



ALASKA

ARIZONA

CALIFORNIA

COLORADO

HAWAII

IDAHO

MONTANA

NEVADA

NEW MEXICO

NORTH DAKOTA

OREGON

SOUTH DAKOTA

UTAH

WASHINGTON

WYOMING

# Inventory of Rural Health Practice Incentives in the Western WICHE States

October 2007

Western Interstate  
Commission for Higher  
Education

[www.wiche.edu](http://www.wiche.edu)



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## WICHE's Rural Health Care Initiative

WICHE (Western Interstate Commission for Higher Education) continues its tradition of exploring state, regional, and federal partnerships to better meet the health care needs of its rural and underserved populations in the West.

WICHE has a long history of providing access to the health professions. Its Professional Student Exchange Program (PSEP—<http://wiche.edu/sep/psep>) has been in operation more than 50 years. It provides students in 12 Western states with access to a wide range of professional programs that otherwise might not be available to them because the fields of study are not offered at public institutions in their home states. The program includes dentistry, allopathic medicine, osteopathic medicine, physician assistant, physical therapy, occupational therapy, optometry, pharmacy, podiatry, and veterinary medicine.

Over 14,000 students have earned professional degrees since the program's inception in 1951. In the 2007-08 academic year, almost 770 students paid reduced tuition to train in one of the health care professions, with \$14.5 million in appropriations from their home states offsetting the nonresident tuition costs. Some states require a service payback from their awarded students; others operate on the honor system with the expectation that students will return. The states of Arizona, Nevada, and Washington offer incentives for graduates who practice in underserved areas. Participating WICHE states estimate that 60 to 80 percent of their PSEP graduates return to their home state to practice.

WICHE's Mental Health Program (MHP) has worked for over a half-century supporting the improvement of public mental health systems and the training needs of the mental health workforce in the West. The WICHE MHP has worked extensively to build consensus and increase focus on and understanding of the unique policy issues involved in meeting the behavioral health workforce needs of rural and frontier populations.

These programs have served WICHE states well over the years, but attracting health, oral health, and behavioral health professionals to rural and underserved areas continues to be an enormous challenge. Lower salaries, high educational debt load, professional isolation, and urban-centric policy barriers in underserved and rural areas are deterrents for professionals.

WICHE and its 15 member states want to develop a comprehensive strategy for the regional health care workforce to help recruit, train, and retain professionals to serve the rural areas of the West. WICHE's rural health care initiative is focusing on primary health care services, including:

- Dentists and dental hygienists.
- Allopathic and osteopathic physicians (family practice, internal medicine, pediatrics, obstetrics/gynecology).
- Physician assistants, nurse practitioners, nurse midwives.
- Behavior health professionals: social workers, counselors, therapists, psychologists, psychiatric nurse practitioners/specialists.
- Pharmacists and pharmacy technicians.
- Public health professionals.
- Veterinary medicine and agro-security professionals.

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## Inventory of Rural Health Practice Incentives in the Western WICHE States

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WICHE is seeking partnerships with like-minded federal and state agencies and private funders to find strategies to alleviate these growing shortages in the health care workforce, which are a problem nationwide but are exacerbated in the rural West. Possible solutions include: pipeline strategies to attract a greater number of students into the health professions; loan repayment options that would make it affordable for PSEP graduates and others to practice in rural and underserved areas; and greater emphasis on rural curriculum and rural rotations and residencies at the cooperating PSEP schools. This may also involve adding new fields to WICHE's regional programs and greater use of distance education, particularly for allied health professionals.

To better inform its efforts and state policymakers in the West, WICHE developed this inventory of existing rural-health-practice incentive programs. As WICHE builds partnerships with key players in rural health, it proposes to: conduct state surveys on issues related to educating the rural health care workforce; research effective rural incentive health care workforce programs that can be replicated in the West; and collect workforce data in the various health professions.

WICHE also plans to convene a group of residency directors of its public cooperating PSEP medical and dental schools to develop collaborative efforts that could strengthen rural outreach and services.

WICHE will also convene the new Western Health Professionals Advisory Council, which includes institutional representatives, practicing health professionals, legislators, and state and federal government representatives of programs with a shared vision. The goal of the committee will be to develop regional strategies regarding pipeline issues, curriculum development, and attracting professionals to underserved and rural communities.

For more information about the initiative, contact the WICHE office at 303.541.0214.

## EXECUTIVE SUMMARY

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This report provides an inventory of financial incentives that encourage health care professionals to practice in a rural area in the 15-state WICHE region. Some of the financial incentives are available during education and training, while others encourage rural recruitment or retention. The type of incentives include: scholarships; loan repayment; tax credits; direct financial incentives, such as residency stipends or payment of malpractice premiums; rural facilities grants; and retention grants. The types of health professions covered include all levels of medicine, nursing, pharmacy, behavioral health, dentistry, allied health, public health, and emergency medical services.

The states in the WICHE region include Alaska, Arizona, California, Colorado, Hawaii, Idaho, Montana, Nevada, New Mexico, North Dakota, Oregon, South Dakota, Utah, Washington, and Wyoming.

### Description of Process

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The inventory focuses on programs and resources available from state-based organizations, but information was also gathered regarding each state's participation in the programs offered through the federal National Health Service Corps (NHSC).

The primary sources of information were program and agency websites. Each state's profile information was verified through contact with the State Office of Rural Health (SORH) or the programs' home organization.

Contact information for key organizations involved in rural health recruitment and retention and workforce development for underserved rural areas was collected for each state to facilitate further follow-up.

