

Federal and State Loan Repayment Programs

MI RHC Network

November 15th, 2023



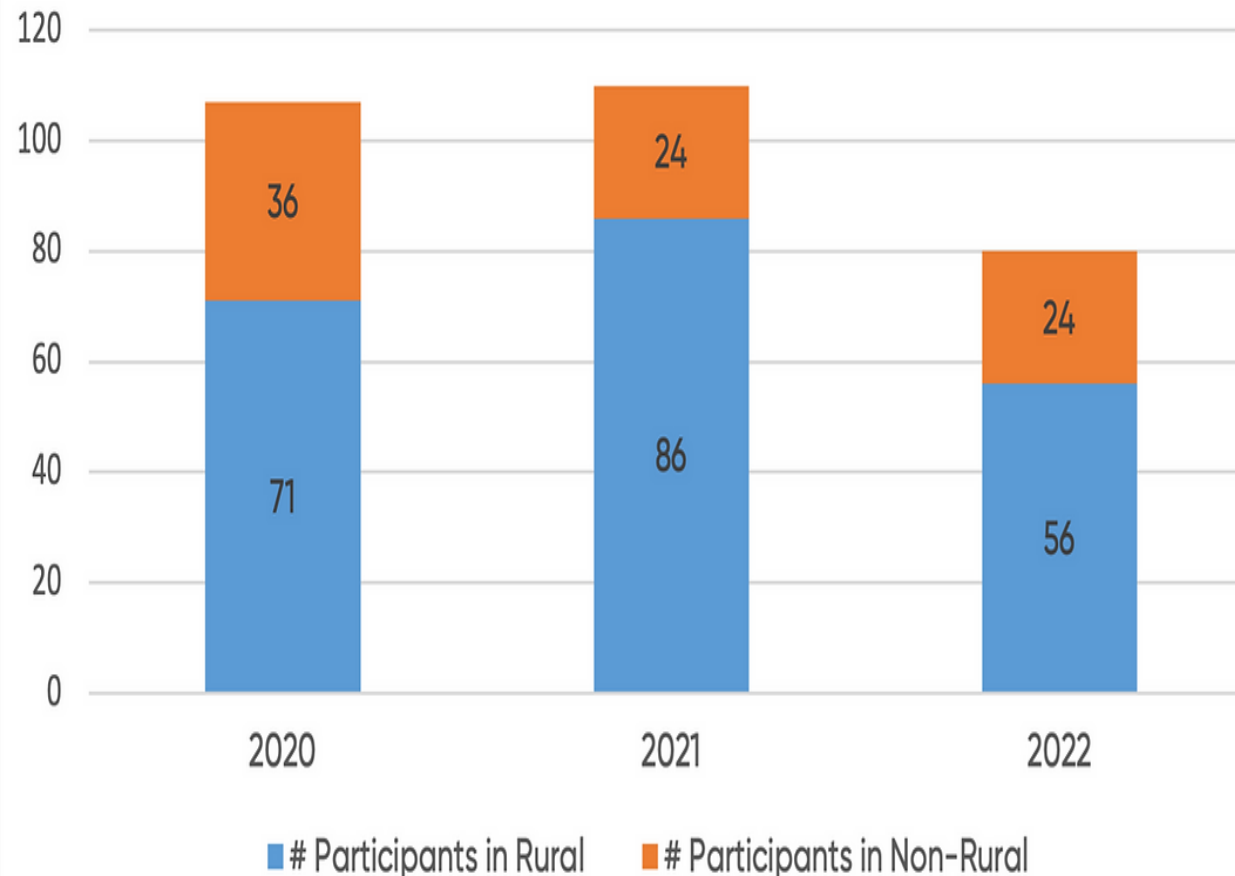
Benefits of Participating in LRP

Equally distributes healthcare providers in rural areas.

Between FY 2020 - FY 2022, an average of 72% of participants worked at rural practice sites (MDHHS, 2023).

About 50% of NHSC participants in MI work in rural (HRSA.gov).

Practice Site Locations by Geography of MSLRP Participants Between 2020 - 2022



A great recruitment and retention tool.

Many individuals that participate in either of the LRPs stay in that organization or work in a HPSA after their contract has ended.

Increase access to primary care and behavioral health services.

