

# Expanded Eligibility Allows More Rural Clinicians to Qualify for Loan Repayment – 01/13/22

**Kristine Sande:**

Thank you so much, everyone, for joining us today. I'm Kristine Sande, and I'm the program director of the Rural Health Information Hub. Thanks so much for joining us. Today's webinar, we'll be discussing how the recent expanded eligibility for the National Health Service Corps programs will allow more rural clinicians to qualify for loan repayment. And it is my pleasure today to introduce our speakers.

Tom Morris will be our first speaker and he is the associate administrator for rural health policy at the Health Resources and Services Administration, where he directs the Federal Office of Rural Health Policy.

Mike Shimmens is the executive director for 3RNET, the nation's most trusted resource for health professionals seeking careers in rural and underserved communities. Mike has led 3RNET since 2012, and he works with a nine-member board of directors, leads a staff of four, and empowers the National Rural Recruitment and Retention Network of 54 organizational members to further 3RNET's mission to improve rural and underserved community's access to quality healthcare through the recruitment and retention of quality healthcare professionals. Excuse me.

Malissa Lewis began in her career with HRSA's Bureau of Health Workforce and spent the last 11 years learning everything there is to know about public health from health law and policy to the development and administration of public health programs. She is currently applying that knowledge in her role as the branch chief of HRSA's Bureau of Health Workforce, Division of National Health Service Corps Loan Repayment Branch, as well as overseeing the planning and implementation of the Substance Use Disorder Treatment and Recovery Loan Repayment Program. And at this time I'll turn it over to Tom.

**Tom Morris:**

Kris, thanks so much, and I appreciate you and the rest of the staff at RHHub for hosting this webinar. And I'm also really happy to be joined by Mike and Malissa, and looking forward to this. Thank you also to the audience for taking the time to join us today. I think the reason we wanted to have this webinar was just to make a final push for this year to let people know that there are additional resources available through the National Health Service Corps, but then also to plant to see that there will be the same additional resources next year. This is due to the expansion of funding through the American Rescue Plan and Malissa will go over a lot of that. What I hope to do is set a context for why we think this is important.

It's just a unique opportunity when you get this extra funding, and we didn't want to let it pass without really doing all that we could to make sure that folks were aware of it. At the same time, I want to acknowledge the current environment that hospitals and clinics and substance abuse providers are operating in with the pandemic and the burnout factor they're all facing, and in no way would I say that loan repayment or scholarships are the answer to all of that, but it is a really important tool and one that has been a lifeline, I think, for rural communities over the years. And the amount of funding that is in addition to the regular appropriation is pretty historic in terms of the opportunity it presents. And so I want to remind folks also that the Bureau of Health Workforce a couple years ago made the move to expand the loan or payment program to Critical Access Hospitals.

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I think that was a great development because it recognized that CAHs are primarily outpatient focused entities, and so shared a lot of similarities with all the other entities that tend to benefit from the program. Now, of course, one of the challenges that CAHs faced is that just by virtue of having some providers at the CAH meant that they did not necessarily have a very high HPSA score. And there's been such demand for this program over the years, that during regular years when there's just a general appropriation, the qualifying HPSA score tends to be fairly high.

That meant that many of the CAHs were newly eligible beginning about 10 years ago, or less than that. They really couldn't benefit from this because their clinicians by and large couldn't qualify. Well, that goes away when you get the extra funding. The qualifying HPSA scores, Malissa will explain, went down considerably last year. And this puts the program much more within reach of clinicians who maybe previously were working in a facility that just was still underserved, but wasn't underserved enough given the level of funding and the demand.

I think that what we want to do is make sure that people are aware of this unique funding and this unique time in terms of the opportunity. Today we're here to talk about the National Health Service Corps, and we know that qualifying for loan repayment means you have to be in a shortage area and that you have to comply with the requirements around the sliding fee scale. And those are no easy things. In terms of the HPSA status and whether it's an eligible site or something, that's an important issue in this, but not one I necessarily would say we want to get bogged down in today.

