



COMMONWEALTH of VIRGINIA

Department of Medical Assistance Services

KAREN KIMSEY
DIRECTOR

SUITE 1300
600 EAST BROAD STREET
RICHMOND, VA 23219
804/786-7933
800/343-0634 (TDD)
www.dmas.virginia.gov

November 30, 2020

Dear Assisted Living Facility Provider:

The Department of Medical Assistance Services (DMAS) has modified the definition of eligible costs for the State's allocation of federal Coronavirus Aid, Relief, and Economic Security (CARES) Act funding to assisted living facilities in two ways.

First, eligible costs for reimbursement from this funding will now be defined as COVID-related costs incurred for the period of **March 1, 2020 through October 31, 2020** consistent with the recently signed Budget. This is a change from the previously defined period of July 1, 2020 through October 31, 2020. There is no change to the reimbursement limits under this program. This funding is designated to Assisted Living Facilities (ALF) to address staffing shortages, increasing infection control measures, and purchasing personal protective equipment (PPE), as well as cover COVID-19 testing expenses.

Second, the Commonwealth is modifying how funds received from the federal Department of Health and Human Services Provider Relief Fund (PRF) are treated for calculating payments. The Commonwealth will now recognize any valid use of PRF (under HHS guidance) as reducing the amount of PRF that must be offset by eligible expenses before payment under this program. **This is a change to the program as previously we were not allowing the offset of lost revenues. Revenue losses still are not considered valid expenses for reimbursement from the Virginia CARES Act program.**

Please note, not all ALFs have received PRF support, but if your facility has, you now have two options:

- 1) Report the revenues and related expenses on the invoice form. The invoice form will offset all revenues prior to determining allowable expenditures.
- 2) Complete the attached attestation, attesting that the costs you are submitting for reimbursement are net of any Federal support received. Federal support received may be used to cover lost revenues (as permitted by the federal program), and/ or you would decrement your expenses by the Federal support received.

Please refer to the original notification letter distributed by DMAS on August 17, 2020 outlining the details of this program.

Reminders:

- 1) Expenses must be for COVID-19 related expenses that 1) would not have been incurred in a non-pandemic year; and 2) have not been otherwise paid for by another funding source.
- 2) Reimbursement is available for up to \$4,000 per month (July – Oct) for covered COVID-19 related expenses. An additional amount of up to \$15 per Auxiliary Grant (AG) resident per day (July – Oct) is available for covered COVID-19 related expenses.
- 3) Please note the maximum reimbursement amount will be applied cumulatively, so that if expenses do not reach the \$4000 limit in a given month, the extra “room” can be used in a future month to cover expenses over the \$4000. In order to receive the \$4000 “limit” for each month, please report total resident days and Auxiliary Grant resident days by month in the appropriate location on the invoice.
- 4) Reimbursement is contingent on funding availability. If reimbursement requests exceed available funding, reimbursements may be prorated. If, however, all funds available for this program are not used by participating ALF providers, unspent funding may be allocated at the end of the program to participating providers based on unreimbursed allowable COVID-19 expenses previously reported. Therefore, it may be advantageous to report unreimbursed March – June expenses, even if you have already received the maximum reimbursement noted above.

Please note that invoice submission for participation in this program is voluntary. **No invoices may be submitted after December 30, 2020.** Once received, MSLC will review the submitted information and notify you of any adjustments to your submission. Once the allowable reimbursements are identified and approved, payments will be processed. DMAS will process payments every two weeks on a rolling basis.

Enclosed you will find an updated invoice form to complete and submit to MSLC for reimbursement. Please use this form for any March - June submissions. Detailed instructions are included with the form. All completed forms should be sent via e-mail to caresactinvoicing_alf@mslc.com.

If you have any questions, please e-mail caresactinvoicing_alf@mslc.com.

Sincerely,



Karen Kimsey, Director

Department of Medical Assistance Services

