

**DISCLAIMER:** *This is a computer-generated transcript. The below transcript may not accurately capture everything said on the webinar. This transcript is not official Department of Health and Human Services guidance.*

**7/7/20 Update:** We would like to clarify the information about HPSA scores and site applications as presented in the June 30 NHSC New Site Application webinar. Slide #16 stated that, "Applicant site must have a HPSA designation as of the first day of the NHSC Site Application Cycle." This is true for the majority of sites. However, as of this year, the process for Rural Health Clinic automatic HPSA designation has changed. In these cases, RHCs must obtain their NHSC site application approval before the Bureau of Health Workforce Division of Policy and Shortage Designation will designate an auto-HPSA score. Thus, an RHC NHSC site application that meets all site requirements, other than the needed HPSA, can be submitted. For specific questions, RHCs can check in with their State PCO (<https://bhw.hrsa.gov/shortage-designation/hpsa/primary-care-offices>) and/or Division of Regional Operations State Leads (<https://nhsc.hrsa.gov/nhsc-sites/contacts/regional-offices-state-contacts.html>).

## ***NHSC New Site Application Webinar for Rural Health Clinics***

***Nathan Baugh:***

0:04

We, I have to apologize. That was my fault. I didn't start the recording for folks.

0:13

OK, so they are now just hearing us I'm going to do an abbreviated intro and go back, no path, thank you all. Sorry for the, the problematic audio.

0:29

Thank you for joining our webinar today. I'm gonna go abbreviated on the introduction here.

0:35

This is the National Health Service Corps News site application Webinar for rural health clinics. And our speaker is Michelle Stewart with HRSA and in the interest of time, I'm going to let her get back to her presentation right away.

***Michelle Stewart:***

0:53

It's no problem. Hello, everyone, and I hope that you find this webinar informative today. Nathan gave a bit of an intro that none of you heard. Some of this, briefly say, I am a Public Health Analyst within the Bureau of Health Workforce, the Division of Regional Operations. And I work in Chicago, Illinois, and the Minnesota State Lead, and I'm responsible for working with eligible healthcare sites and clinicians to increase access to primary health care services in the underserved communities, what the State of Minnesota. Next slide.

1:26

The Division of Regional Operations. We have 10 regional offices located throughout the United States.

1:35

My office, Chicago, is a region five. Region five consists of six states, which is Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin, on the map that you see in front of you.

1:47

Those are various regional offices, and it lists the major cities that they are located, and specifically, the Division of Regional Operation supports the mission of HRSA NBA Stubby by conducting site visits, and provide technical assistance to the HSE sites in participants by supporting recruitment and retention of primary care.

2:09

Clinicians in the underserved areas, including placement of the NHS, seek the nurse Corps scholars, and students to surface participants by reviewing in HSE site applications and site recertification applications, by promoting the BH W programs, and by building partnerships and collaborations with local tribal Indian Health Service, state, national, and federal stakeholders.

2:37

Next slide, please.

2:40

The National Health Service Corps builds Healthy communities by supporting the quality health care providers dedicated to serving in the Health Professional Shortage Areas within three disciplines, which is primary care, dental, and mental and behavioral health.

2:59

The programs adapt to meeting the evolving public health niche by addressing those health shortages by incentives supervising service in these areas were clinician. Supply is limited.

3:13

And we also support qualify clinicians providing quality healthcare in these high need areas. So the NHS is an integral part of beech Ws planing to overcome, obstacles, to access, and to supply, and distribution, and quality of primary health.

3:32

So, as you see from this particular slide, we improve the access to these critical services, and it's in Exchange, the clinician applies for the Loan Repayment or Scholarship Program.

3:44

And then how they is they come to work at your clinic.

3:48

Next slide.

3:50

The approved NHS these sites.

3:53

We have sites through our 50 states, including Puerto Rico, the Virgin Islands, a Y, and the specific territory, the Pacific Territories. So our NHS these sites, the clinicians, that to apply to the program, could work throughout the nation. They can work at, of course, primary care sites,

It can work at dental science, they can work in private practices. And I'll talk about them a little bit later. And they can work at mental and behavioral health sites.

4:28

The facilities themselves are in rural towns, are in urban cities, and are in tribal communities. But your role as a site is that you have to apply to become NHS to your approved sites in order for those clinicians to work at those.

4:48

Next slide.

4:50

So you're probably wondering, what is the benefit of the program?

4:57

And the benefit of the proper going to go to, next slide, please? The benefit of the program, there are three questions that you can ask.

5:06

What are the benefits? Is my site eligible? and how to live blog? So we're gonna look at these three questions and just sort of break them down for The benefit of becoming again HFC site at the clinician.

5:20

Has several loan repayment and, or scholarship programs that they can apply for once they apply for those, If they're awarded under one of those programs that they get to work at your site, how do they find your site through the Health Workforce connector?

5:39

How do they connect through our virtual job fairs?

5:43

So recruitment interests of the providers is very key detested for the National Health Service Corps, as you can.

5:51

Slide, we have five different loan repayment scholarship programs, and those programs together, oh, strengthens the network and resources. So we have the primary care offices at work with us. We have a Division of Regional Operations that work with us, as well as the network of clinicians that are currently receiving the awards and those that have previously received.

6:18

Now, on this particular slide, you can see the distribution of providers throughout the National Health Service Corps, 29% of those providers are under the area of behavioral health, but under the area of behavioral health, you have your health service.

6:33

Psychologists, you have your licensed clinical social workers.

6:37

You have your psychiatric nurse specialists, your marriage and family therapist, and your licensed professional counselors in addition to your nurse practitioners or physicians, physician assistants, nurse midwives, and all of the other disciplines that you see on this particular slide.