I think the important thing today is really to focus on those folks who are already certified to host a National Health Service Corps scholar, and then really encourage them to consider applying for it. And if you're an association rep or you work with hospitals and clinics, can you help us get the word out? Because we've got till February 3rd to really make sure that folks take advantage of this. And in particular, the rural challenges in terms of workforce recruitment and retention are so great that I'd feel like we weren't doing our job if we didn't do all that we could to make sure that everybody knew it was out there and that they were able to take advantage of it, because these opportunities don't come along too often. But having said that, that's like the short term challenge.

I think the longer term thing we really want to do is to think about what we can do for next year. How do we get more sites qualified to host a National Health Service Corps loan repayment and then how do we make sure everybody that could benefit from this in rural communities is aware of it with enough time in advance so that they can do this, because this window will not last forever and we want to make sure that people are aware of it. And so I think that's the opportunity we have. I don't want to spend a lot of time talking. I think Mike can help put this in context because of the work he does with 3RNET. Malissa and her staff can work through a lot of the nuts and bolts. My main hope was just to really impress upon folks the unique opportunity that we have to make sure that rural gets its fair share of support through the National Health Service Corps program.

And while it won't address all the challenges the clinicians are facing out there, it will address one, and that is the debt burden that many providers have coming out of their training. And so anything you all can do to help us get the word out, anything you can do to convince clinicians to apply, we would greatly appreciate it. The other side effect of this is the more demand that

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we show for it, the more policy makers will understand how important this program is. And maybe we can get to a place where it's not a one-time only opportunity, but is an every year opportunity where the qualifying HPSA score is more attainable for the broad range of providers. So again, thanks for the opportunity, Kris, to get the word out this year, and I'll turn it over to Mike.

### **Mike Shimmens:**

All right. Thank you so much, Tom. And again, I echo your thanks to Kristine for hosting today and also for being on this panel with yourself and Malissa, who I've not met in person yet, but I certainly am looking forward to her presentation as well. Of course, the 3RNET has been deeply involved with the Federal Office of Rural Health Policy and BHW for many, many years dating back to the mid-nineties and have enjoyed that support for all this time, working primarily and deeply with safety net providers throughout the country, primarily rural and underserved. And certainly this relationship is been very much appreciated and grown over the years to a point where we feel this is just a really good point for us. And I think that 3RNET has a mission to serve in this space to really try to reach out and help all rural facilities that are seeking health professionals in every way that we can.

The National Health Service Corps is what I would consider basically a bedrock or basically a program that has to be there. I realize that not everybody has qualified for that over the years. Certainly it has not been for everybody because of the things Tom just described. However, there are periods of time where we have had deeper funding and more reach in that. One of them was about 10 years ago, maybe 12 years ago now with the ARRA funding around 2008 to 2010. If you were working in healthcare and with safety net facilities in that time, you realize that the National Health Service Corps had additional funding at that point and did use that to apply to lower HPSA scores. Matter of fact, I think there were HPSA scores as low as three to zero that were being funded at that time period.

At that time we were also encouraging everybody to apply. Now, since that time, not only has with this additional funding now, the scores are going to be a lot lower on the HPSA side, but also the number of professions has increased greatly when you talk about the breadth of the National Health Service Corps in some of the substance abuse things especially that are going on in these loan repayment programs. So very excited about additional funding for all of the program, especially those newer reaches as well. So appreciate the opportunity to that. I think that all of the 3RNET in our work greatly support the core in anything we can do to make sure that every Rural Health Clinic, every Critical Access Hospital, every treatment center, anybody that has eligible professionals go out there and really push the next three weeks to get that done for this year.

As Tom said, then that cycle will open again to get more sites certified. That is something the corps has been asking us to do for a long time. Many of our primary care offices focus on that year round, but certainly when that window opens, we want to make sure that you understand that this is going to be a unique opportunity. Again, 10 or 12 years ago, so it doesn't happen all the time. So this is a great opportunity to, I think, reach into the health professionals you're working with and use this as a retention tool. As Tom said, it is an unprecedented difficult time right now for health professionals. COVID has put a layer on top of already what was a complicated job and a hard job, and this is just another way say, "Okay, maybe we can use this

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as a retention tool for those that are working for us." The number of health professionals that are dropping out of the labor force is definitely being noted.