[Michigan Center for Rural Health](#) > [Programs](#) > [Workforce](#) > [National Health Services Corps](#)

National Health Services Corps (NHSC) Site Application Process

Retaining and recruiting can be challenging, especially in a tight labor market. Being a National Health Service Corps (NHSC) site, can help with recruitment. As an NHSC-approved site, loan repayment assistance can help to improve future employees' financial health that can impact not only recruiting of health professionals, but employee retention as well. How does a site though become an NHSC site? At MCRH, we have created presentations and PDFs for each section of the NHSC Site Application. Please review the resources of the below recordings before applying to be an NHSC Site.

ELIGIBILITY REQUIREMENTS AND QUALIFICATION FACTORS

ELIGIBLE SITE TYPES FOR NATIONAL HEALTH SERVICE CORPS APPROVAL

The following types of sites may be eligible to become a National Health Service Corps-approved site (see the ["Glossary"](#) section for complete descriptions of site types).

Auto-Approved Sites	Other Eligible Sites
Site types listed below must submit a site application for new sites. They are not required to apply during the Site Application Cycles, or to recertify every three (3) years. New sites may apply at any point during the year*	Site types listed below must submit a site application during the New Site Application cycles and recertify every three (3) years.
<ol style="list-style-type: none">1) Federally Qualified Health Centers2) Federally Qualified Health Center Look-Alikes3) Indian Health Service Facilities, Tribally Operated 638 Health Programs, Dual-Funded (Tribal Health Clinic and Federally Qualified Health Center 330 Funded), Urban Indian Health Programs and Indian Health Hospitals4) Federal Prisons5) Immigration and Customs Enforcement Health Service Corps Facilities	<ol style="list-style-type: none">1) State Prisons2) Centers for Medicare and Medicaid Services Certified Rural Health Clinics3) Critical Access Hospitals4) Community Mental Health Centers5) State or Local Health Departments6) Community Outpatient Facilities7) Private Practices8) School-Based Clinics (<i>that are not affiliated with a Federally Qualified Health Center or Look-Alike</i>)9) Mobile Units (<i>that are not affiliated with a Federally Qualified Health Center or Look-Alike</i>)10) Free Clinics11) Substance Use Disorder Treatment Facilities

* National Health Service Corps auto-approval is not guaranteed, and comprehensive primary care sites seeking auto-approval must submit a site application to determine eligibility and participate in the National Health Service Corps as an approved service site.



National Health Service Corps-approved sites must:

- Be located in and treat patients from a federally designated **Health Professional Shortage Area**.
- Have a designated Health Professional Shortage Area for the specific category in which a National Health Service Corps clinician would serve.
 - For example, a National Health Service Corps-approved site would need to have a primary care shortage designation to recruit an internal medicine physician, a mental health shortage designation to recruit a psychiatrist, a dental shortage designation to recruit a dentist.
 - Sites providing Substance Use Disorder services may use either a primary care or mental health shortage designation for the purpose of the National Health Service Corps Substance Use Disorder Workforce Loan Repayment Program and the National Health Service Corps Rural Community Loan Repayment Program, even if they do not provide primary medical care.

Contact your [state/territorial Primary Care Office](#) when applying for, or inquiring about, a Health Professional Shortage Area designation. For more information about shortage areas, including scoring, visit the [Health Resources and Services Administration Shortage Designation webpage](#).

SLIDING FEE DISCOUNT PROGRAM

Your site must use a Sliding Fee Discount Program to ensure patients have access to all primary care services regardless of their ability to pay. Eligibility for your Sliding Fee Discount Program must be:

- *Based solely on family size and income; and*
- *At a minimum, applicable to all individuals and families with annual incomes at or below 200 % of the most current [Federal Poverty Guidelines](#).*

The components of your Sliding Fee Discount Program for National Health Service Corps-approved sites must include a Sliding Fee Discount Program policy, a patient application, a sliding fee schedule, and posted signage. **Your site should have a Sliding Fee Discount Program in place for at least six consecutive months before applying** to become a National Health Service Corps-approved site and continuously thereafter.