WICHE also researched recently enacted and pending legislation to identify new incentive approaches or changes to current programs. If such legislation was identified, it was included in each state's profile.

While this report serves as a basic overview of state-based resources encouraging rural practice, because of the reliance on secondary sources of information, it is quite possible there are additional financial incentive programs and resources available. Also, there is no information on the success or merits of the various types of incentives. An evaluation of existing programs would be useful to states considering the development of new incentives.

While information was verified through the state office of rural health, if the contact person was not familiar with a particular program or resource, it could have been inadvertently omitted. Key contact information is included for each state to facilitate follow-up. To report new programs or corrections to this inventory, please contact our office at 303.541.0214.

Since the focus of this inventory was on incentives targeting rural placement, there are likely additional programs and resources for which rural students and providers are eligible but which are not included in this report. Additionally, there are other programs that encourage rural or underserved practice that do not include financial incentives, such as the Conrad State 30 program to place J-1 Visa physicians from other countries to practice in federally designated shortage areas.

## Findings

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The shortage of rural health care professionals in the West has reached critical levels. All WICHE states have at least one incentive program to attract rural health care providers. The policy options utilized in the West include: loan repayment; scholarships, tax credits, residency stipends, payment of malpractice premiums, rural facilities grants, and retention grants.

### Scholarships

Only seven of the 15 states offered scholarship incentives specific to health professionals for rural practice: Alaska, Arizona, California, Colorado, Hawaii, Nevada, and Washington.

- Alaska, Arizona, Nevada and Washington have hybrid scholarship-loan repayment programs that offer accelerated loan forgiveness for rural/underserved areas.
- California's program is funded through federal, state and private foundation funds and is open to physicians, dentists, nurses, licensed mental health professionals, and allied health professionals.
- The scholarship program in Colorado, funded through a private foundation grant and contributions, is open to any type of health professional receiving scholarship support from a rural health care facility. The program matches these local scholarships up to \$1,000.
- Hawaii's program is available only to Native Hawaiians and supports education in any health profession.
- In Washington, the scholarship program is funded through state dollars. Eligible providers included physicians (M.D.s and D.O.s), physician assistants or nurse practitioners, licensed nurses (any licensed level), midwives (certified nurse or licensed nurse), nursing faculty, pharmacists, dentists, and dental hygienists.

### Loan Repayment

The most common financial incentive offered by the states is loan repayment. Of the 15 Western states, 11 offered some type of loan repayment program. Funding for loan repayment programs comes primarily from state sources, with two states (California and Colorado) also using funding from private foundations. One reason loan repayment is common is that the National Health Service Corps (NHSC) – a federal program that encourages health professionals to serve in Health Professional Shortage Areas (HPSA), with scholarship and loan repayment incentives – offers the State Loan Repayment Program (SLRP), in addition to federally administered programs. Eight states participate in the NHSC SLRP, providing the required matching funds from either state dollars or local community sources.

The types of health professionals eligible for loan repayment incentives do not vary much. In all programs, physicians – usually both M.D.s and D.O.s – were eligible. Physician assistants and nurse practitioners were the second most common type of eligible professionals, with 10 states including them. In nine states, dentists and dental hygienists were eligible. States also supported other health professionals:

- Eight states include nurses of various levels.
- Five states include various behavioral health specialties.
- Five states include allied health professionals.
- New Mexico and Oregon include emergency medical services (EMS) providers.
- Washington and Oregon include pharmacists.

## Tax Credits

Colorado and Oregon developed tax credits as an incentive to practice in rural areas.

- Colorado's program was started in 2001 and funded by a state surplus. The program has been inactive for four years because of state fiscal problems. Eligible providers include: physicians, physician assistants, nurse practitioners, certified nurse midwives, clinical nurse specialists, nurse aides, dentists, and dental hygienists. Eligible providers must have outstanding educational loans and work in a rural shortage area at least 20 hours per week for three years.
- Oregon's program is open to physicians, podiatrists, nurse practitioners, physician assistants, dentists, certified registered nurse anesthetists, and optometrists. In 2005 the program was expanded to include volunteer emergency medical technicians (EMTs), with \$250 per year in tax credits.

## Other Incentives

- New Mexico offers a stipend during the final two years of training for health providers who enter into contracts to work in rural underserved areas of the state. Physicians, midlevels, dentists, dental hygienists, and emergency medical technicians are eligible.
- Oregon's Malpractice Insurance Reduction program provides support for the payment of malpractice premiums for rural physicians, particularly those providing obstetric services.
- South Dakota offers grants of up to \$5,000 to help rural health facilities attract nurses and allied health providers.

## Issues for Consideration

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Given the severity of the shortages, current funding levels are woefully insufficient to stem the erosion of rural health care in the West. Nevertheless, before policymakers of WICHE states expand existing programs, it would behoove us as a region to:

- **Evaluate** the effectiveness of our current rural incentive programs. Are they meeting the intended outcomes? Are the financial incentives significant enough to attract a sufficient number of rural providers?
- **Learn** what other Western states are doing and replicate the best incentive models.
- **Share resources.** The shortage of rural health care professionals is a regional issue. What partnerships can we form to attract health care providers to the rural West? WICHE has facilitated regional collaboration for over 50 years; what role can WICHE play in facilitating these partnerships?
- **Consider additional strategies** to attract and retain rural health care providers. These could include:
  - Pipeline programs to attract students from rural areas who are interested in returning to serve.
  - Mandatory rural rotations for students beginning with the first year of their professional education.
  - Increased compensation for rural providers, who are typically paid at lower rates.
  - Vacation relief for rural providers to prevent burn out.
  - Continuing education opportunities for professional growth and colleague interaction.
  - Improving telemedicine infrastructure to reduce the isolation of rural health care providers.