We at 3RNET are seeing it. We have an unprecedented number of jobs posted on our site and a very dwindling amount of health professionals coming in looking for them. That is not unique to the country, as we all know, and across a lot of professions, but certainly in health. So every tool that we have, we need to take advantage of, and this is a great tool that I think that we definitely want to take advantage of not only for this immediate cycle, as Tom has described, but also going forward. So with that, I wanted to say I appreciate the opportunity. I do hope that all of view reach out to the communities you work with, the rural markets and employers that you work with, those safety net facilities. Encourage them if they are a qualified site for this year to make sure they look at every health professional that may be qualified that has loans and reach out to try to get them applying for this year.

And then if they are not, certainly know when that cycle opens later this year, that they really need to make sure that they get on that and use every resource they can to get those applications filled out because that will make a big difference in using the corps as what it is, again, which is a bedrock program. It will definitely help you over the long term. Also, it does help you even look at other state programs that are available. Sometimes if you're making yourselves eligible for the National Health Service Corps, it also helps you with your state funding and programs as well. So I'll leave it there.

I know we want to hear from Malissa, who has all the important, good stuff to hear, but I do want appreciate and thank Tom again for having asking me to be here. I'll be around for questions later, of course, if any comes up as well. You can always look at 3RNET on 3RNET.org. That is probably the tool that most people recognize us from. I also want to make sure that I point out, and I'm sure Malissa will cover as well, the workforce connector, health workforce connector at the National Health Service Corps runs and is eligible for. So please use all the tools that you have. You're going to need every one of them. And we appreciate the opportunity to talk to you today. Thanks, Tom.

### **Malissa Lewis:**

All right. Well, thank you everyone for being here today to learn more about the National Health Service Corps loan repayment programs that are available for the FY 2022 application here. My name is Malissa Lewis and I serve as the chief of the loan repayment programs for the National Health Service Corps and the STAR, which is the substance use disorder treatment and recovery loan repayment program. Today, I'm also joined by a few program experts that will assist with answering questions after we get into the details about the loan repayment programs. Next slide, please.

So today we're going to cover some information about the Bureau of Health Workforce, the National Health Service Corps loan repayment programs. And here you see that we have three National Health Service Corps loan repayment programs and a non- National Health Service Corps loan repayment program, which is our substance use disorder treatment and recovery loan repayment program. And then we're going to get into some important reminders. These are generally tips to assist you with successfully submitting your application by the application deadline. Next slide, please.

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So let's talk first about the Bureau of Health Workforce. The Bureau of Health Workforce falls under the health resources and services administration, which is known as HRSA. Our bureau works to improve the health of underserved populations by strengthening the health workforce and connecting skilled professionals to communities in need. About 28% of BHW's funding supports the National Health Service Corps and other programs that improve the distribution of health professionals in underserved areas. Next slide, please.

So let us now do a bit of a highlight about the National Health Service Corps as a program in general. So the National Health Service Corps has both loan repayment and a scholarship program. As I mentioned earlier, we have three loan repayment program, one scholarship program, and a hybrid between our scholarship and the loan repayment program, which is known as our student to service loan repayment program. The National Health Service Corps currently have just under 20,000 NHSC clinicians who care for more than 21 million Americans.

About 60% of the National Health Service Corps clinicians serve in HRSA funded health centers. And almost one in three of our clinicians provide care in rural communities. So this really illustrates the impact that the National Health Service Corps has passed since its inception. We're also happy to announce that we are approaching our 50th anniversary. So this is really a testament of how far we have come as a program and the impact that we continue to make. Next slide, please.

So we will now dive a little deeper into the respective loan repayment programs, starting things off with our traditional loan program, which is known to most as our two year loan repayment program. Next slide, please. So, as I mentioned earlier, we have three National Health Service Corps loan repayment programs. The first is our traditional or two-year loan repayment program, which works to recruit and retain medical, dental, and mental behavioral health clinicians in underserved areas.