6:56

Too, new disciplines that were recently added or pharmacist and registered nurses.

7:04

And those were specifically added or the, uh, two new programs at two repayment substance use the Workforce Loan Repayment Program and the Rural Community Loan Repayment Program. So, those two programs added to the additional disciplines of registered nurses and pharmacists. So, there are many clinician types that, if you already have them in your rural health clinic, that could possibly apply for the program, possibly be awarded. And, again, recruitment and retention.

7:37

You recruit using our program and retain them by offering whatever your site can offer to have the exhibition have a better quality of life.

7:47

Our next slide, I mentioned a moment ago about loan repayment programs. And this particular slide is going to show you three of our loan repayment programs. Yes, there we go. three of our Loan Repayment Program. we have our traditional in HSE Loan Repayment Program, that's the first column that's been around for many years.

8:11

And it is again, all of these are surface for repaying the service for the loan so they come to work at your facility.

8:19

But under the traditional program it's two years of service for \$50,000 for two years at full-time or \$25,000 for part the two new programs, which is a substance use disorder workforce loan repayment program. Sometimes, we say the words, or we say, issue date, the Loan Repayment Program, or the in HSE Rural Community Loan Repayment Program, as you see, the one in the middle, the middle column, which is the substance use disorder workforce, will repayment program.

8:53

That is the one that we've added the pharmacist to it, as you can see within that discipline right there. We have the substance use disorder counselors, pharmacists, and registered nurses. And that's \$75,000 for full-time for three years of service, and three, 37,500, or part-time service.

9:12

And the next new one that we've added is the Royal Court Loan Repayment Program, and again, this is for substance use disorder counselors. Our pharmacists are registered nurses and our registered nurse anesthesia, anesthesiologists that are can be part of it.

9:31

Their amount is \$100,000 for three years of service, \$450,000 for part-time.

9:38

Again, your site just needs to be approved. It needs to be providing those particular services for the clinician to apply, and to be awarded under.

9:50

And once you submit the application, and we'll talk about that in a few moments, you'll be able to see what I'm referring to when I say a program in particular, services that you would be offering at your facility.

10:05

Sorry. Next slide.

10:08

We will talk a little bit about, one of the other benefits, which is the health Workforce, connector.

10:14

The other benefit is that you, as a rural health site, would, will consider this free advertisement because you can establish a site profile within your portal account. Once you become a site administrator, you establish a site profile where you pulse chairs can see. You talk about your particular facility, how many rooms you have with some of your benefits are that you were all for your employees. How many languages are provided there?

10:48

So it's an opportunity for you to tell the clinician a little bit about your site if the clinician cannot conduct a site visit there.

10:57

So someone wanted to move to a rural area. They didn't know much about it. This is your opportunity to talk a little bit about it. Again, you can upload photos. You could talk about your employee benefit package, the characteristics of your site.

11:12

If you think that would help expedite to understand a little bit more about what facility prior to either connecting with you are coming out for an interview.

11:24

The next slide, I want to talk a little bit about the other benefit, which is the virtual Chopsticks.

11:31

And our virtual chaff fingers are an innovative way for the National Health Service Corps and the nurse Corps Program to promote the job opportunities to the target audience of primary care clinicians that are interested in serving at various facilities. So, instead of having an actual job fair, it's a virtual job fair. So, there can be as many as 50.

12:01

sites that are on the virtual job fair, and clinicians from all over the state, would join into the job fair. And this is your opportunity to tell them a little bit about your site.

12:14

What you can offer, as far as your employee packages, and do some one-on-one connections with those individuals. So the benefits to being, part of the National Service Corps is number one, recruitment and retention. So the virtual job fair is how you recruit. The Health Workforce Connector is how you recruit, and the retention is what you're going to tell them about your site, what your site can offer to the clinician, to be a part of your community.

12:46

Next slide, please.

12:48

So you're probably wondering is my site eligible to apply for this program?

12:56

one of the main criterias to become a National Health Service Corps site is you have to be located and serve in the federally designated health professional shortage area.

13:09

I'll talk a little bit about that in another slide coming up, but that is key. So, if your site offers primary care is, course, must be located in a primary care hits, the same with dental, and the same with mental and behavioral health, you have to be located in that. Gibson, if you're telling us that you offer those services. We're going to look at a particular website to see that you do have a hipster, and I'll talk about that. again, in the upcoming slides. Is your site, a primary care outpatient facility? The key word here is our page, it has to be an outpatient facility, except for a critical access hospital. And there are designations. And we do have a list of the various states of the critical access hospitals, or you are an Indian Health Service hospitals. Those are the only two types of inpatient facility other than the facility has to be outpatient.

14:04

You also have to utilize and prominently advertize labile site just sliding fee scale for individuals at or below 200% of adults.

14:19

You have to indicate to us that you do not deny services based on anyone's ability to a worthy of enrollment in Medicaid, Medicare, or the Children's Health Insurance program.

14:31

You have to ensure that there's access to accelerate inpatient or specialty care. Credentialing of the clinician has to be one of the credentialing processes has to come through, the National Practitioner Data Bank, and you have to meet the requirements, is listed in the National Health Service Corps site agreement, and that agreement is part of the site reference guide, which is a document that you can pull down. It's public information. There is the web link, and it's also documented that initial at the end of your online application.

15:07

So, next slide.

15:11

A moment ago, I talked about the inpatient facilities. I want to talk about the eligible site types, so, the various site types to become an HSE approved side force or FQHCs, your look alikes,

either IHS sites were speaking now, with the rural health clinics, and you're certified rural health clinics, You can be a correctional or detention institution, facility rather mentioned the critical access hospitals, community mental health centers, state, and local health departments to write practices, free clinics, and you can be a substance use disorder treatment facility. So, these are the various eligible site types that can be part of the program.