## SUMMARY TABLE

### Inventory of Rural Health Practice Incentives in the Western WICHE States October 2007

	AK	AZ	CA	CO	HI	ID	MT	NV	NM	ND	OR	SD	UT	WA	WY
<b>TYPE OF INCENTIVE</b>															
<b>Scholarship Programs</b>															
M.D./D.O.	S			P										S	
D.D.S.			P	P										S	
Midlevel			P	P				S						S	
Nursing			P	P				S						S	
Behavioral Health				P									S		
Allied Health			P	P				S							
Other				P				S						S	
Students					S/F										
<b>Loan Repayment Programs</b>															
M.D./D.O.	S	S	F/P	P		F	S		S/F	S	S	S	S/F	S/F	S
D.D.S.		S	F/P	S/P		F		S	S/F	S		S	S/F	S/F	S
Midlevel		S	F/P	P		F			S/F	S	S	S	S/F	S/F	S
Nursing			P	P		F		S	S		S		S/F	S	S
Behavioral Health			P	P		F		S					S/F		S
Allied Health			P	P					S/F					S/F	S
Other									S/F	S	S		S/F	S	S
Tax Credits				S		S					S				
<b>Other Financial Incentives</b>		S							S		S	S		S	
<b>FEDERAL PROGRAM PARTICIPATION</b>															
Area Health Ed. Centers (AHEC)	•	•	•	•	•	•	•	•	•	•	•		•	•	•
NHSC Federal Programs	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
NHSC State Loan Repayment		•	•	•					•	•		•	•	•	

#### KEY

- S = State funding
- P = Private funding
- F = Federal funding
- = Participating in program

## ALASKA

### SUMMARY OF PROGRAMS IDENTIFIED

- WWAMI (University of Washington School of Medicine partnership with the states of Wyoming, Alaska, Montana and Idaho)

### SCHOLARSHIP/LOAN REPAYMENT PROGRAM OVERVIEW

#### WWAMI (University of Washington School of Medicine partnership with Wyoming, Alaska, Montana and Idaho)

##### **Description:**

Scholarship and loan repayment.

##### **Funding Source:**

State of Alaska

##### **Annual Funding:**

Information unavailable.

##### **Management/Governance Structure:**

The Alaska Commission on Postsecondary Education (ACPE) is the fiscal agent for the State of Alaska which funds Alaska's WWAMI participation and is the servicer for the WWAMI loan obligation.

##### **History:**

WWAMI is a partnership between the University of Washington's School of Medicine (UWSOM) and the states of Wyoming, Alaska, Montana, and Idaho. The 30-year old program provides access to publicly supported medical education across the five-state region.

Alaska participates in the WWAMI program to address state health care needs by training physicians, advancing knowledge, and assuming leadership in fields of biomedical sciences and academic medicine. Residents of Alaska compete only with other Alaska residents for the positions reserved at the University of Washington's School of Medicine through Alaska's participation in the WWAMI program.

Alaska's WWAMI medical students take their first-year courses at the University of Alaska Anchorage. Students from all WWAMI states take second-year courses in Seattle. The series of clinical clerkships that comprise the third and fourth years of the curriculum may be taken in any of the five WWAMI states. The "Alaska Track" allows students the option to take nearly all of these clerkships in Alaska.

##### **Program Details:**

##### **Providers eligible:**

Students of allopathic medicine/M.D. graduates of the WWAMI program who practice in rural Alaska. Applicants must have physically resided in Alaska for at least two consecutive years immediately prior to matriculation at the University of Washington School of Medicine.

**Amount available per provider:**

Alaska pays the educational costs that are not covered by tuition; the 2006-07 scholarship amount for Alaska WWAMI students was \$21,822.

WWAMI participants must return to Alaska upon completion of the program. A participant who does not return to the state and become employed in the medical field for which the support was provided must repay the financial support plus interest. In accordance with state statute governing the WWAMI program, the financial support to be repaid is equal to 50 percent of the amount the state pays to UWSOM on behalf of the participant, plus interest.

The participant who successfully completes the graduate education program for which the financial support was provided and is employed within Alaska in a qualifying medical residency program or other qualifying professional medical practice and who is otherwise qualified shall have the outstanding principal\* and accrued interest forgiven and considered a grant in accordance with the following percentages:

1. For employment in rural\*\* areas of the state, up to three years of employment at 33<sup>1</sup>/<sub>3</sub> percent for each year;
2. For employment in areas of the state that do not qualify under the program definition as rural, up to five years of employment at 20 percent for each year.

Participants who initially practice medicine in a rural community will receive their first forgiveness of 33<sup>1</sup>/<sub>3</sub> percent of the loan after their first year of practice. If the participant should then choose to move to a non-rural community and practice medicine, he or she will then receive forgiveness benefits of 20 percent of the remaining loan amount for each year they practice medicine until the balance of the loan is forgiven. The same is true for a participant who practices medicine in a non-rural community and receives forgiveness of 20 percent of the loan and then moves to a rural community to practice medicine. The subsequent forgiveness will be for 33<sup>1</sup>/<sub>3</sub> percent of the remaining loan balance until the loan balance is forgiven.