The second program is our National Health Service Corps substance use disorder workforce loan repayment program. Now this program is relatively new. It was launched in FY 2019, and it works to recruit and retain medical, nursing, and behavioral mental health clinicians to provide evidence-based substance use disorder treatment and counseling in underserved areas.

The third program is our National Health Service Corps rural community loan repayment program. Now this program is also relatively new and is one of our substance use disorder workforce loan repayment program that was launched in fiscal year 2019. It was launched in collaboration with our Federal Office of Rural Health Policy, and it works to recruit and retain medical, nursing, and behavioral mental health clinicians to provide evidence-based substance use disorder treatment and counseling specifically in rural underserved units. Next slide, please.

Now here we do want to highlight our FY 2021 National Health Service Corps loan repayment program applications and awards that remain. Now in listening to both Mike and Tom, you would've heard that in fiscal year 2021, as a result with the additional funding that we received, we were able to actually fund all eligible loan repayment applicants. So everyone who submitted an eligible application that was reviewed and determined to be eligible for an award received that award. From our traditional two year loan repayment program, we received an excess of 5,900 applications, and we awarded 5,050 clinicians who were deemed to be eligible.

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From our substance use disorder workforce loan repayment program, we received 1,091 applications and made 900 awards. From the rural community loan repayment program, we received 690 applications and made 603 awards. So I really want to pause here on our rural community loan repayment program, because from this data we dissected from fiscal year 2019 to present, to really get an idea of the trends that we were seeing in the rural community loan repayment program.

And one thing that we have seen and are very happy about is the constant increase in applications that came from our rural clinicians. So we highly encourage everyone who is on the call, who knows of someone who would like to apply for our rural community loan repayment program, who may not have yet started an application or have an application in progress, please consider applying. We have some great trends in the rural community loan repayment program. We definitely want keep that up for a fiscal year 2022.

The fourth program that's highlighted here is our substance use disorder workforce loan repayment program. Now this was a brand new program that was launched in fiscal year 2021. As you can see here, it was highly competitive. We received over 3,100 applications, and as a result of the funding that was available, we were able to make 255 awards. So again, we use this slide to show a snapshot of the FY 2021 applications that we received and the number of awards that we made based on those applications. Next slide, please.

Now I want to go over the general eligibility requirements for our National Health Service Corps loan repayment programs. So for the three programs that we will be discussing, just keep in mind that these are the general eligibility for those three specific programs. So first you must be a United States citizen or national who is currently working or have applied to work at a National Health Service Corps approved site. You must have unpaid government or commercial educational loans and are licensed to practice in the state in which your employer is located.

You must also be a licensed clinician in one of the eligible disciplines that is listed here. Now I'm not going to read all of the disciplines, but I will highlight a few. So some of the eligible disciplines that are eligible for our two-year loan repayment program, the substance use disorder workforce loan repayment program, or our rural community loan repayment program are physicians, nurse practitioners. We do have our registered dental hygienists, licensed clinical social workers, substance use disorder counselors, and specific to our rural community loan repayment program are the nurse anesthetists.

So if you are one of any of these disciplines noted here, you would be eligible to apply to one of our national service for loan repayment programs. I do want to add that there are some disciplines that are excluded from the respective programs, but I will get into that as we go through the remainder of the slides. Next slide, please. So we will now do a deeper dive into our original loan repayment program, and just give you an idea of the funding limits and how we work with the HPSAs regarding that program. Next slide, please.

So for our traditional loan repayment program, there is up to \$50,000 in loan repayment award for two years of full-time service commitment. Now, with this specific program, we measure need by the HPSA score of the site in which you are working, that you will apply with your application. So the higher the HPSA score, the higher the need. So for example, if you are at a

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site with a HPSA score of 25, that area will be considered to have a higher need than a site with a HPSA score of three. However, we do want to iterate that due to the increase in funding that the National Health Service Corps received, regardless of whether you are working at a site with a HPSA of 26 or 25, or at a site where a HPSA of three or two, you will receive an award as long as your application is deemed eligible for that award.

