



## Frequently Asked Questions

### Medicaid Provider CFAC Stabilization Funding Opportunity

#### **What is the Medicaid Provider Stabilization Funding Opportunity?**

An opportunity for providers that are enrolled with Idaho Medicaid to access a [portion](#) of the federal funds Idaho received to fight the COVID-19 pandemic.

#### **Who should apply?**

Idaho Medicaid providers who are:

- In-state providers; and
- Actively enrolled; and
- In good standing, meaning no current provider actions, sanctions, or debts owed; and
- In good standing with the state of Idaho, meaning applicants do not owe any back taxes; and
- In good standing with the local, state, and federal government, meaning applicant is not suspended or debarred from receiving federal funds; and
- Medicaid revenue is greater than or equal to 50% of total annual revenues for calendar year 2019.

#### **How to apply?**

Idaho Medicaid providers may apply to access this funding by filling out the Medicaid Provider CFAC Stabilization Funding Application.

#### **When will applications be accepted?**

October 8, 2020 through October 31, 2020

The application is due by 5 p.m. Mountain Standard Time (MST) on October 31, 2020.

#### **Where should completed applications be sent for processing?**

Email: [MedicaidCFAC@dhw.idaho.gov](mailto:MedicaidCFAC@dhw.idaho.gov)

Fax: 208-334-0431

#### **Where should questions be sent?**

The Department will answer questions through email at [MedicaidCFAC@dhw.idaho.gov](mailto:MedicaidCFAC@dhw.idaho.gov)

#### **How will I know if my application was accepted and if I qualified for any funding?**

When you submit the application, an email will be sent informing you the Department has received it.

Your application will be reviewed by the Department of Health and Welfare Division of Medicaid for verification of the application information. Applications are processed by the Department on a weekly basis.

Any other activities regarding application minimum requirements, qualification, and funding are determined by the Coronavirus Financial Advisory Committee (CFAC). [See more about CFAC.](#)



**Is my Small Business Administration (SBA) Paycheck Protection Program (PPP) loan considered assistance?**

For purposes of the SBA Paycheck Protection Program (PPP) Loan, it is considered assistance if the provider reasonably expects that the loan will be forgiven. It is not assistance received if the provider does not expect that the loan will be forgiven given the current guidance available.

**How do I report increased administrative or other costs as a result of COVID-19?**

Section G of the Medicaid Provider CFAC Stabilization Funding Assistance Application is the appropriate place to report all increased costs attributable to COVID-19 for the reporting period. Several examples of areas of increased cost are listed and several blank lines are available to use, as necessary.

**I have tried calling the Department of Health and Welfare to talk about this funding or application, but they send me to an email address. Why?**

The Department of Health and Welfare Division of Medicaid's role in the process is verifying the information provided in the application. The Division of Medicaid does not issue the CFAC Stabilization Funding Assistance checks. The checks will be distributed by the Idaho State Controller's Office.

Questions the Department of Health and Welfare receives by email will be routed to the appropriate individual, agency, or committee. Additionally, questions benefitting all applicants will be posted to the FAQ once they are answered.

**I reviewed the application and I do not have a National Provider Identifier (NPI) or a Medicaid Provider ID Number. Is this required?**

All applicants should enter either an NPI in Line 4 or Medicaid Provider ID Number in Line 5. Do not fill out both lines. Applicants should determine which line to fill out by reviewing what number they use to submit claims information.

The NPI is a 10-digit numeric identifier. Line 4 will only accept numbers in the field.

The Medicaid Provider ID Number is an alphanumeric identifier. Line 5 will accept both letters and numbers in the field.

**What happens if I am a managed care organization or I am not a typical vendor with the Department of Health and Welfare?**

The applicant must submit an [IRS Form W-9](#) with the Medicaid Provider CFAC Stabilization Funding Assistance Application to the Department of Health and Welfare. If the applicant does not submit a W-9, the Department will not review the application until a W-9 is submitted for review. This is required for any provider or organization that does not have an NPI or Medicaid Provider ID number used to submit claims to Idaho Medicaid on a regular basis.