15:57

Next slide, please.

16:02

The substance use disorder treatment facilities have to demonstrate the requirements set forth in our NHSN site agreement, the Site Reference Guide, which I mentioned earlier, and you have to provide to us a submission of certain substance use disorder documentation.

16:25

The various documentation types can be, if you are telling us that you're an opioid treatment program, there is a SAMHSA certificate issue to that particular facility.

16:38

address, So that certificate, you would submit that to us. If you are an office based outpatient and office based opioid treatment program, you would provide us with documentation indicating that you are, that if you are a non opioid and substance use disorder treatment facility, and some of these mutations can be something from website.

17:00

It could be something for brochure that you give out, but we will be checking to see that.

17:07

That information is on your website, or it is listed on a brochure, because we'll be asking you for that or will also check your website. FQHCs will provide documentation that they provide a substance use disorder treatment. Again, it could be the form of a brochure, again, something from your website.

17:27

But substance use disorder eligible treatment facilities can be any of these facility types, you just have to provide us with documentation that you provide a substance use disorder services.

17:43

A little bit more about that will come in the slide that's coming up.

17:48

Next slide, please.

17:50

I mentioned to you about her eligible site tax. Now, I want to tell you a little bit about our eligible sites.

17:58

Inpatient hospitals are not eligible.

18:02

Only exception are critical access hospitals or Indian Health Service Hospitals.

18:07

Other types of inpatient facilities or inpatient rehab programs, residential facilities, home based health settings. So, this is a list of the eligible site types. And this list is also provided for in the site reference guide, so that you are clear on the facility type that is, F is eligible, or our problem.

18:34

Next slide, please.

18:38

one of the requirements that I mentioned, most important is that you have to be located in a health professional shortage area.

18:45

Yeah, This description is tells you what it is, is that it's a geographical area, or population, or a healthcare facility, has been designated talk person as having a shortage of health professions, so they're individuals at work whole program of information in Rockville, Maryland, that are able to determine if your area is in that Health professional Shortage area. I'll provide you with the link in an upcoming slide.

19:17

But this is the next slide, we're going to talk a little bit about, But this is the information needed to understand, and know if you're in the Health Professional Shortage area, or the services that you are going to provide.

19:32

So there are three types of ..., which is your primary care, your dental, or mental health, and the hips type must match the service that you are providing.

19:44

So, if your site only provides dental services, you have to be in dental hips, if your site provides uh.

19:56

Mental or behavioral health in your, you'd have to be in a Mental or Behavioral health. Yes, sir.

20:01

So, the funding priority or many other NHS youth programs is based on the hips.

20:06

And so, the higher the hipster, the greater the need for the health profession and the hips. The scores range from 0 to 26.

20:15

So, again, I'm the hipster, the greater the need, so, the applicant, the site rather must have that ... designation on the first day that you get the site application cycle bulk.

20:32

So, our site application cycle opened, I believe it was May, it was May 26 are either 20 Burt's.

20:40

So, at that time, as a rural health lending, you should have had a hipps.

20:48

If you did not have the hips, you will have to contact your state primary care office, and find out what's going on, or how do I get a hipster so that I can apply?

21:02

Possibly next year, if it's too late to give apply this year, because I don't know how long the process takes for you to be designated yet, I don't know how long that takes, but I'm saying that.

21:15

Would our cycle open then May, if you did not have a hipster for the discipline of services that you will be providing, please reach out to your primary State Primary Care Office and discuss that further. If you want to find out if you do have a headset, the hips that information is listed right here, it's public information. It will tell you if you're getting primary care, dental, or mental and behavioral health IPs.

21:44

So again, gives the score. So this is a key piece.

21:47

I talked a little bit earlier about three Loan Repayment Programs, The traditional loan repayment program that was \$50,000.

21:58

Hips that is a determining factor.

22:01

For the two new programs, which is a substance use disorder workforce and the Rural Community Loan Repayment Program, the hips score is not a determining factor.

22:13

You might say, well, what's the score for the traditional loan repayment? Generally, they've been awarding applicants.

22:19

Those are individual, why they've been awarding down to the 14. Your hips the scores should be at least 14 are high, but that varies. So, this has been in the past, but that can vary in any given year. So, again, here's the score is not a determining factor of a substance use disorder with a rural community loan repayment program, but it is the determining factor for the traditional in HSE Loan Repayment Program.

22:52

Next slide.

22:55

We'll talk a little bit about comprehensive primary care.

22:58

Your site must provide preventative, acute, chronic primary care services at your in HSE side for the approved specialty. So, if it's primary care, we want you to treat the whole person, the continuum of care.

23:20

So the adult, family, internal medicine, peds, geriatric psychiatry, general behavioral health, women's health or all begun. Those are the specialties, basically for the NHS, the primary care.

23:36

Yeah, The Continuum of Care, just treating the whole person, providing it on an ongoing basis, and having access to ancillary or inpatient specialty referral.

23:50

So, example.

23:52

Your site cannot B, yes. Treat.

23:59

STD, or HIV patients. It cannot be assigned. the only treats that category. It has to treat the whole person.

24:11

The primary care, primary care, behavioral, and mental health providers are required to practice in a community based, said, that provides access to comprehensive milk, behavioral health services.

24:27

So, again, if your site does not provide comprehensive, mental, and behavioral health services, you intern with demonstrate to us how that person is treated otherwise, and that is usually through a formal agreement, or affiliation with another healthcare provider.

24:47

Doesn't have to be a lengthy formal agreement, It can be, sometimes, it can be an e-mail exchange, doctor, so, and so, who's going to treat a severe schizophrenia? We send our patient there. We follow through, via this method. We are tracking that patient's progress, and this is our agreement with doctor so and so. So you would just have to provide to us a.