To also confirm, in fiscal year 2021, we were actually able to fund clinicians who were working at a site with a HPSA score of three. That is the lowest HPSA score that we receive in the FY 2021 application pool. And as a result of the additional funding, we were able to award those commissions. So please, if you are working at a site that may not have been competitive in prior years because the HPSA score may have been lower than a 14 or so on, we do encourage you to apply for fiscal year 2022. You will be in range for an award given the additional funding. Next slide, please.

The next program that I'm going to provide a bit more details on is our substance use disorder workforce loan repayment program. Next slide, please. So this program awards up to \$75,000 for three years of full-time service commitments. Applicants to this program must be trained and licensed to provide substance use disorder treatment at NHSC substance use disorder treatment facilities. One of the things that I want to highlight here is that dentists and dental hygienists are not eligible for this program. However, dental and dental hygienists can consider applying to our traditional two-year loan repayment program. Next slide, please.

And the third National Health Service Corps program is our rural community loan repayment program. Next slide, please. Now this program awards up to \$100,000 for three years of full-time service commitments. Similar to our substance use disorder workforce loan repayment program, applicants must be trained and licensed to provide substance use disorder treatment at a national health service for approved rural substance use disorder treatment facility.

Additionally, similar to our substance use disorder workforce loan repayment program, dentists and dental hygienists are not eligible to apply to rural community loan repayment program. Another fact that I want to highlight about this program is that if you are a clinician working at a site that is considered a consortium of our Federal Office of Rural Health Policy on a grantee over our Federal Office of Rural Health Policy, you are in line for funding priority. All clinicians who apply to our rural community loan repayment program and are working at a grantee or a consortium member of the Federal Office of Rural Health Policy will receive funding priority. Next slide, please.

So before I wrap up the program specific details of our loan repayment programs under the National Health Service Corps, I do want to take an opportunity to just go over a snapshot of the comparison of these programs. So if you are considering applying and you're not quite sure which program I want to apply to, or which program I'm eligible for based on my specific discipline, this slide gives you that snapshot of information to make you make that decision. So you're going to see here that we have the three loan repayment programs that you can apply to for FY 2022.

The disciplines that are eligible for all three programs are listed in the second row of this chart. And then from there, you can see the discipline specifics to the respective program. So for

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example, as I mentioned earlier, dentists and registered dental hygienists can only apply to our two-year loan repayment program. Substance use disorder counselors, pharmacists, and registered nurses are eligible to apply to both our substance use disorder workforce loan repayment program and the rural community loan repayment program. However, they're not eligible to apply to our traditional two-year program.

Our certified registered nurse anesthetists are eligible to apply to our rural community loan repayment program, but they're not eligible to apply to either substance use disorder workforce loan repayment program, neither our two year loan repayment program. So those are a few nuances that we should keep in mind. The award amounts are also listed here. But one thing that I want to highlight for the award amounts is that you can either do a full-time service commitment or a part-time service commitment. And the award limits are noted here based on the contract site that you need to select.

The service commitment is either a two-year service commitment or a three-year service commitment. And then last but not least, the type of site that you must be working at based on the program that you select within your application. So please use this as a big snapshot that gives you the program eligibility for the respective programs under the National Health Service Corps. Next slide, please.

All right. So application tips and reminders. We encourage everyone to please submit your applications by Thursday, February 3rd, 2022, 7:30 Eastern Standard Time. You must include all required documentation in your application. Please make sure that your loan information includes your name, account number, loan balance, and interest rate information. It's also very, very important that you coordinate with your site point of contacts to ensure that they complete the required employment verification before the application submission deadline, because you will not be able to submit your application until your employer verifies the employment. You should also unlock or unfreeze your credit reports because we will use this to confirm your outstanding educational balance. Next slide, please.