Sliding Fee Scale Discount Guide for CAHs and RHCs

<https://www.ruralcenter.org/resources/sliding-fee-scale-discount-guide-cahs-and-rhcs>



APPENDIX D: NATIONAL HEALTH SERVICE CORPS SITE DATA TABLES

Site Name _____

Site Address _____

Date Prepared _____

Prepared By _____

6-Month Reporting Period (from mm/yy to mm/yy): ____/____/____ - ____/____/____

Total Patients: _____

Total Patient Visits: _____

TABLE 1: PATIENTS AND VISITS BY PRIMARY INSURANCE TYPE

Complete data for “Number of Patients” AND “Number of Patient Visits”

Primary Insurance	Number of Patients	Percentage (Patients)	Number of Patient Visits	Percentage (Visits)
1) Medicare		0%		0%
2) Medicaid		0%		0%
3) Other Public/Private Funds		0%		0%
4) Private Insurance		0%		0%
5) Sliding Fee Schedule (SFS)		0%		0%
6) Self-Pay (No Insurance and not on SFS)		0%		0%
7) Total		100%		100%



APPENDIX C: SAMPLE SLIDING FEE SCHEDULE

Maximum Annual Income Amounts for each Sliding Fee Percentage Category (except for 0% discount)

Poverty Level	100%	110%	120%	130%	140%	150%	160%	170%	180%	190%	200%	>200%
Family Size	Discount 100%	Discount 90%	Discount 80%	Discount 70%	Discount 60%	Discount 50%	Discount 40%	Discount 30%	Discount 20%	Discount 15%	Discount 10%	Discount 0%
1	\$14,580	\$16,038	\$17,496	\$18,954	\$20,412	\$21,870	\$23,328	\$24,786	\$26,244	\$27,702	\$29,160	>\$29,160
2	\$19,720	\$21,692	\$23,664	\$25,636	\$27,608	\$29,580	\$31,552	\$33,524	\$35,496	\$37,468	\$39,440	>\$39,440
3	\$24,860	\$27,346	\$29,832	\$32,318	\$34,804	\$37,290	\$39,776	\$42,262	\$44,748	\$47,234	\$49,720	>\$49,720
4	\$30,000	\$33,000	\$36,000	\$39,000	\$42,000	\$45,000	\$48,000	\$51,000	\$54,000	\$57,000	\$60,000	>\$60,000
5	\$35,140	\$38,654	\$42,168	\$45,682	\$49,196	\$52,710	\$56,224	\$59,738	\$63,252	\$66,766	\$70,280	>\$70,280
6	\$40,280	\$44,308	\$48,336	\$52,364	\$56,392	\$60,420	\$64,448	\$68,476	\$72,504	\$76,532	\$80,560	>\$80,560
7	\$45,420	\$49,962	\$54,504	\$59,046	\$63,588	\$68,130	\$72,672	\$77,214	\$81,756	\$86,298	\$90,840	>\$90,840
8	\$50,560	\$55,616	\$60,672	\$65,728	\$70,784	\$75,840	\$80,896	\$85,952	\$91,008	\$96,064	\$101,120	>\$101,120
For each additional person, add	\$5,140	\$5,654	\$6,168	\$6,682	\$7,196	\$7,710	\$8,224	\$8,738	\$9,252	\$9,766	\$10,280	>\$10,280

*Based on the 2023 [Federal Poverty Guidelines](#) for the 48 contiguous states and the District of Columbia. Please note that there are separate guidelines for Alaska and Hawaii, and that the thresholds would differ for sites in those two states. Sites in Puerto Rico and other outlying jurisdictions would use the above guidelines.



APPENDIX B: SAMPLE NATIONAL HEALTH SERVICE CORPS PUBLIC NOTICE SIGNAGE

National Health Service Corps-approved service sites are required to inform patients of the Sliding Fee Discount Program. The following example illustrates language to be posted prominently online and at the physical site. The National Health Service Corps encourages sites to establish multiple methods of informing patients. Sites can obtain more information by accessing the [Current Member Sites page](#) on the National Health Service Corps website.

Public Notice Signage Example

NOTICE TO PATIENTS:

This practice serves all patients regardless of ability to pay.

Discounts for essential services are offered based on family size and income.

For more information, ask at the front desk or visit our website.

Thank you.

AVISO PARA PACIENTES:

Esta práctica atiende a todos los pacientes independientemente de su capacidad de pago.