Forgiveness Benefit	Forgiveness % for all rural practice	Forgiveness % for 2 years of rural practice	Forgiveness % for 1 year of rural practice	Forgiveness % for all non-rural practice
1	33 <sup>1</sup> / <sub>3</sub> %	33 <sup>1</sup> / <sub>3</sub> %	33 <sup>1</sup> / <sub>3</sub> %	20%
2	66 <sup>2</sup> / <sub>3</sub> %	66 <sup>2</sup> / <sub>3</sub> %	53 <sup>1</sup> / <sub>3</sub> %	40%
3	100%	86 <sup>2</sup> / <sub>3</sub> %	73 <sup>1</sup> / <sub>3</sub> %	60%
4		100%	93 <sup>1</sup> / <sub>3</sub> %	80%
5			100%	100%

**Match requirements:**

None.

**Eligibility requirements/preferences:**

Students of allopathic medicine/M.D. graduates of the WWAMI program who practice in rural Alaska.

## ALASKA

### Program Results:

Numbers/types placed:

The State of Alaska recently doubled the number of new medical (M.D.) students to be admitted to the program. Beginning with the entry class of 2007, 20 Alaska residents will be admitted into the program each year.

*\* No amount due and payable prior to the participant entering deferment or forgiveness-qualifying employment is subject to forgiveness.*

*\*\* "Rural" is defined in Alaska law as a community with a population of 7,500 or less that is not connected by road or rail to Anchorage or Fairbanks or with a population of 3,500 or less that is connected by road or rail to Anchorage or Fairbanks.*

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## LEGISLATION

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AK H.B. 16, 25TH LEGISLATURE, FIRST SESSION, HOUSE BILL 16: Introduced January 5, 2007.

*Relates to the repayment provisions for medical education and postsecondary degree program participants.*

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## ARIZONA

### SUMMARY OF PROGRAMS IDENTIFIED

- Arizona Loan Repayment Program
- Arizona Medical Student Loan Program
- Western Interstate Commission for Higher Education – Professional Student Exchange Program

### SCHOLARSHIP PROGRAM OVERVIEW

None identified.

### LOAN REPAYMENT PROGRAM OVERVIEW

#### ARIZONA LOAN REPAYMENT PROGRAM

**Description:**

Loan repayment.

**Funding Source:**

State of Arizona and National Health Service Corps (NHSC) State Loan Repayment Program (SLRP).

**Annual Funding:**

The total amount is \$350,000, \$100,000 of which is from federal funds.

**Management/Governance Structure:**

Arizona Office of Health Systems Development.

**History:**

The program started in 1994.

**Program Details:**

**Providers eligible:**

To provide an incentive for primary care providers and dentists to provide services in the underserved areas of the state. Program funds are used to repay qualifying educational loans in return for primary care service provision in federally designated Health Professional Shortage Areas (HPSA)s.

**Amount available per provider:**

Contract Year	Physicians and Dentists			PAs, NPs, and CNMs		
	Priority 1	Priority 2	Priority 3	Priority 1	Priority 2	Priority 3
1st year	\$20,000	\$18,000	\$16,000	\$7,500	\$6,000	\$5,000
2nd year	\$20,000	\$18,000	\$16,000	\$7,500	\$6,000	\$5,000
3rd year	\$22,000	\$20,000	\$18,000	\$9,000	\$7,500	\$6,500
4th year	\$25,000	\$22,000	\$20,000	\$10,500	\$9,000	\$8,000

Actual award amounts may differ from the above guidelines, dependent on the availability of funds.

**Match requirements:**

None.

**Eligibility requirements/preferences:**

Arizona licensed and/or certified physicians, dentists, nurse practitioners, certified nurse midwives, and physician assistants are eligible. General practice, family medicine, dentistry, obstetrics/gynecology, pediatrics, or internal medicine are eligible specialties.

Must be a United States citizen; have a valid offer of employment at an eligible service site; be willing to contract with the state of Arizona to serve full-time for a minimum of two years providing primary care services at the approved service site; be appropriately licensed and/or certified; and have no other unfulfilled obligations.

For organizations: Must be a nonprofit organization, accept Arizona Health Care Cost Containment System (AHCCCS) and Medicare assignments; have a sliding-discount-to-fee scale in place; be located in a federally designated HPSAs.

**Program Results:**

**Number/types placed:**

Fifteen providers contracted through 2005; 10 providers are located in rural communities. In 2006 there were 25-30 loan repayors.

**Contact Information:**

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## ARIZONA

### ARIZONA MEDICAL STUDENT LOAN PROGRAM

#### Description:

Student loan program.

#### Funding Source:

State of Arizona.

#### Annual Funding:

Arizona Medical Student Loan Repayment Program had \$1.8 million budgeted for academic year 2006-07; the same amount is anticipated for FY 2007-08.

#### Management/Governance Structure:

Individual universities, as listed in contact information above.

#### History:

The initial program began in the 1978-79 academic year by the Arizona Legislature and was for medical students going to rural areas and underserved urban areas. In 1993 the program emphasized recruiting primary care physicians, and more money was appropriated. In 1999 the program added doctors of osteopathy (D.O.s), as well as Arizona's private school of osteopathic medicine. In the early years, the amount included tuition plus some living expenses. Now the program covers the cost of tuition of the public school of allopathic medicine and private schools of osteopathic medicine, plus a living allowance. Other specialties of recognized need, as approved by the Board, are also allowed.