We also want to highlight that we do have some additional application help that in the very near future, we have all day online question and answer sessions that starts from 9:00 AM and runs through 5:00 PM on the days that are noted here, January 14th, the 18th and February 1st. And during these sessions, really have an opportunity to log in using a customized Zoom link and chat one on one with National Health Service Corps staff members who will be on standby to assist with all the questions that you have that can assist with submitting your applications. Next slide, please.

This is my contact information. You can also connect with us through the customer care center, Monday through Friday, 8:00 AM to 8:00 PM, except federal holidays. You can also connect with NHSC via the web at [NHSC.HRSA.gov](https://www.nhsc.hrsa.gov). We also have our virtual job fair that you can get information on that is noted here. We also have a health workforce connector that Mike mentioned earlier, and this is where you can really go and get an idea of the approved and active National Health Service Corps sites and open positions that are available at these sites. Through our health workforce connector, you can also create the participant profile where you can include information about your profession, and also look at our site profiles as well on the

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health workforce connector. You can also connect with us via social media, Facebook, Twitter, and LinkedIn. Next slide, please.

And that brings me to the end of my overview of the National Health Service Corps loan repayment opportunities that are available for FY 2021. Before we take questions, I do want to go over some key points. Just a reminder that the application deadline is February 3rd, 2022, 7:30 PM Eastern time. Please utilize all of billable resources, including our all day TA sessions that are upcoming, so that you can have your additional questions answered so that you're able to submit your application by the respected deadline. Thank you all for your time today and we can now take questions.

**Kristine Sande:** Great, and thank you to all of our speakers. And at this time we will open the webinar up for questions. So the first question is you mentioned there may be another window to apply this year. When would that be?

**Malissa Lewis:** Thank you for that question. So that will be our FY 2023 application cycle that we anticipate to launch, I believe, the fall of 2022. Actual dates have not yet been finalized. So if anyone is interested in the FY 2023 application cycle, we encourage them to sign up for alerts on our website at [NHSC.HRSA.gov](https://www.nhsc.hrsa.gov).

**Kristine Sande:** How is the HSPA score calculated?

**Tom Morris:** I think for the purpose of this discussion, it's a provider to patient ratio, and there's some other factors in there. I think the best thing to do, if you're curious about your own HSPA score is contact your state primary care office. And there's a locator on the BHW website that will link you to your particular state's primary care office. They would be able to talk in detail about it. We could also follow up offline on it.

**Kristine Sande:** How do you know if you are a National Health Service Corps approved site?

**Malissa Lewis:** So to determine if you are a National Health Service Corps approved site, that might be first and foremost, encourage you to look on the health workforce connector. That will be able to tell you whether the site is active. And I believe the link for that is in our slides. So that will definitely be the first step. You can also contact your state primary care office, and they can give you information as well, if your site is not approved, how to go about the approval process.

**Kristine Sande:** What is the difference between SUD and rural LRP since both have to be approved SUDs?

**Malissa Lewis:** That's a great question because they're both set programs. So the substance use disorder workforce loan repayment program, so there are nuances there. So the award among, of course, [inaudible 00:34:42] right, so one offers 75,000 for payment service commitment while the other offers, or the rural community loan repayment program offers \$100,000 for a three-year service commitment. In terms of the eligible disciplines, the rural community does have an additional discipline expansion that is eligible for that program, which is our nurse anesthetist that are not eligible for our substance use disorder workforce loan repayment program.

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The other difference is that for rural community loan repayment program, you have to be working at a rural substance use disorder facility. And that facility, a rural designation is determined by the RUCA code. So for a substance use disorder workforce loan repayment program, there's no rural qualifier along the site that is applicable to the rural community program. The full difference is that in terms of the funding priority that is leveraged for the rural community loan repayment program. So anyone who's working at a consortium member site that received a grant from the Federal Office of Rural Health Policy, those clinicians receive funding priority. They are first priority for the rural community loan repayment program.

That funding priority does not apply to our substance use disorder workforce loan repayment program. So those are the four main areas of differences between the two separate programs.

**Kristine Sande:** Next question is, is there a limit on how many clinicians can apply at a specific site?

**Malissa Lewis:** No, absolutely no limit. If you are working at a site with all clinicians that are eligible, we highly anticipate that everyone submits an application.