25:15

And salary or a memorandum of understanding, or an affiliate agreement of any service under general mental and behavioral health.

25:24

If you do not provide one side, you would have to provide to us when you submit your application, what your agreement is, and who your agreement is with.

25:37

There's also a behavioral health checklist that you would so complete, and that checklist, we would ask you the services provided on site or, do you have to, Are they provided offsite and if they're off site, anything that's provided off site meeting not at your facility, then you would just show us matriculated agreements.

26:00

But we guide you through that process, so we would make sure that you understand anything that's not provided in house, which is asked that you get an affiliate agreement and we'll work with you. It's a delay in getting that agreement from the other provide.

26:18

Next slide, please.

26:22

I'll talk a little bit about our substance use disorder and opioid required documentation. Again, If these are services that are not provided on site, we would ask you to provide us with information.

26:37

Was that affiliate agreement or if it is provided on site? Or substance use?

26:42

And or opioid services we would ask you for certain documentation. So if you were an opioid treatment program, we would ask you for your SAMHSA OTP certificate issued to that particular site. It's probably posted on the wall somewhere. If you are an office based opioid treatment program, we would ask for the documentation that you provide on site medicated assisted treatment services. So, if you, if that could be a flyer that could be a brochure that could be from your website, but it's something that we would be able to see and determine that you do provide services. And, again, if you are a non opioid substance use disorder facility, just provide documentation of the services that you provide on site. And, again, those that information sternly written in your.

27:35

A brochure, or it's on your website that you provide. But, again, staff from the Division of Regional Operations and from your Primary Care Office will work with you to ensure that you fully understand the required documentation that is needed.

27:52

Next slide, please.

27:56

Yeah.

27:59

one of the other requirements is that you have to, in HSE approved, sites must provide services, either for free, or on a sliding fee scale, to our low income individuals.

28:14

So, you would have to provide a sliding fee scale that offers 100% discount to those at, or below, 100% the poverty level, or offer discounts on a sliding scale up to 200%. You go over towards percent, that's great, we're only looking at 100% to 200% of the federal poverty guidelines.

28:37

We always look at the current federal poverty guidelines that are published each year, of course, through the Federal Register, So each year, just make sure if you do submit your application for this year, that you submit the 2020 Poverty Guidelines.

28:55

Then, when you are looking at the offering, the sliding fee scale, that you utilize, family size and income, to calculate the discount, the National Health Service Corps does not count assets or other factors into calculating if someone is offered.

29:14

The sliding fee scale. So you can only count family income and family size, and income in your calculation for the discounted sliding fee scale.

29:27

You can give us six months worth of your data, of your payer mix data, which is your Medicaid, Medicare, private insurance, self pay.

29:36

All of those, you would just give us six months worth of data. And you would give that to us on a document called a site data Table that we provide to you when you're completing your application. And you would generally get that information from someone, either in your billing department or your accounts payable, and we only require that. You provide us six months worth of data within your variety of payer mix is that you have.

30:01

And, again, additional information on this training program is provided for you in detail in the site reference guide. That link was provided earlier. And we'll also have the link for you on one of our later slides.

30:17

So, I'm going to talk a little bit on our next slide about the sliding fee scale documents.

30:25

So the documents that you provide to us is the Sliding Fee Scale that you go down to 100% of the Federal Poverty Guidelines, and up to 200%.

30:36

You would provide us with your patient application for that sliding fee scale. Can you go to the next slide, please?

30:42

The patient application for that sliding fee scale, as well as policies regarding how you implement your sliding fee scale program, as well as a photo of someone within your facility that state.

30:59

You offer a sliding fee scale, uh, so there are certain things that we are asking you to provide to us regarding your sliding fee program.

31:10

Again, it's the sliding fee application. It's your sliding fee policy. And it's a sign that stating it's probably in a waiting area, or actual reception desk that you do offer a sliding fee scale.

31:23

You just have to offer kids. If no one accepts it, that's another. But you just have to say that you show us that you do offer.

31:31

And the sliding fee policy requirements include patient eligibility, verification of their documentation, how you advertize the program, if there's a nominal fee listed on there, and how you go into collection if you have to have a collection policy. So, again, this information is listed clearly in the site reference guide.

31:56

On the stridency discount program packet that we do provide to you when you decide to become an HSE program.

32:08

So, it's it probably provide you great, detailed information on how to implement the program, and how to have your documents look.

32:17

So, on the next page, next slide, rather, I mentioned a little bit about advertising.

32:23

This is a sample poster that stays know what you need, and I know what will be. I won't, I can't. No one will be denied services, regardless of their ability to pay. And that you offer a sliding fee scale.

32:36

So basically, we give you a template of what to use that you list on their the discrimination categories that no one can deny services based on their, whatever, their academy.

32:53

You accept various insurances and then you can This is your advertisement that you're in HSE program on and off Ed Hsu.

33:03

Look at your population within your area. So other languages as well. But again, we provide this exact sample for you to utilize.

33:15

Just ask that you advertise that.

33:19

Next slide, please.

33:22

You're probably wondering, OK.

33:23

Now you talked to me a little bit that, about the site tie? I think I'm eligible. I think I will apply, you talked about recruitment and retention, and so, now you wonder, Well, OK. So, how do I get started with this? You would log on to our NHS or public webpage, and you would type in National Health Service Corps.

33:44

Or in HSE dot HRSA dot gov, will give you the link in another slide, and you would, then begin to apply, you would apply as a site administrator, you're not an applicant, because you're not the individual seeking award, you're seeking to become a site. So, you would, in turn, apply as a site administrator. And, once you click on that, it's self explanatory. It's kind of prompts. lead you to the next questions. Some information you have to fill out. So, the next slide, please. This very user friendly.

