Program Basics:

What is the Medicaid Primary Care Loan Repayment Program?
The Medicaid Primary Care Loan Repayment Program was established by the Oregon Health Authority and is administered by the Oregon Office of Rural Health. The purpose of the Program is to provide loan repayment support to primary care providers who commit to serving Medicaid patients in underserved areas of the State. The Program supports the Affordable Care Act and Oregon's health system transformation efforts to ensure an adequate supply of primary care providers.

What is the maximum loan repayment award through this program?
Program participants are eligible for a maximum loan repayment award of:

- Full Time Participants: Twenty percent of the balance owed on qualifying loans upon program entry, up to an annual maximum amount of $35,000 for each year.
- Part Time Participants: Ten percent of the balance owed on qualifying loans upon program entry, up to an annual maximum amount of $17,500 for each year.

Candidate eligibility

What health professions qualify?
A practitioner in Oregon delivering health care services to patients in Oregon, who meets the provider participation requirements of OAR 409-037-0030 and who is:

- A Dentist in general or pediatric practice;
- An Expanded Practice Dental Hygienist;
- A Physician (MD or DO) who practices or intends to practice in the specialties of family medicine, general practice, general internal medicine, geriatrics, pediatrics, or obstetrics and gynecology;
- A Nurse Practitioner who practices or intends to practice in the specialties of adult health, women's health care; geriatrics; pediatrics; psychiatric mental health; family practice, or nurse midwifery;
- A Physician Assistant who practices or intends to practice in the specialties of family medicine, general practice, general internal medicine, geriatrics, pediatrics or obstetrics and gynecology;
- A general, child and adolescent, or geriatric Psychiatrist;
- A Clinical Psychologist;
- A Licensed Clinical Social Worker; or
- A Marriage or Family Therapist.
What requirements must clinicians meet in order to apply?

- Program participants must agree to serve Medicaid patients in the same approximate proportion of such patients in the county or other service area, up to a maximum requirement of 15 percent of patient mix.
- Program participants must commit to practice either: (a) Full-time in a qualifying practice site for at least three years. Full-time participants may request, and may be granted a service extension after completing their initial obligation to a total of five years, depending on available funds; or (b) Part-time in a qualifying practice site for at least five years. Part-time participants may request, and may be granted a service extension to a total of seven years, depending on the available funds.

Can clinicians apply for more than one scholarship or loan repayment program at a time? They can apply for more than one program but they cannot accept more than one award.

What loans are eligible for loan repayment through this program? Qualified loans are government or commercial loans received solely to cover the cost of post-baccalaureate health professional training, or, in the case of an Expanded Practice Dental Hygienist, undergraduate educational training. This does not include credit card loans, lines of credit and personal loans. For qualified consolidated loans, further documentation may be required.

Can clinicians still apply if they currently owe an existing service obligation? They can apply if they owe an existing obligation but their existing obligation must be complete before they begin service with the Program.

What happens if a clinician wants to transfer to a different site while fulfilling their obligation? A participating provider may, with prior approval, transfer his or her service obligation to another qualifying practice site. A written transfer request must be submitted documenting the need or reason for the transfer, the proposed new qualifying practice site and the name of the director at the proposed new practice site. Other documentation related to the transfer may be required, more information can be found in the Oregon Administrative Rule 409-037.

What happens if a participating clinician fails to complete their minimum service obligation? If a waiver for suspension of service or transfer to another qualifying practice site has not been granted, a provider will be considered to have breached the terms of the loan repayment program. A penalty will be imposed on the provider in an amount up to the sum of:

- The total paid on behalf of the participant for loan repayments for any periods of obligated service not served;
- $7,500 for each month of the minimum service period not completed according to the terms of the obligation; and
- Interest on the above amounts at the maximum prevailing rate, as determined by the Oregon Department of Revenue, calculated from the date of breach until full repayment has been made.
Site Eligibility

How does a site qualify?
To become a qualifying practice site, apply with the Oregon Office of Rural Health. Applications can be found on the Office of Rural Health website. Qualifying practice sites are:

- A rural hospital as defined in ORS 442.470;
- A federally certified Rural Health Clinic;
- A Federally Qualified Community Health Center;
- A site providing primary care services in an area approved as a medical, dental or mental Health Professional Shortage Area (HPSA) as defined by the federal Health Resources and Services Administration; or
- Another site providing primary care services to an underserved population, as determined by the Authority

How does a site get a Health Professional Shortage Area designation?
To be designated as a HPSA, communities or facilities must apply to the HRSA Office of Shortage Designation and provide data indicating that a shortage exists in the area or for the population or facility. These applications are submitted through the Oregon Primary Care Office (PCO). An area or site interested in a HPSA designation should contact the Oregon PCO directly.

Health Centers (FQHCs), FQHC Look-Alikes, and Indian Health Service (IHS) sites are automatically designated as being a facility HPSA, and some Rural Health Clinics that meet additional criteria may be automatically designated as a facility HPSA.

There are three HPSA categories – primary, dental, and mental health. To recruit a clinician, sites must have a “Designated” HPSA for the specific category under which the clinician would serve. For example, to recruit for an internal medicine physician, an approved site must have a designated “Primary Care” HPSA. To recruit a psychiatrist, the site must be in a designated “Mental Health” HPSA.

When should sites apply for this program- before or after they have a potential candidate in mind?
Sites should apply for this program as soon as possible. Once you receive your eligibility status, you can advertise this to potential candidates.

How early can sites contract with their employees using this program?
Clinicians must begin practice with a qualifying practice site within 120 days from the date of the application.

Can sites use this program as a retention tool for an existing employee?
Yes, but only for clinicians that have an employment contract with a qualifying practice site that began within the previous 24 months.

I own my own practice. Can I still participate in this program?
You must have a sole proprietorship, Limited Liability Corporation, Limited Liability Partnership, or Professional Corporation for the purpose of providing health care that meets the definition of a qualifying practice site and that was established within the previous 24 months or will be established with 120 days from the date of application.
Application Process

When can clinicians apply?
Clinicians can only apply if they’ve been working at their service site for 24 months or less, or are contracted to begin working at a qualified site within 4 months or less. Applications are accepted on an ongoing basis and can be found on the Office of Rural Health website.

When will awards be made?
Awards will be made on a quarterly basis.

Do all applicants receive a loan repayment award? How many awards will be given?
Applications will be reviewed and evaluated according to the factors listed above and availability of funding at the time the application is received. Applicants will be notified of the status of their completed applications within 60 days of application submission.

What factors will be considered when reviewing applications?
The following factors may be considered in determining whether to accept an eligible provider for participation in the program, including but not limited to:

- Provider type. Providers who may be counted as primary care medical, dental, or mental health providers (Physicians, Dentists and Psychiatrists) for federal HPSA designations may be given priority consideration for Program participation.
- Determined need of the area. Applications from providers who apply to practice at a qualifying practice site with a HPSA score of 10 or higher, or that serves an area or special population with a HPSA score of 10 or higher may be prioritized. Priority may also be given to provider applications based on the number of new Medicaid eligibles in the area served by the qualifying practice site as of January 1, 2014.
- PCPCH status. Priority will be given to eligible providers who will provide services in, or in affiliation with, a Patient Centered Primary Care Home (PCPCH) recognized by the State of Oregon.
- Duration of time in practice site, or in Oregon. Priority will be given to providers based on the duration of time they have spent at their practice site, with a priority for new providers. No more than 20 percent of all awards shall be made to providers already practicing at a qualified practice site.

For additional information on the Medicaid Primary Care Loan Repayment Program, please contact Hilary Henderson at henderhi@ohsu.edu or 503-494-4450