 22</i>
Dentists Unspecified	<ul style="list-style-type: none"> • HHS is “working on an additional allocation to distribute relief broadly to dentists”

* In its June 9 press release, HHS indicated that Medicaid providers would be eligible for this distribution if they had billed Medicaid—fee-for-service or managed care—for healthcare-related services between January 1, 2018 and May 31, 2020. However, in the June 10-released instructions, HHS included language indicating that, to be eligible, providers “must have directly billed Medicaid for healthcare-related services during the period of January 1, 2018, to December 31, 2019.” Clarification will be needed that HHS considers managed care providers to have directly billed Medicaid.

- HHS has distributed/is currently distributing payments
- Payments have not yet been made
- June 9-announced allocations