

Coronavirus Relief Fund (CRF) DHS – DMHAS


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SUMMARY AND OVERVIEW OF PROGRAM

**QUARTERLY PROVIDER MEETING
SEPTEMBER 10, 2020**

Revised 9.14.2020 please see final slide





**Coronavirus
Aid, Relief,
and Security
Act**

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**CARES Act (under section 601(a)
of the Social Security Act
established the Coronavirus Relief
Fund (CRF)**

Payments may only cover costs that

- ✦ Are COVID-19 specific expenditures
- ✦ Are not covered by agency budgets supported with state or other government budgets (includes but not limited to DMHAS contract payments, County contract payment, Federal Grants)

Agency Eligibility

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- Agency must be under contract with the DMHAS
- Eligible expenses must be for programs offering community-based mental health or substance use disorder services
- Funding provided on a reimbursement basis
- Eligible expenses will be reimbursed retroactively to March 9 and extend through December 15th.



Funding Availability

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Expenses submitted for reimbursement will be processed on a ***first come, first serve basis*** until the \$25M in dedicated funding is fully expended or until December 15, 2020 (whichever comes first)

Eligible Category Types

(see guidance for more information)

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Frontline, Direct Care Worker COVID-related Emergency Rate

- Only for frontline staff that provided/are providing **IN-PERSON** direct care
- Emergency rate – additional pay for performing hazardous duty or work involving physical hardship.
- Bonuses are ineligible

COVID Testing for Staff and Consumers

- Testing reimbursement is not available for agency staff working from home
- Testing must be through an accredited, reputable lab
- Agency must provide services (i.e., via telehealth) while consumer is awaiting test results

Eligible Category Types

(see guidance for more information)

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HIPAA-compliant technology to facilitate telehealth / telecomm.

- HIPAA-compliant hardware and software purchased to enable tx and svcs are allowable
- HIPAA compliant video communication products are allowable
- Telephone purchase and enhanced data or minutes svc agreements for consumers are allowable

Personal Protective Equipment

- Face coverings – surgical masks, N95s, cotton masks
- Face shields
- Gowns
- Gloves
- Goggles

Documentation Required to Support Eligible Expenses

All purchases and expenditures must provide the following supporting documentation for each reimbursement item

- State of NJ Payment Voucher
- DMHAS Expense Tracking Form
- Receipts, invoices, payroll records
- Attestation

Submission Timeline and Process

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- All documents are to be submitted via a Secured File Transfer Protocol in PDF format.

Date expense incurred	Due date
March 9, 2020 – September 30, 2020	October 15th, 2020
October 1, 2020 – October 31, 2020	November 15th, 2020
November 1, 2020 – November 30, 2020	December 15th, 2020
December 1, 2020 through December 15, 2020)	no later than December 20

Attestation

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Attestation signed by Executive Director, Chief Financial Officer or Sole Proprietor of agency is required for each submission.

- Expenditures comport with CRF requirements
- Expenditures were not supported with DMHAS contract dollars, or other state, federal or local governmental agency
- Agency will permit DMHAS access to review all program-related records for audit purposes
- Recognition that if expenses reimbursed do not comport with CRF rules and guidelines that reimbursement will be subject to full recoupment of funds.

Audit Activities

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- All claims submitted for reimbursement will be subject to audit
 - ✦ Any payments issued not supported with backup documentation, which may include but is not limited to:
 - Records that demonstrates expenditure was COVID-19 related
 - Records that demonstrate that the expenses were not supported by other governmental funding (including state, county or federal funds)
 - Do not meet with the eligibility criteria articulated in the DHS, DMHAS “Guidance for Coronavirus Relief Fund Mental Health and Substance Use Disorder Contracted Provider COVID-Eligible Expenses”

Questions and Inquiries

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All question and inquiries are to be submitted electronically to DMHAS.CRF@dhs.nj.gov*

* Revised 9.14.2020 with correct email

