

Medicare Accelerated Payment Program Expanded During Covid-19 Pandemic

Published on April 1, 2020. On March 28, the Centers for Medicare & Medicaid Services (CMS) announced an expansion of its Accelerated and Advanced Payment Program for Medicare participating health care providers and suppliers. The program expansion specifically recognizes potential disruption to the billing process as a result of COVID-19 burdens on the health care workforce.

Accelerated and advance Medicare payments provide emergency funding and addresses cash flow issues based on historical payments when there is disruption in claims submission and/or claims processing. These payments have been offered in past natural disasters, but are now available for all Medicare providers nationwide during the pandemic. The payments can be requested by hospitals, doctors, durable medical equipment suppliers and other Medicare Part A and Part B providers and suppliers.

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/Advance Payment Requests immediately. CMS anticipates that the payments will be issued within seven days of the provider's request. Further details on how to apply are available here - <https://www.cms.gov/files/document/Accelerated-and-Advanced-Payments-Fact-Sheet.pdf>

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