Se ofrecen descuentos para servicios esenciales según el tamaño de la familia y los ingresos.

Para más información, pregunte en la recepción o visite nuestro sitio web.

[REDACTED] Healthcare provides quality medical care 24 hours a day, seven days a week in response to the diverse medical needs of the communities it serves.

No one will be denied access to services due to their inability to pay, and there is a discounted/sliding fee schedule based on family size and income. Our staff will confidentially work with you to help you obtain financial assistance or coordinate a convenient payment plan.

If you have not completed the Financial Assistance Application, [click here to open our Financial Assistance Application](#) to print the application form. You can also apply and upload documents for financial assistance directly through MyChart. However, completed applications can be sent to the following:



APPENDIX G: SAMPLE PATIENT NON-DISCRIMINATION POLICY

Site ABC will not discriminate in the provision of health care services to an individual:

1. Because the individual is unable to pay for the health care services;
2. Because payment for those services would be made under Medicare, Medicaid, or the Children's Health Insurance Program (CHIP); or
3. Based upon the individual's race, color, sex, age, national origin, disability, religion, gender identity or sexual orientation.

APPENDIX H: SAMPLE CLINICAL RECRUITMENT AND RETENTION PLAN

Recruitment Policy

Site ABC will recruit clinical staff needed to appropriately serve the community.

Recruitment Processes

1. *Enter your top 1 recruitment process/strategy*
2. *Enter your top 2 recruitment process/strategy*
3. *Enter your top 3 recruitment process/strategy*
4. *Enter your top 4 recruitment process/strategy*

Retention Policy

Site ABC will maintain clinical staffing levels needed to appropriately serve the community.

Retention Processes

1. *Enter your top 1 retention process/strategy*
2. *Enter your top 2 retention process/strategy*
3. *Enter your top 3 retention process/strategy*
4. *Enter your top 4 retention process/strategy*

Strategies aimed at promoting clinician resiliency and reducing burnout

- *Enter your top 1 process/strategy aimed at promoting clinician resiliency and reducing burnout*
- *Enter your top 2 process/strategy aimed at promoting clinician resiliency and reducing burnout*
- *Enter your top 3 process/strategy aimed at promoting clinician resiliency and reducing burnout*



COMPREHENSIVE PRIMARY CARE

Your site must provide comprehensive primary care (medical, dental, and/or mental/behavioral), which correspond to its designated Health Professional Shortage Area type. The National Health Service Corps defines comprehensive primary care as a continuum of care not focused or limited to gender identity, organ system, a particular illness, or categorical population (e.g., developmentally disabled or those with cancer). Your site must also function as part of a system of care that either offers or ensures access to ancillary, inpatient, and specialty referrals.

With the exception of Substance Use Disorder treatment facilities, if your site does not offer all primary care services, it must provide an appropriate set of primary care services necessary for the community or populations you serve. For example, a site serving a senior population must provide geriatric primary care services.



COMPREHENSIVE PRIMARY BEHAVIORAL HEALTH SERVICES

Facilities offering comprehensive primary behavioral health services must be located in and serve their mental health designated Health Professional Shortage Area.

Your behavioral health service site should:

- Provide core comprehensive behavioral health services *on-site*, which include:
 - Screening and assessment
 - Treatment plan
 - Care coordination
- Offer non-core comprehensive behavioral health services either *on-site*, *in-network*, or *off-site*, through referral, affiliation, or contract, which include:
 - Diagnosis
 - Therapeutic services
 - Crisis/emergency services
 - Consultative services
 - Case management

MSLRP

Practice sites must:

- Be located in a designated HPSA or have a HPSA facility designation
 - This information can be found on the HPSA-Find website <https://data.hrsa.gov/tools/shortage-area>
- Have a Sliding Fee Schedule based on Federal Poverty Guidelines
- Have a Sliding Fee Schedule Policy
- Be a Nonprofit Site
- Employer Contributions: The contribution requirement for nonprofit employers is 20 percent of their providers' agreement amounts. For-profit employers placing providers in nonprofit practice sites, such as state prisons, contribute 50 percent.
- Cannot use federal funds on loan repayment.

<https://www.michigan.gov/mdhhs/doing-business/providers/slrp/4--funding-and-loan-repayment-agreements>



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