#### Program Details:

##### Providers eligible:

Full-time M.D.s or D.O.s practicing in locations listed below (A.R.S. § 15-1721):

- (1) A rural and medically underserved area of Arizona.
- (2) A medically underserved area of Arizona.
- (3) A medically underserved population of Arizona.
- (4) Any Indian reservation that is located in Arizona.

Primary care providers and dentists who practice in underserved areas of the state are eligible. Program funds are used to repay qualifying educational loans in return for primary care service provision in federally designated HPSAs.

##### Amount available per provider:

The minimum amount of funding per year is the cost of medical school tuition (\$15,786 for 2006-2007 at the University of Arizona's College of Medicine). The law also allows for a living allowance up to \$20,000. The maximum loan, which may vary yearly, is set by law and is subject to the availability of funds. In 2006-2007, the maximum amount approved by the Board of Medical Student Loans was \$35,786 for University of Arizona College of Medicine students.

Inventory of Rural Health Practice Incentives  
in the Western WICHE States

**ARIZONA**

Contract Year	Physicians and Dentists			PAs, NPs, and CNMs		
	Priority 1	Priority 2	Priority 3	Priority 1	Priority 2	Priority 3
1st year	\$20,000	\$18,000	\$16,000	\$7,500	\$6,000	\$5,000
2nd year	\$20,000	\$18,000	\$16,000	\$7,500	\$6,000	\$5,000
3rd year	\$22,000	\$20,000	\$18,000	\$9,000	\$7,500	\$6,500
4th year	\$25,000	\$22,000	\$20,000	\$10,500	\$9,000	\$8,000

NOTE: Actual award amounts may differ from the above guidelines, dependent on the availability of funds.

**Match requirements:**

None

**Eligibility requirements/preferences:**

Students at three colleges in Arizona currently qualify for consideration: students seeking an M.D. at the University of Arizona College of Medicine; students seeking a D.O. at Midwestern University's Arizona College of Osteopathic Medicine (AZCOM); or D.O. candidates at A.T. Still University's College of Osteopathic Medicine-Mesa (ATSU COM-Mesa). Students must meet the Arizona residency requirements, as defined by state law for resident tuition purposes.

Arizona licensed and/or certified physicians, dentists, nurse practitioners, certified nurse mid-wives, and physician assistants are eligible. General practice, family medicine, dentistry, obstetrics/gynecology, pediatrics, or internal medicine are eligible specialties.

**Program Results:**

**Number/types placed:**

In 2006, 36 allopathic and osteopathic residents received \$1.5 million in support.

**Additional information:**

The applicant is expected to apply for financial aid utilizing the Free Application for Federal Student Aid (FAFSA) and apply for the program through his/her university's office of student financial aid. The Arizona Medical Student Loan Program gives preference to qualified applicants who demonstrate a commitment to serve in underserved areas and who intend to become board-certified in family practice, general pediatrics, obstetrics and gynecology, general internal medicine, or combined medicine and pediatrics. The board may consider other specialties of recognized need in the State of Arizona, but the specialty must be approved by the board. Preference is given to applicants who want to practice medicine in Arizona, would prefer an Arizona residency program, and who demonstrate financial need.

## ARIZONA

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[www.midwestern.edu/finaid](http://www.midwestern.edu/finaid)

Debbie Richards  
Assistant Director  
Student Financial Services Office  
A.T. Still University  
5850 E. Still Circle  
Mesa, AZ 85206  
Tel: 480.219.6117  
drichards@atsu.edu  
[www.atstu.edu/financial\\_aid/soma/scholarships\\_awards.htm](http://www.atstu.edu/financial_aid/soma/scholarships_awards.htm)

## OTHER INCENTIVES

### Western Interstate Commission for Higher Education – Professional Student Exchange Program (PSEP)

#### Description:

Student tuition assistance with a shortage-area service option for accelerated service payback.

#### Funding source:

State of Arizona.

#### Annual funding:

The State of Arizona appropriated almost \$3.9 million in tuition support for its students in the 2007-08 academic year. The exact number of graduates practicing in rural areas is unknown.

**Management/governance structure:**

Arizona Board of Regents.

**History of program:**

Arizona began participating in WICHE’s PSEP in 1953. The state added the accelerated payback option some time in the 1970s.

**Program details:**

**Providers eligible:**

Dentists, occupational therapists, optometrists, physicians (D.O.s), physician assistants, and veterinarians are eligible.

**Amount available per provider:**

Support varies by provider type. Students enrolled in a cooperating WICHE program at a public institution that is located outside of the State of Arizona pay resident tuition; students enrolled in a cooperating WICHE program at a private institution pay reduced tuition (full private tuition, less the WICHE support fee). Support fees for the 2007-08 academic year are: \$20,600 for dentistry; \$10,700 for occupational therapy; \$14,100 for optometry; \$17,600 for osteopathic medicine; \$10,500 for physician assistant; and \$26,300 for veterinary medicine.

**Match requirements:**

None.

**Eligibility requirements/preferences:**

Competitive program. Applicants must be Arizona residents. Recipients must agree to practice in Arizona. An accelerated payback is given to graduates of this program who agree to practice in a designated shortage area; these professionals will receive one year of state service credit for each six months of practice. Students not serving in a shortage area receive only a year’s credit for each year of practice. Students must attend a cooperating WICHE program as listed at: [www.wiche.edu/sep/psep](http://www.wiche.edu/sep/psep). Applicants must apply by October 15th of the year prior to their enrollment in a cooperating professional program.

**Program results:**

Not available.