After a review and verification of W-9 information, the Division of Medicaid will review the application to determine if applicant meets criteria for funding. If applicant qualifies for funding, there may be a delay of 1 – 2 business days for disbursement of funds. Funds will be distributed in the form of a paper check.

**Can I apply more than once for this funding?**

To make sure all qualifying providers have the opportunity to apply and receive funding assistance, applicants can only submit one application.



**I made a mistake on my application. What do I do?**

When you submit your application, you should receive an automatic reply informing you that the Department of Health and Welfare received your application. If you need to make changes, send a reply to that email as soon as possible.

**I do not have all this information in the application available or on hand. Can I apply and submit an amendment?**

The Department of Health and Welfare asks all applicants to read through the instructions and the application in its entirety before applying. Not all Medicaid providers will qualify for assistance. Applicants have until October 31, 2020 at 5 pm MST to complete the application and apply. If your application is missing information, this will delay the review of your application.

If the applicant is an Idaho Medicaid fee for service provider, they can access prior year information by logging into their Trading Partner Account and accessing their historical Remittance Advices (RA). This will have all the financial information required for any Idaho Medicaid revenue received by providers or organizations. Information should be detailed using the 'Other' line items within the subsection. If applicant runs out of 'Other' line items in the section, the applicant should detail this information in the body of the email when they submit their application so Division of Medicaid staff can add this information since the application is password protected.

Providers can also use their 2019 Form 1099 information sent to them by DXC Technology or one of the managed care organizations making payments on behalf of Idaho Medicaid.

**When can I expect my check?**

The application process has a few steps for verification of information and review before a check is issued to a qualifying provider. At times, there may be a high volume of applications for review.

The Division of Medicaid will review applications on a weekly basis. The Department of Health and Welfare then sends verified information to the Idaho State Controller's Office and checks will be issued.

**I did not meet the funding criteria for this timeframe. Will I be notified of a change in criteria?**

Any change in criteria will need to be reviewed and approved by [CFAC](#). An information release will be posted for any revisions to the criteria.

**I have one taxpayer identification number but multiple facilities or providers with their own, unique identification number. How does that work?**

Applicants from the same organization are able to apply with their unique provider identification number or Medicaid ID number. Keep in mind that costs reported on the application should be allocated by organization, facility, or provider to allocate the costs properly.

**My organization uses a group NPI. Do I use the group NPI information in the application?**

If an organization is applying for funding as the organization and it uses a group NPI for claims, then the group NPI amounts should be reported.

If an individual provider is applying as an individual within an organization that uses a group NPI, then the provider's individual NPI should be used for reporting any rendered services.



**What revenues do I report?**

All revenue sources. This includes, but is not limited to, Medicare, Medicaid, commercial insurance, group health plans, self-insured plans, self-pay individuals, managed care organizations, pharmacy benefit managers, long-term care insurance, settlements from a liability insurer, workers' compensation, or any other state or federal coverage programs.

When reporting Idaho Medicaid revenues, this includes, but is not limited to the items listed in the application, cost sharing, self-pay payments, HealthyConnections case management fees, supplemental revenues, etc.

If the organization does not break out the cost of Blue Cross and Molina for Idaho Medicaid, include this item as an 'Other' within the Idaho Medicaid sections of the application and detail this is for both payers.

If the applicant has applied for assistance, like the PPP, CARES Act, etc. and the assistance has not been forgiven or returned by the date of the application, the total dollar amount received by the applicant should be listed in the application. The funding calculation is based on costs or awards incurred to date.

**Do I need to keep anything related to this application or funding?**

The Department advises you keep any application materials, information, and the application. The funding is 1099 reportable.

**By receiving this funding, am I bound by any terms and conditions?**

If an applicant is awarded funding, it may be subject to any federal and state laws, rules, regulation, guidance, or reporting requirements. This may include, but not be limited to, any current and future Department of Health and Human Services terms and conditions, The Coronavirus Aid, Relief, and Economic Security (CARES) Act (P.L. 116-136) terms and conditions, and or state of Idaho terms and conditions for this funding. No exceptions to any federal or state terms and conditions, laws, rules, regulation, guidance, or reporting requirements will be permitted.