34:17

Our portal is very user friendly, from what it was back in the day.

34:23

So, again, the required supporting documentation once you determine to becoming NHS's site is you have to provide us with policies on non discrimination. Again, remember that culture that I just showed you. You have to provide your sliding fee schedule, Your sliding see application by your policies on sliding fee scale, photo, which is in the lobby, or anything that's updated from within your facility.

34:56

You would provide to us your recruitment and retention plan.

35:01

And this is very key, because most sites already habitus, but it's in different places throughout their policy manual.

35:10

So, you already know how you're going to recruit them, and the benefits of working for your organization.

35:16

We just ask that you kind of put that into a simple document, and call it your recruitment and retention, but if you don't have that, we do provide you with tools and other documents. So, we can help you begin to prepare and draft your own recruitment and retention plan.

35:35

But a recruitment and retention plan is key, one of the key documents that you need to submit to us. But, again, we'll work with you to complete those documents.

35:45

Also, providing documentation and proof of ancillary services. So, if there is a referral system that you have, we just ask that you provide us with that.

35:55

How do you track patient that has to go to another doctor and then comes back to you? So, it's your referral plan, or your summary services plan, whatever that is. If it's just a one pager, that's fine.

36:10

You would provide us with six months worth of your payer mix data. And that again is on our NHS site data table that is provided for you to you. Rather when you start your application.

36:24

You would provide us with the behavioral checklist if your site provides mental and behavioral health services.

36:32

So if your site only provides primary care that you do not need to provide, the behavioral health check, if your site only provides primary care and dental, you do not need to provide behavioral health checklist. If your site provides general mental health care, you have to provide us with the behavioral health checklist, and again, self explanatory.

36:54

Any service, that you provide on site, you would check the box, it says On Site. Any service that is not provided on site would ask you for a Memorandum of understanding or affiliated agreement.

37:09

And who that provider is, You would also provide us with proof of substance use disorder services if you provide those services.

37:22

The next slide will tell you showing a little bit of a screenshot of the NHS tayside agreement.

37:29

We ask that you, make sure that you read through this so that you know what your responsibilities are as NHS to site.

37:38

Um.

37:39

This particular site agreement is also listed. in the Site Reference Guide. It's listed on the portal page before you submit your application. So, you have numerous opportunities to read through this, just so that you can understand what your responsibilities are when you become an HSE site.

38:04

And our next one.

38:07

So you've got a little bit about this than you think you want to apply. So you will begin to gather all of the required documentation. And as I said earlier, most of the documentation, you probably already have readily available. The one document that you might have to a little bit more effort into is the NHS, the Site Data Table. And again, that is a document that probably somebody in your billing department would have to complete for you because it's regarding your payer mix data. And your receivables counts receivable and have a staff there are within your organization, the work in the various disciplines. So once you gather all that documentation, you would log on to the NHS portal that I mentioned earlier. You would apply as a side point of contact, and then you will begin your application.

39:02

As I mentioned earlier, the application cycle opened on May 26th, and you have until July 21st to submit, to submit your application.

39:15

Again, you always want to make sure that even if you started it, and you had to stop for whatever reason, and you do want to pick that application back up at the team you want with it, you must make sure that you hit the Submit button by July 21st at the appropriate designated Eastern Standard Time. And, that time is written in the as you see right here, 11 59, Eastern Standard Time. So, ensure that, it is submitted by did. Not started, but submitted. So, if you don't hit the Submit button, and we will not get your application and it will be voted out of the cyst.

39:55

If anyone on the webinar is a has previously been an NHS site of the recertification cycle, will open in the fall of 2020. We do not have the exact date yet, but feel free to check with your primary care office or reach out to your designated ..., as we call Division of Operations Analyst.

40:19

So if you, anyone on the call us from Minnesota, that would be your contact from the Division of Regional Operations, and for Minnesota, I believe that would be our Law Center.

40:30

So she would your contact for the primary care of that information. Of course, is on our public web page who your state PCL officer is.

40:41

OK, next slide, please.

40:44

So, you've submitted your application. What happens next is, again, you've gathered documentation on the 1, 2, 3, check over. You've hit the submit button, and now you sit back and wait.

40:59

The state primary care office receives your application first, they review the over some preliminaries, and then at the same time, then we will get the national service score, and then we review your application. You can view your application status by going onto the customer service portal and asking the question, what's the status. But generally, it will take between 6 to 8 weeks for that, Our review to occur sometimes longer, depending on the volume of work that the analysts has. But generally, we do have a deadline to get those applications reviewed, and either approved, or denied.

41:39

And communication, back and forth. So, if you are approved, you can begin recruiting through the National Health Service Corps immediately to one of our various loan repayment application cycles. So, you didn't turn with coast up. Hey, I'm an NHS decided he would ask your staff work, there, do you have any qualifying educational loans, or are you still paying on your educational loans? If theory, primary, care, dental, or mental health provider, and they might say, Well, yeah, I guess, what you already work here or in HSE approves site. So, you can now have that

individual submitted an application through the Loan Repayment Application cycle, when it opens.

42:26

Each year, so our application cycles for all of our programs open one-time per year. So, it's the Loan Repayment Program: It opens one time for here, that the Site Application News site opens once per year, if it's recertification, it opens once per year. So, again, all of our application cycles only open one time per year. And they're generally open, 60 days, maybe plus, or minus of days. So that gives an individual enough time to gather information. Next slide, please.