**Contact Information:**

Louise Lynch  
Certifying Officer for Arizona  
WICHE Student Exchange Program (SEP)  
Arizona Board of Regents  
2020 North Central Ave., Ste. 230  
Phoenix, AZ 85004  
Tel: 602.229.2563  
[llynch@asu.edu](mailto:llynch@asu.edu)  
[www.abor.asu.edu/4\\_special\\_programs/wiche/psep.html](http://www.abor.asu.edu/4_special_programs/wiche/psep.html)

## ARIZONA

### Arizona Contacts

#### State Office of Rural Health (SORH)

Lynda Bergsma  
Program Director  
Rural Health Office  
University of Arizona  
Mel and Enid Zuckerman College of  
Public Health  
2501 East Elm St.  
Tucson, AZ 85716  
Tel: 502.626.2401  
lbergsma@U.Arizona.edu  
www.rho.arizona.edu/

#### Primary Care Office (PCO)

Patricia Tarango  
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National Health Service Corps and  
Primary Care Office  
Arizona Bureau of Health Systems  
Development  
Arizona Department of Health Services  
1740 West Adams, Room 410  
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Tel: 602.542.1436  
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vallef@azdhs.gov

#### NASC Contact: Tanja James

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#### HPSA Contact: Tracy Lenartz

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#### Primary Care Association (PCA)

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#### Area Health Education Center (AHEC)

Sally Reel  
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Arizona AHEC Program-COPH  
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## CALIFORNIA

### SUMMARY OF PROGRAMS IDENTIFIED

- Allied Healthcare Scholarship Program
- Associate Degree Nursing Program
- Bachelor of Science Nursing Scholarship and Loan Repayment Programs
- Health Professions Education Scholarship and Loan Repayment Programs
- Steven M. Thompson Physician Corps Loan Repayment Program
- Vocational Nurse Scholarship and Loan Repayment Programs
- National Health Service Corps/State Loan Repayment Program (SLRP)

### SCHOLARSHIP PROGRAM OVERVIEW

#### SCHOLARSHIP and LOAN REPAYMENT PROGRAM

##### Description:

To improve health care in underserved areas of California by supporting the development of health professionals who agree to serve in areas of high need. The mission is accomplished by awarding scholarships and loan repayments to health professional students and graduates who will provide direct patient care in medically underserved areas. Practice sites may be rural or urban. The programs administered by the foundation are:

- Allied Healthcare Scholarship Program.
- Associate Degree Nursing and Pre-Nursing Scholarship Programs.
- Bachelor of Science Nursing Scholarship and Loan Repayment Programs.
- Health Professions Education Scholarship and Loan Repayment Programs.
- Steven M. Thompson Physician Corps Loan Repayment Program.
- Vocational Nurse Scholarship and Loan Repayment Programs.

##### Funding Source:

The foundation administers its programs from four funds established by state legislation. The Health Professions Education Fund is funded entirely through grants and contributions from public and private agencies, hospitals, health plans, foundations, corporations, and individuals. These funds support newly implemented programs and special projects.

##### Annual Funding:

Not available.

##### Management/Governance Structure:

The foundation administers six scholarship and loan repayment programs for health professional students and graduates. All program recipients are required to provide direct patient care in a medically underserved area of California as designated by the Office of Statewide Health Planning and Development. The period of obligated professional service is one to three years, depending upon the program.

##### History:

In the 1980s California faced an acute shortage of health professionals in its inner cities and rural communities. Health professionals practicing in those areas were predominantly themselves members of those communities. One effective strategy that evolved to increase the number of health professionals serving in medically

underserved areas was to support students from demographically underrepresented groups who were pursuing an education in a health profession.

The foundation was established in 1987 as a nonprofit public-benefit corporation to encourage and support the participation of health-professions students and graduates from underserved communities and economically disadvantaged backgrounds and to increase their professional service in medically underserved areas upon completion of their education. The foundation administers scholarship and loan repayment programs to health professional students and graduates. In return, program recipients agree to provide direct patient care in a medically underserved area of California.

**Program Details:**

**Providers eligible:**

Student nurses, all nursing and allied health professionals, physicians, and dentists.

**Amount available per provider:**

The amounts vary by type of provider and length of service. The amounts range from \$4,000 to \$105,000. The period of commitment is one to three years.

**Match requirements:**

None.

**Eligibility requirements/preferences:**

Providers must be currently working or planning to work with underserved populations.

**Program Results:**

Number/types placed:

Since 1990, the foundation has awarded scholarships and loan repayments totaling over \$11.5 million. These awards have helped over 1,700 students and graduates to fulfill their dream of pursuing a career in the health professions and caring for underserved populations. There is also an endowment fund of over \$1.7 million. The interest on the endowment fund is used to support special projects and newly implemented programs.

**Contact Information:**

Glen Padayachee, SSM II  
Director of Programs Administration  
Health Professions Education Foundation  
400 R St., Room 330  
Sacramento, CA 95811  
Tel: 800.773.1669 (in California); 916.326.3642 (outside of California)  
hfep-email@oshpd.ca.gov  
[www.healthprofessions.oshpd.state.ca.us/genfacts.htm](http://www.healthprofessions.oshpd.state.ca.us/genfacts.htm)

## CALIFORNIA

## LOAN REPAYMENT PROGRAM OVERVIEW

### NATIONAL HEALTH SERVICE CORPS LOAN REPAYMENT PROGRAM

#### Description:

The NHSC State Loan Repayment Program (SLRP) assists with educational loans for select primary and mental health care providers who agree to practice in Health Professional Shortage Areas (HPSAs), within the State of California, for a minimum of two years.