**Kristine Sande:** So there's a question about what is the official definition of rural. I would say that there's many official definitions of rural, but for this particular program, is there an official definition of rural?

**Malissa Lewis:** So interesting question. I think from the perspective of the National Health Service Corps, we use the RUCA code to determine the rural designation of the sites that are eligible for our rural community when we came in program. But if we had to give an official definition for rural, we will adopt a definition that our Federal Office of Rural Health Policy.

**Tom Morris:** The only thing I would add, this is Tom, is for the purpose of national service core, the rural urban designation, it really only matters in the context of how we look at the data. You're eligible to apply the core, whether in an urban or rural area. And so it's really a national program. It's just that it's particularly important in rural communities given longstanding workforce recruitment and retention challenges.

**Kristine Sande:** It looks like there are a couple questions here regarding becoming a qualified site. One about how to receive more information about that process and another about when does the application cycle open to become a site?

**Malissa Lewis:** Sure, and that might be better to rely on my colleagues from the division of external affairs as well for some additional information in the site application cycle, but in order to become a National Health Service Corps approved site that might initiate that request, you can initiate that request through our website. So there's lots of information on the loan repayment website about becoming a National Health Service Corps approved site. Now, if your site is not yet approved, there is very unlikely that you will be able to apply to the FY 2022 application cycle. I do believe that there is a site application cycle that's scheduled for spring of this year, but I'm not 100% sure about that. So I think this might be referred to my colleagues in the division of external affairs, who are on the line to potentially confirm this.

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- Tom Morris:** And I'd ask my BHW colleagues. Isn't it around March that the window opens for new site applications? So just to put a finer point on that, we'd like to really help people work through that. So part of it, you got to make sure you know what your HPSA status is. And then the other part of it is complying with the sliding fee scale. For community health centers, that's easy. It's baked into what they do, but for other providers, you're going to have to make sure that you meet those requirements, and there's some interplay. Obviously, if you already have an existing charity policy, you just have to find a way to align those.
- The folks at BHW have a fair amount of resources that can help walk you through that. And then they also have field staff that can work with you on particulars to make sure that that's not a barrier.
- Kristine Sande:** So there is a question that says, "Would you suggest that the clinician apply versus the organization?" And so just to clarify, both need to apply. The site has to apply to be an approved site, and the clinician needs to apply separately, correct?
- Malissa Lewis:** Yes. So the site has to apply to become an approved site, and then the clinician would apply specifically for one of the loan repayment programs.
- Kristine Sande:** Is there an average amount of time that it takes clinicians to complete and submit an application?
- Malissa Lewis:** So it takes an average about three weeks to complete an application. And of course it depends on how much time the clinician commits to actually getting the application submitted. We've seen some clinicians who literally sat down in one day and had their application submitted within 24 hours of starting. And then we see some individuals who've taken the maximum three weeks or even longer. So it really depends on the amount of time that the commission commits to actually having their applications completed and submitted.
- Kristine Sande:** So if the facility was not previously approved as a National Health Service Corps site, is it too late for the facility to apply now? So they'd have to wait till the next cycle?
- Malissa Lewis:** Yes, it would be too late for the facility to apply at this very moment. So they will have to wait for the next open cycle for new site applications, which I believe will be in spring of 2022.
- Kristine Sande:** And then can universities be an approved site?
- Malissa Lewis:** So for purposes of the National Health Service Corps, I do believe that universities can be an approved site as long as they have the outpatient clinics that are attached to their respective universities, and the clinicians that are working there are providing the primary care services in an outpatient capacity. Now, we do have university hospitals that apply to the NHSC sites. As long as they need the general site eligibility criteria, they can be approved, but just know for National Health Service Corps, inpatient facilities are not eligible. So if these universities are applying within university hospitals inpatient only, they definitely would not be eligible.