43:02

I mentioned earlier about our public website. And there it is right there in HSC dot HRSA dot gov. And you would go to that website kind of peruse around, it's a lot of information on our Loan Repayment Program, scholarship program, on information just for sites, information on our substance use disorder treatment programs. It's a lot of information there, so feel free to peruse that website.

43:30

Again, if you do feel that you want to apply to our program, we ask that you can log onto the website, click on Sites, and kinda guides you through it. If you have any questions. You can always call the customer service number. You can always reach out to your state primary care office and or your Division of Regional Operations contact of which I am one of those individuals. Next slide please.

44:00

We're almost at the end here. And I just wanted to kind of give you a couple of little.

44:05

Secondly, deadlines here. That sites that are currently NHS soup room.

44:11

Um, if your site provides mental and behavioral health, you don't, you're not sure. If you have ever opted in for side.

44:22

Contact your Regional Office Division of Regional Operations analysts, and they can tell you if you've ever opted in for sad.

44:31

And if you did not, and you feel that your site provides, uh, opioid treatment, substance use disorder treatment, or mat site, some documentation that will ask for.

44:44

And we will then check a little box once you give us that information, and your site, then will be listed as provide access, or OTP, or a medicated assisted treatment site, for sites that have never been an HSE accrue.

45:04

And that has never applied for the NHS C program.

45:08

This is your opportunity right now, from now until July 21st. This is your opportunity if you've never apply, you've never been in NHS this side.

45:18

This is when you apply, but for sites that have previously applied, for whatever reason, their application expired or maybe the site administrator, they switched site administrators. And someone forgot to sell, tell someone about the program and the application. Expired because you are, your application is valid for three years.

45:43

And I probably did not mention it, so if you do apply and you are approved as NHS the site, you do not have to apply again for three years. So your site is valid in an approved status for three years. So if you applied previously and had expired, you would apply during recertification, and that does not open until the fall of 2020. So, the cycle that we're in right now is only for NHS seek approved sites. Next slide.

46:20

A little bit about covert 19 flexibilities for participants.

46:26

Again, if you have a clinician already awarded, that's at your side, and they want it to have questions, We have an entire FAQ page regarding the requirements in some of the leveraging of possibilities that we are providing for our participants that are being impacted by cultic 90. I just wanted to briefly show that, because we are getting down to about an hour, and I kinda wanted to make sure that I offered enough time for questions and answers. So, next slide, please. Does any questions?

47:05

Perfect.

**Nathan Baugh:**

47:10

Thank you, thank you Michelle. And at this time, we're gonna open up the question box for folks to ask questions via text.

47:21

And so as those come in, I just wanted to mention that the CEU code for the Certified Rural Health Clinics Professionals for today is Q L Z 8 6 2.

47:38

And you can see down the bottom of your screen, and the first question has already come in, and we're going to try to get to as many of these as we can. This one is from Bethany Butler. And she asks, can a sliding fee schedule go up to 300% of federal poverty guidelines as opposed to just two?

**Michelle Stewart:**

47:58

Yes.

**Nathan Baugh:**

48:00

All right, there you have it. Nice and simple and nice and easy. Answers. Yes, All right, Next question is from Paula and De, who asks, What is the cost for the initial application as well as the renewal after three years? Is there a cost associated with zero cost?

**Michelle Stewart:**

48:23

Rita apply just free to apply. You just You just have to have time sitting at home or sitting in the office to complete the application.

48:30

This is a free program for Sites, It's the cost of your time. Correct.

**Nathan Baugh:**

48:37

All right.

48:37

So, next question is from Tammy Schneider, Is it required that you have a website or will a Facebook page work for the for that particular requirement?

**Michelle Stewart:**

We would like for you to have a website, it's not a requirement, as long as we're able to find information in a public setting about your site. So, if this, if it happens to be a Facebook page, it just has to, again, contains certain information that we're going to be looking for.

49:08

Again, remember that you offer a sliding fee scale that anyone can be seen, regardless of their ability to pay that you have a nominal fee on Facebook.

49:18

But, we think a website is not required, but we do we are going to be looking through the worldwide web for information on your site.

**Nathan Baugh:**

49:29

Perfect. Thank you. Next question is from Denise Kato, asked, Can you share recruitment and retention policy and our recruitment plan?

49:42

Presume those are on them.

49:43

The website?

**Michelle Stewart:**

49:46

Me, Oh, not sure if this wasn't on our public website, if someone can get, Nathan, are you sharing anything with the group that's on? Because it's so we can get something to you, and then you can share it?

**Nathan Baugh:**

50:03

I don't know, we will have a roster and the e-mails and be able to send the message out.

**Michelle Stewart:**

50:11

So, if you have something that that HRSA ..., roofed, we can get that out to folks. Yes, I will e-mail it to you.

**Nathan Baugh:**

50:21

Perfect.

50:23

All right, so, now look out for that, and he's gonna get an e-mail from an RHC on that. Next question is from Jason Hughes. He says, thank you first of all. But then he says my understanding is that if you are a RHC and do not have a ... yet, you can receive one through applying to the National Health Service Corps.

50:46

And he says that we don't have to wait until next application cycle.

50:51

That is that correct? Would you agree?

**Michelle Stewart:**

50:54

I don't want to say is incorrect. I do know that, as you saw in one slide earlier, that you had to have your gifts A score when the site application site, so you didn't have it by this particular by, May 26, you just have to wait until next year.

**Nathan Baugh:**

51:15

Do you prove, do you apply for a hipps through an HSE, or do you apply through the Primary care Office?

**Michelle Stewart:**

51:24

You would start with your primary care.

**Nathan Baugh:**

51:27

All right.

51:27

So, Jason, you want to start with the PCL collecting, send those questions to them, not necessarily through National Health Service Corps, Correct?

51:39

Denise, and another question from nice, who asks, What are some of the most common denial reasons, application, denial, reasons?

