

# NEW Phase 3 Provider Relief Fund General Distribution RULES OF THE ROAD

Phase 3 funding is open to eligible providers including those who billed Medicare, Medicaid, Medicaid Managed Care Plans and the Children's Health Insurance Program (CHIP) in calendar year 2019, **OR** if a provider began practicing January 1, 2020 through March 31, 2020. Phase 3 also extends to behavioral health providers who have billed health insurance companies, **AND** behavioral health providers who do not accept private insurance and bill patients directly.

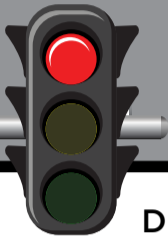
## IMPORTANT UPDATE

You are eligible to apply even if you already received a payment under Phase 1 or Phase 2 of the General Distribution equaling approximately 2% of annual revenue from patient care, if you applied for a Phase 2 distribution and are still awaiting payment, **OR** if you were deemed ineligible before. If eligible, we encourage you to apply as soon as possible.



The deadline for this application is **NOVEMBER 6!**

### Determining Your Eligibility STEP 1



Did you directly bill your state Medicaid/CHIP programs or Medicaid managed care plans for health care-related services during the period of January 1, 2018, to March 31, 2020 **OR**

Did you bill Medicare fee-for-service during the period of January 1, 2019 and March 31, 2020? **OR**

Did you receive any payments under Phase 1 or Phase 2 of the General Distribution?

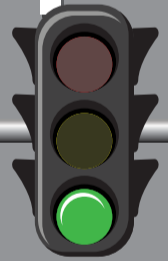
Do you bill health insurance companies for health care-related services? **OR**

Do you not accept private insurance, and instead directly bill patients for health care-related services?



[Full Eligibility Here!](#)

### Determining Your Eligibility STEP 2



If "YES," [click here to apply for a payment via the Provider Relief Fund General Distribution Portal](#) by **NOVEMBER 6.**

### Applying for Funding STEP 1

Before you apply:

- Read the [Instructions](#).
- Download the [Provider Relief Fund General Distribution Application](#).



You cannot edit or resubmit once your application is submitted.

### Applying for Funding STEP 2

Initial Application Steps [See the "[What you need](#)" tab on the portal site]:

1. [Set up Optum ID](#) if you don't have one.
2. Sign up for updates.
3. Add your organization's TIN, and the exact name associated with the TIN.
4. Have a program administrator attest to the TIN and submit information on behalf of your organization.
5. Wait until TIN is validated by checking the TIN dashboard.



Concerns about your application status?

Call [CARES Act Provider Relief line](#) at **866-569-3522**

Visit [Provider Relief Fund FAQ](#) (updated frequently)