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- Kristine Sande:** And are Critical Access Hospitals automatically approved sites at this point? And what about Rural Health Clinics?
- Malissa Lewis:** So it's a lot of site questions that I'm definitely not an expert on. I believe we do have a provision for our rural health clinics to have approval while the application cycle is open. I can definitely provide additional information on that if I do my research and get my division of regional operations colleague to confirm that. I believe the other one was critical health?
- Tom Morris:** I can help answer that one, it is Critical Access Hospitals and they are they're eligible, but they have to apply to be approved as a site. They don't get automatic approval. The RHCs and FQHCs, they qualify for facility designation just by virtue of their designation. CAHs are like other sites. They would have to come in and be approved as a site. And then once approved, a clinician in that Critical Access Hospital would be eligible for loan repayment.
- Kristine Sande:** Maybe one last question. So if universities are working with residency programs, is loan repayment available to the resident?
- Malissa Lewis:** For purposes of the National Health Service Corps loan repayment programs, we only award fully licensed health professionals. So you would've had to complete with your education and training in this case, residency or fellowship training, before you're eligible for the loan repayment program. However, we do have our student to service loan repayment program that do recruit clinicians who are in the last year of training, entering into residency in order to participate in that program. So it's a hybrid between our loan repayment. Sorry, it's a hybrid between our scholarship and the loan payment program where you have to be in the last year of your educational training.
- Dentist, doctors, nurse practitioners, I believe certified nurse midwives are not eligible for the student to service loan repayment program. So as long as you're in the last year of school, you can apply for that program. Some clinicians are required, such as our medical doctors, are required to complete residency training. Other clinicians can go straight to service. So there is one program that we currently have that can accommodate residents for loan repayment.
- Kristine Sande:** Looking over at the chat, it looks like maybe there's some confusion still about the Rural Health Clinic eligibility for the program. So, Tom, did you want to verbally say what you just typed?
- Tom Morris:** Again, I defer to the BHW, of course. I mean, I think you get a facility HPSA, which I think the facility HPSA qualifies you, but it leaves you with a score of zero, unless you submit additional data to show the degree of under service. So what I've always told people is even if you have a facility HPSA, go ahead and work with your PCO. See if you're in a full county, a partial, low income HPSA, because you'll get points with each of those. And the more points you have, the more underserved you are, the more likely you are to qualify.
- Kristine Sande:** So, one very last question. So it says, "My hospital is an approved site and operates other Rural Health Clinics. Does the hospitals recognition cover the Rural Health Clinics?"

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- Malissa Lewis:** Each facility, whether you're part of a parent company or not, would have to be identified as an approved site in our database. So the hospital that's already approved would have to add the other organizations or clinics that they are associated with in order for those other clinics to receive approval through the National Health Service Corps. So it's not automatic where if the parent company or the hospital in this case is approved, that all clinics affiliated with that hospital will receive ... are automatically approved. Those sites still have to be identified in our database as an approved site.
- Tom Morris:** Kristine, just thank you for hosting on short notice. We just came to you about a week ago to ask for this and really appreciate it. And the BHW folks for all of them getting on and doing this. I think the next phase for us is to really start thinking about what we can do to help you, if you want to become an eligible site. And then I think we'll start earlier next year and really doing some rural specific promotion for once the cycle opens up again so that people have more time to put their applications together.
- Mike Shimmens:** Kristine, I want to thank you also and just tell you that I greatly appreciate the opportunity here. And I think the takeaway from here is there are a lot of resources to help answer these questions and encourage you to really find out in your own specific way how it applies to your particular facility or healthcare organization because speaking as a former in-house recruiter, too, before this job, I was an in-house recruiter for a hospital and understanding the National Health Service Corps, and that was over 20 years ago, could be a little bit cumbersome or hard.
- I think there's a lot more connectivity now than there ever has been, including the folks on the webinar here today. Between your primary care offices, the folks at the federal office and also just 3RNET members and other folks that are out there, there is a lot of information you can gather to make sure you get the straight stories. So just be persistent, get the answers that you need, because you do want to your health professionals access these programs and it's worth your time and investment to do that. So thanks again. Appreciate the opportunity.