**Michelle Stewart:**

51:46

The main denial reason is that you're not in a hipster, because sites think that they're in a hip so, that's number one. That's why we give them the link, and they can verify that sells. The other one could be that your nominal fee, we don't tell you what a nominal fee is.

52:04

But if someone cannot pay, and you have a nominal fee of \$100, we kinda look at that and say, cool, little things like that. Possibly not getting the, all of the documentation on time is another one.

52:20

Just having to go back and forth with a, say, you didn't do this, you didn't do that. That indicates to us that the person site probably didn't, it's thorough.

52:30

So, perfect.

**Nathan Baugh:**

52:31

They may want this mixer and I know Michelle has to go ride at three. So, we'll do two more questions, and we'll close that

**Michelle Stewart:**

I can hold on for a few more minutes.

**Nathan Baugh:**

52:43

Yeah, OK. All right.

52:44

So, we're gonna wait, you Let me know when you give me a five minute warning, so then we can get to more questions.

52:52

OK, OK, next question is from Larry Cohen, Who asks, When will physical therapists and occupational patient or therapists be fun to make as something that you can answer?

**Michelle Stewart:**

Yeah, probably probably Congress right now. I will say that those individuals, there is a faculty loan repayment program that those two disciplines you just mentioned are on the Faculty Loan Repayment Program, someone wants to teach.

53:21

That's another one, but it's when you help your, at your facility.

**Nathan Baugh:**

53:27

All right, Good. Next question is from Bill Center Frock, who says, You said that clinics cannot be gender specific. Does this mean a woman's health clinic is ineligible? Also, if I'm a pediatric practice, can I only see Medicaid? patients? Do I have to see Medicare patients?

**Michelle Stewart:**

53:45

The second part of your question, you can see Medicare and Medicaid you can see all patients regarding the womens practice.

53:54

We will just have to look at the your site information. And the analysts would probably go back and forth with you on some questions for you.

54:03

And or the analysts could do a pre site visit to come to your clinic to get a good feel for what it is that you offer, who you offer to. And then they can make a determining factor of if your site is eligible to apply.

54:18

So there are options, we wouldn't say no off the bat. There are things that we can do on our end to get a full understanding of your site type.

**Nathan Baugh:**

54:26

OK, and I think his question was if you're if you're Medicaid only, you don't see Medicare patients at all. Does that make you ineligible?

**Michelle Stewart:**

54:37

No, it does not make you eligible.

**Nathan Baugh:**

54:40

OK, perfect.

54:45

Next question is from Laurel's Sawyer site that has previously applied but was denied would you apply now or apply in the fall in the fall recertification in the fall?

**Michelle Stewart:**

55:00

But even if they were denied, even if they were denied, yes, if you were denied in the fall because we have a a, you've already done some things in the world. Because you have information already.

**Nathan Baugh:**

OK. Got it. Next question is From Abby Baker. She asks, When do you start including ... RNAs for the loan repayment money?

**Michelle Stewart:**

55:25

Again, that would be Congress,

**Nathan Baugh:**

OK, so this question, Yep that that's not yet in the program Abby. Next question is from Jill Bullock. As our provider based comp, rural health clinics able to apply, It doesn't look like CAHs were eligible.

55:46

Well, I'll let you speak to the CAH piece of it. But just so you understand, Michelle, a lot of rural health clinics are owned by hospitals, particularly critical access hospitals.

55:58

And I know you mentioned earlier that CAHs were eligible if I was paying attention properly. Correct? Presume that the clinics that they own would be eligible as long as they also meet the ....

**Michelle Stewart:**

56:11

Correct. Because for a participant, for an HSC participant that seeks that has been awarded and they said, oh, I want to work at the CAH, you can work at the CAH, but you also have to work at the affiliated clinic.

56:26

So if a CAH is approved, there needs to be a clinic that's affiliated with that CAH.

**Nathan Baugh:**

56:34

OK, there you go. Next question is from Dustin Hamlin.

56:41

If a provider has already began employment at our facility prior to us obtaining this certification, will they still be able to receive loan repayment options?

**Michelle Stewart:**

56:52

Absolutely, They can apply. I'm not gonna say that they'll receive it, but that individual can apply, because as you know, with the federal government, nothing is guaranteed.

57:01

So if there is an employee that works at your organization, Yes.

57:09

That works for this, that Sorry to tell you. That lab that has a qualifying educational loans, yes. That person can apply.

57:25

Even if they've been working there for 10 years, yes, they can apply

**Nathan Baugh:**

OK, perfect. Thank you. Next question is from Lynn Doting.

57:34

This is again a provider based sorry to question how is it provider based REC and a CAH to apply? Are we required to submit 1 or 2 applications that they have the same tax ID number.

**Michelle Stewart:**

57:46

Yeah.

57:47

You would have to apply separately so the CAH would have to apply and then the affiliated clinic, even if the clinic is within the CAH. And we have many of those were the affiliated clinic is down the hall or around the corner instead of across the street. So you would have to submit two applications: one label at the clinic, and one, we would label that.

**Nathan Baugh:**

58:11

Perfect. All right, Next question is from via adwords or adwords.

58:18

If hpsa score decreases during the certification period, would this impact the ability to recertify at the end of the certification period?

**Michelle Stewart:**

58:30

Repeat the question again.

**Nathan Baugh:**

58:31

So if if the hpsa score decreases during the certification period, would this impact the ability to recertify?

**Michelle Stewart:**

58:41

Oh, no.

58:42

No. No, we just want to make sure you're in a hpsa. So if you're in Egypt, and the hpsa score while you're applying goes up or goes down, that doesn't matter.

