

A CMS Medicare Administrative Contractor

## Request for Accelerated/Advance Payment

Provider and Point of Contact Information:

Provider Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Medicare Identification Number (PTAN) or attached list: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

\_\_\_\_\_ Contact Email Address: \_\_\_\_\_

National Provider Identification (NPI) Number or attached list: \_\_\_\_\_

**Jurisdiction and Provider Type (Select one):**

J6 Part A                       J6 Part B                       JK Part A                       JK Part B

**Select the Reason For Your Request (Select one option below):**

- Delay in provider/supplier billing process is of an isolated temporary nature beyond the provider/supplier's normal billing cycle due to COVID-19 and not attributable to other third party payers or private patients
- Other: Please explain (if additional space is needed, include attachment on company's letterhead)

**Payment Amount Requested (Select one option below):**

- I want the maximum payment amount as calculated by CMS.
- I want less than the maximum payment amount as calculated by CMS.  
Enter payment amount requested \$ \_\_\_\_\_

**Authorized Representative Certification:**

I attest that I am the authorized official that is legally able to make financial commitments and assume financial obligation on the provider's/supplier's behalf.

I certify the following (select all that apply):

The provider has no plans to file for bankruptcy, is not currently in bankruptcy and has not retained bankruptcy counsel.

The provider has no plans to cease doing business.

The provider/supplier is not under fraud investigation.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Completed forms and attachments should be sent to the email address that corresponds with the jurisdiction and provider type:

- J6 Part A: [J6AcceleratedPaymentPartA@anthem.com](mailto:J6AcceleratedPaymentPartA@anthem.com)      JK Part A: [JKAcceleratedPaymentPartA@anthem.com](mailto:JKAcceleratedPaymentPartA@anthem.com)
- J6 Part B: [J6AdvancePaymentPartB@anthem.com](mailto:J6AdvancePaymentPartB@anthem.com)      JK Part B: [JKAdvancePaymentPartB@anthem.com](mailto:JKAdvancePaymentPartB@anthem.com)