The office administers SLRP under a grant from the federal government. Under SLRP the office is authorized to repay outstanding government and commercial loans (only) of health professionals holding current California licenses for expenses incurred during undergraduate or graduate education. Educational expenses are limited to: principal, interest, related expenses for tuition, educational expenses, and reasonable living costs. Award recipients are responsible for paying any interest that accrues on their loans during the application process and subsequent service obligation period.

#### Funding Source:

NHSC federal funds to the state; the practice site provides matching funds.

#### Annual Funding:

The state's grant request is based on the projected number of communities and providers.

#### Management/Governance Structure:

The NHSC State Loan Repayment Program is located in the California Office of Statewide Health Planning and Development, Healthcare Workforce Development Division, in Sacramento.

#### History:

No history found.

#### Program Details:

##### Providers eligible (only primary care medical, dental, and mental health):

Physicians (M.D.s and D.O.s) specializing in: family practice, general internal medicine, general pediatrics, obstetrics/gynecology, and general psychiatry; physician assistants; nurse practitioners; certified nurse-midwives; psychiatric nurse specialist; general practice dentists (D.D.S. or D.M.D.); dental hygienist; clinical or counseling psychologists; clinical social workers; licensed professional counselors, and marriage and family therapists.

##### Amount available per provider:

Up to \$25,000 per year for the first two years; up to \$35,000 for years three and four. Two year minimum participation in the program; four years maximum.

##### Student Loan Repayment Program award amounts:

Health Professionals may be granted up to the following amounts, and payments are made directly to the lenders:

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## Inventory of Rural Health Practice Incentives in the Western WICHE States

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## CALIFORNIA

Service Year	State Award	Practice Site Match	Yearly Totals
1	\$12,500	\$12,500	\$25,000
2	\$12,500	\$12,500	\$25,000
3	\$17,500	\$17,500	\$35,000
4	\$17,500	\$17,500	\$35,000
Award Total			\$120,000

Note: As of January 1, 2004, loan repayment awards from both the state and the practice site are not considered personal income and are therefore not taxable.

### Match requirements:

The practice site provides matching funds.

### Eligibility requirements/preferences:

Primary care medical, dental and mental health professionals who are providing full-time direct patient care in a public or nonprofit facility located in a federally designated HPSA, within the State of California, are eligible for this program. Sites may be rural, urban, or frontier.

### Program Results:

#### Number/types placed:

In 2006-07, 42 California health professionals received placement awards.

### Contact Information:

Sondra Jacobs  
Program Administrator  
Healthcare Workforce Development Division  
Office of Statewide Health Planning & Development  
400 R St., Room 330  
Sacramento, CA 95811  
Tel: 916.326.3745  
slrp@oshpd.ca.gov or sjacobs@oshpd.ca.gov  
www.oshpd.ca.gov

Angela Minniefield  
Deputy Director  
Healthcare Workforce Development Division  
Office of Statewide Health Planning Development  
400 R St., Room 330  
Sacramento, CA 95811  
Tel: 916.326.3704  
aminnief@oshpd.ca.gov

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## OTHER INCENTIVES

None identified.

## CALIFORNIA

### LEGISLATION

CA A.B. 17, ASSEMBLY BILL 17: California Dental Corps Loan Repayment Program.

This legislation, introduced during the 2007-08 regular session, requires the Dental Board to provide an opportunity for an applicant for the issuance or renewal of a dentistry license to make a specified contribution. It specifies that payment of the contribution is voluntary and directs the deposit of the contributions received into the Dentally Underserved Account for the state Dental Corps Loan Repayment Program, which is used to repay loans per agreement with dentists who practice in underserved areas.

CA A.B. 611 - The California Physician Assistant Scholarship and Loan Repayment Program was introduced during the 2007-08 regular session.

It creates the Physician Assistant Scholarship and Loan Repayment Program to provide scholarships to physician assistant students and to repay qualifying educational loans of physician assistants who practice in medically underserved areas and specified clinics. It directs the deposit of voluntary contributions made by a physician assistant upon renewal of his or her license into the fund.

CA S.B. 478 - The Physicians and Surgeons Loan Repayment Bill was introduced during the 2007-08 regular session.

It expresses the legislature's intent to establish a loan repayment program for educational expenses incurred by physicians and surgeons who practice in areas deficient in physician services or who treat patients who are without health care coverage. The bill has not been referred to a committee.

CA S.B. 615 - The Pharmacy Technicians Scholarship and Loan Repayment Program was introduced during the 2007-08 regular session.

It requires the state board of pharmacy to collect an additional fee at the time when a pharmacy license or pharmacy technician license is renewed, to be deposited in the state Pharmacy Technician Scholarship and Loan Repayment Program Fund, which also is created by this act. It establishes the Pharmacy Technician Scholarship and Loan Repayment Program. The legislation has been referred to the Appropriations Committee.