58:50

You're still in a hpsa, OK, just to make sure you're gonna have, what happens if you lose hpsa altogether?

58:58

Well, you wouldn't be able to recertify at the, right? I wouldn't be able to recertify that is correct.

59:06

But here's another scenario. Let's say for instance, you were on a You weren't approved at one time. The ...

59:13

score was withdrawn for whatever reason he lost her, hits a score, knows what reason.

59:20

But there's also a clinician that, it's an awardee that's working there and at your side let that clinician stay there to fulfill their obligations till there, service requirement is up. Then they would probably have to find a new site unless you found a way to get the score re-instate.

59:42

So anything to that, OK, OK, now that you are done, sorry, I was just going to explain a little bit more, but I'm done.

**Nathan Baugh:**

59:51

OK.

59:52

Next question, and I could maybe tackle this one is from Shri ..., who asks, how do you bill when? We see a patient with no insurance?

1:00:05

How do you think the answer there is that you would go to the patient?

1:00:09

But of course, if their income is below 200%, or 300%, depending on what your sliding fee scale says, you would need to bill according to what the sliding fee scale saying?

**Michelle Stewart:**

1:00:22

Correct? And you would just show us through your policy on how you would bill a person or not that person, which are billing process, would be if someone didn't have the money to pay, will just show lesser policy on how you're going to recoup any funds. That's all to you.

**Nathan Baugh:**

1:00:40

The long answer there is: you bill the patient according to the sliding fee scale.

1:00:49

Next question is from Rachele Phillips or their parameters around a specific number of financial assistance applications received in the six month period?

1:01:01

one more time, are there parameters around a specific number of financial assistance applications received in the six month period?

**Michelle Stewart:**

1:01:11

No, no, it's whatever goes on in that six months, and if you feel that you need to explain something, we provide you with an opportunity to give a little exclamation within that six months.

**Nathan Baugh:**

1:01:23

Michelle, how are we doing on time check?

**Michelle Stewart:**

1:01:25

We are, let's go to about five more minutes,

**Nathan Baugh:**

got five more minutes. Next question is from Janine or Gene Merit, Marryat.

1:01:38

Who asks, is the substance use disorder designation only available as an opt in? My company is an addiction recovery and treatment facility that has a residential program, but also has three outpatient clinics, are the outreach clinics able to apply as eligible sites?

**Michelle Stewart:**

1:01:58

The outreach clinics possibly could apply, possibly could apply. I would say that it wouldn't hurt to gather the documentation that apply and let that analyst review the information to make a determination.

**Nathan Baugh:**

1:02:13

Next question is from Bethany Butler, who asks if we are in a hpsa, a primary care designated area.

1:02:19

Does the volume of RHC patient have any bearing on getting designation?

**Michelle Stewart:**

1:02:27

That would be a question for the Primary Care Office. because I don't work with HIPAA designations at all.

1:02:33

So, the Primary Care Office would be able to best answer that question.

**Nathan Baugh:**

1:02:37

OK, perfect. Next question is from Kelsey ..., who asks: Is it a requirement for the sliding fee schedule to be across the entire organization? For example, we are ... outpatient primary care clinics and only use the sliding fee scale across our outpatient primary care clinics and not at the cost.

**Michelle Stewart:**

1:02:57

Correct you would, the sliding fee scale would be applicable only to the CAH, not the, I'm sorry, to the outpatient clinic, not to the CAH.

1:03:09

Yeah, so it's not organization wide site. It's not, or it's site, correct, correct site.

**Nathan Baugh:**

1:03:16

Perfect. All right, let's go one more question from Janet.

1:03:23

Van Otter.

1:03:25

I know the requirement is that we do not perform asset testing, But we are required by CMS to do asset testing as part of the Medicare Bad Debt Program.

1:03:40

Do you know what she's asking there?

**Michelle Stewart:**

Yes, I do. You would just have to put that.

1:03:45

Can we would ask that you insert a line.

1:03:50

Little statement saying we do not collect assets for the NHS program.

1:03:56

National service programs. You would have to put something so that we're able to determine, we understand your situation. But, he has to kind of flip that language somewhere.

1:04:07

OK, so, I'm sorry, so you would, that would go to the patient.

1:04:13

That would be on you. Well, you actually have two options. You didn't do well on another application.

1:04:20

The, if the person wants to come in for a fee scale, and that way, it doesn't collect assets, and then you'd have another application. But the ones that you collect assets or the option is to put a little statement.

1:04:32

For the NHSN program, we did not looked at it across.

1:04:38

That's the best that we can tell you, but we do care sites, those two options,

**Michelle Stewart:**

OK. All right, perfect.

1:04:44

Well, we got through a good amount of questions, and there are many more that we have recorded, but, but I think we did a pretty good job in that Q and A If I say so myself. I really would like to thank you, and I'd like to thank everyone for attending today's webinar.

1:05:04

And, of course, I'd like to also thank the Federal Office of Rural Health Policy for sponsoring this Rural Health Clinic Technical Assistance webinar series. Again, out, please encourage others who may be interested to register, register for the webinar series at, to go to ... dot org or the ... Hub website. In addition, we welcome you to e-mail us with your thoughts and suggestions for future topics. And you can e-mail me, which is [Nathan.baugh@narhc.org](mailto:Nathan.baugh@narhc.org) and be sure to put RHC webinar topic in the e-mail subject line to send me those suggestions. Again, the Certified Rural Health Clinics Professionals code for today is QLZ862. When we schedule the

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**Tuesday June 30th, 2020**  
**Nathan Baugh**  
**HRSA Staff: Michelle Stewart, Kerri Cornejo**

next webinar, will be sent by e-mail to those who have registered for the webinar series with the details. And that concludes today's call. Thank you all for your participation.