Workforce Development - Rural Health & Primary Care (RHPC), Division of Public Health Services

June 13, 2013





Workforce Development at Rural Health & Primary Care (RHPC)

Goal: Recruitment and retention of health care providers whose service will meet the needs of rural and underserved populations of New Hampshire.

Programs:

- Health provider shortage designations done through contract.
- Administers the J-1 Visa Waiver Program, also known as Conrad 30 Program, for foreign medical graduates.
- Administers the NH State Loan Repayment Program (SLRP).
- Funds the New Hampshire Recruitment Center.
- Assists with site certification for the National Health Service Corps

Funding:

- US DHHS, HRSA, Bureau of Clinician Recruitment Services Primary Care Office Grant (1.65 FTE)
- US DHHS, HRSA, Office of Rural Health Policy State Office of Rural Health (Shortage Designations, Clinical Placement Program)
- General funds (Shortage Designations, SLRP, Recruitment Center)
- Medicaid (Recruitment Center)

Primary Care Office Logic Model

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Inputs

Outputs Activities

People: .30 FTE

Section Administrator

1.0 FTE Workforce Program Manager

.15 FTE Workforce Coordinator

.20 FTE

Executive Secretary

Resources:

Contract w/Bi-State Primary Care Association

Contract w/JSI-CHI Conduct a statewide analysis of unmet needs, disparities and health workforce issues, including information from the rural health plan and critical access hospitals' community needs assessments

Coordinate and oversee the HPSA and MUA/P designation process

Develop a database to capture and assess NH data on all primary care providers

Contract with NH recruitment center to collect vacancy data

Evaluate the NHSC site applications

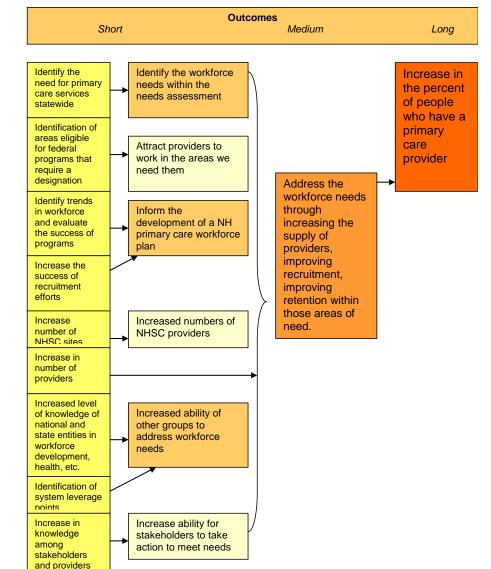
Coordination of the J1 visa program/NIW

Coordination of state loan repayment program

Participation in other groups in state to provide workforce expertise

Develop a plan with strategies to meet the needs regarding primary care workforce

Serve as the state expert on primary care access





Shortage Designations

Goal: To identify areas that have a healthcare provider shortage.

What it does: The Shortage Designation Branch at the HRSA Bureau of Health Professions National Center for Health Workforce develops shortage designation criteria and uses them to decide whether or not a geographic area or population group is a Health Professional Shortage Area or a Medically Underserved Area or Population.

How it works: More than 34 federal programs depend on the shortage designation to determine eligibility or funding preferences.

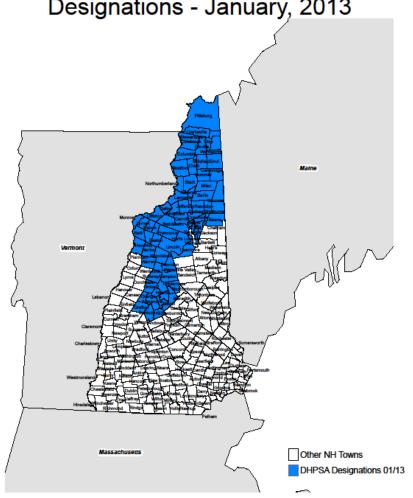


Shortage Designations, part 2

- Health Professional Shortage Areas (HPSAs) may have shortages of primary medical care, dental or mental health providers and may be urban or rural areas, population groups or medical or other public facilities.
- Medically Underserved Areas (MUA) may be a whole county or a group of contiguous counties, a group of county or civil divisions or a group of urban census tracts in which residents have a shortage of personal health services.
- Medically Underserved Populations (MUPs) may include groups of persons who face economic, cultural or linguistic barriers to health care.

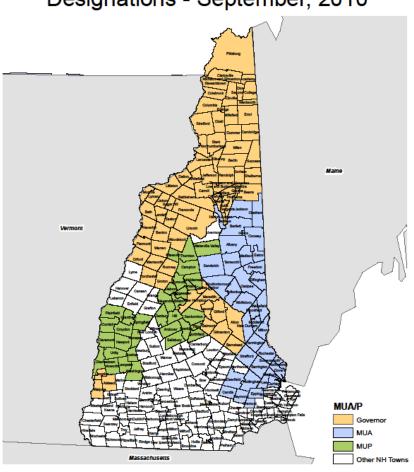
Dental HPSA

New Hampshire's Dental Health Professional Shortage Area Designations - January, 2013



MUA/MUP

New Hampshire's Medically Underserved Area/Population Designations - September, 2010





New Hampshire State Loan Repayment Program (SLRP)

- Includes MUA/MUP as well as HPSA, DHPSA and MHPSA. Shortage score is not a factor in determining funding priority. There is no application deadline. Those with matching funds do not have to compete.
- Offers licensed health professionals who are US citizens an opportunity to work in medically underserved areas to receive partial payment of their educational loans in exchange for their three-year commitment to serving uninsured, underinsured, Medicaid, and Medicare populations in NH.
- These providers may be primary care physicians, dentists, psychiatrists, clinical psychologists, general surgeons employed by a Critical Access Hospital, physician assistants, nurse practitioners, certified nurse midwives, licensed clinical social workers and dental hygienists.
- New program policy also offers loan repayment for dentists and dental hygienists who work at a program funded by the DPHS, Oral Health Program.
- Application on website at http://www.dhhs.nh.gov/dphs/bchs/rhpc/repayment.htm

SLRP Contracts

Type of Health Professional	First- Year Contract	Second- Year Contract	Third- Year Contract	Contract Extensions	Maximum Amount Possible
Full-time Healthcare Providers (40 hr/week)					
Primary Care Physicians, Dentists, Psychiatrists, Rural General Surgeons	\$30K	\$25K	\$20K	\$20K per year for up to 2 years	\$115K
PAs, NPs, Nurse Midwives, Dental Hygienists, Clinical Psychologists, LCSWs, Psychiatric Nurse Specialists, Mental Health Counselors, Licensed Professional Counselors, Marriage and Family Therapists	\$20K	\$15K	\$10K	\$10K per year for up to 2 years	\$65K
Part-time Healthcare Providers (20-39 hr/week)					
Primary Care Physicians, Dentists, Psychiatrists, Rural General Surgeons	\$15K	\$12.5K	N/A	\$10K per year for one year	\$37.5K
PAs, NPs, Nurse Midwives, Dental Hygienists, Clinical Psychologists, LCSWs, Psychiatric Nurse Specialists, Mental Health Counselors, Licensed Professional Counselors, Marriage and Family Therapists	\$10K	\$7.5K	N/A	\$5K per year for one year	\$22.5K



Contact Information

Alisa Druzba, MA Administrator 271-5934 adruzba@dhhs.state.nh.us

David Roberts
Workforce Coordinator
271-2276
droberts@dhhs.state.nh.us