## California Contacts

### State Office of Rural Health (SORH)

Sandra "Sam" Willburn  
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Office of Primary and Rural Health Care  
California Dept. of Health Care Services  
1615 Capitol Ave., Ste. 73.460, MS 8501  
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Tel: 916.449.5770  
sandra.willburn@DHCS.ca.gov  
www.prh.dhs.ca.gov/Programs/CalSORH/

### Primary Care Office (PCO)

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### Primary Care Association (PCA)

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### Area Health Education Center (AHEC)

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Tel: 559.241.7650  
jblossom@fresno.ucsf.edu  
www.cal-hetc.org

## COLORADO

### SUMMARY OF PROGRAMS IDENTIFIED

- Marva Jean Jackson Rural Community Health Scholarship Program
- Hermosa Creek/UCDHSC School of Medicine Rural Track Scholarship
- Colorado Rural Outreach Program (CROP)
- Physician Loan Repayment Program
- State Dental Loan Repayment
- Colorado Health Professional Loan Repayment Program
- Colorado State Income Tax Credit Program

### SCHOLARSHIP PROGRAM OVERVIEW

#### MARVA JEAN JACKSON RURAL COMMUNITY HEALTH SCHOLARSHIP PROGRAM

**Description:**

Small grants that help pay for the training and/or education of a local health care provider are available for rural facilities or community groups.

**Funding Source:**

Private foundation grant and a portion of State Office of Rural Health (SORH) general operating revenues.

**Annual Funding:**

\$10,000 to \$20,000 per year.

**Management/Governance Structure:**

State Office Rural Health–Colorado Rural Health Center (CRHC).

**History:**

Created in 2003.

**Program Details:****Providers eligible:**

Any rural health care professional – physician, nurse, emergency medical services, techs, etc.

**Amount available per provider:**

Up to \$1,000 a year. Awards are made for one year, but applicants can reapply in subsequent years.

**Match requirements:**

CRHC will match, two-to-one, the support provided by the facility or community, up to \$1,000 a year. Funds go to the facility, not the provider, to encourage “grow-your-own” programs among rural facilities.

**Eligibility requirements/preferences:**

Facility or community must be rural.

**Program Results:**

Number/types placed:

26 health care professionals in 2006.

**Contact Information:**

Cherith Chapman

Provider Recruitment Coordinator

Colorado Rural Health Center

225 E. 16th Ave., Ste. 1050

Denver, CO 80203

Tel: 303.996.9698

cc@coruralhealth.org

www.coruralhealth.org/crhc/programs/Documents/MJJ\_factsheet.pdf

**HERMOSA CREEK/UNIVERSITY OF COLORADO SCHOOL OF  
MEDICINE RURAL TRACK MEDICAL SCHOLARSHIP**

**Description:**

Scholarship.

**Funding Source:**

Private and endowment funds.

**Annual Funding:**

Pending.

**Management/Governance Structure:**

Administered by the Office of Student Affairs of the University of Colorado's School of Medicine.

**History:**

Funded in 2007 by a gift from the Hermosa Creek community.

**Program Details:**

**Providers eligible:**

Students of allopathic medicine who participate in the University of Colorado's Rural Track and agree to practice in rural Colorado. The University of Colorado School of Medicine's Rural Track is a new program designed to encourage and support rural practice. It identifies students interested in rural practice and provides them with mentorship, additional knowledge, broad skills, and rural socialization experiences.

**Amount available per provider:**

New program, funding amounts for 2008 are pending.

**Match requirements:**

None.

**COLORADO** Eligibility requirements/preferences:

Students must be from a rural community and have plans to practice in a rural community upon graduation.

**Program Results:**

**Number/types placed:**

New program, no statistics available.

**Contact Information:**

John Westfall, M.D.  
Chair, Scholarship Committee  
Tel. 303.724.0360  
c/o Cindy Jameson  
UCDHSC  
4200 East 9<sup>th</sup> Ave.  
Box C-292  
Denver, CO 80262

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## **LOAN REPAYMENT PROGRAMS OVERVIEW**

### **COLORADO RURAL OUTREACH PROGRAM (CROP)**

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**Description:**

Loan repayment.

**Funding Source:**

Private foundation.

**Annual Funding:**

Approximately \$230,000 per year, for three years. Funding ends December 2007; uncertain as to whether program will be sustained.

**Management/Governance Structure:**

State Office of Rural Health.

**History:**

Started with the Colorado Medical Society in 1998 and moved to CRHC in 2004. Funded through private foundations and donations.

**Program Details:**

**Providers eligible:**

All health care providers are now eligible, including: physicians, nurse practitioners, physician assistants, nurses, providers of mental and dental health services, allied health providers (i.e., lab or radiology technicians and pharmacy technicians).

**Amount available per provider:**

Up to \$10,000 per year. Support is awarded yearly; loan repayors can reapply.

## COLORADO

### **Match requirements:**

One-to-one community match required. Based on circumstances and need, match can be reduced.

### **Eligibility requirements/preferences:**

Applicants must be located in rural Colorado and must be a public, nonprofit, or private organization. The Colorado Rural Health Outreach Program (CROP) does not award grants to individuals, only to communities, organizations, or facilities.

### **Default provisions:**

Payment is made at the end of the provider's year of service.

### **Program Results:**

#### **Number/types placed:**

For the spring 2007 round of CROP awards, CRHC received 31 applications; 23 grants were awarded for a total of \$121,650. The providers were: seven family physicians; other physicians (one emergency room, one pediatrics, one obstetric/gynecology), one audiologist, one med lab tech, one registered nurse, one family nurse practitioner, and eight physician assistants.

### **Contact Information:**

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[www.coruralhealth.org/crhc/programs/Documents/MJJ\\_factsheet.pdf](http://www.coruralhealth.org/crhc/programs/Documents/MJJ_factsheet.pdf)

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## **PHYSICIAN LOAN REPAYMENT PROGRAM**

### **Description:**

Loan repayment.

### **Funding Source:**

Private foundation.

### **Annual Funding:**

In 2006, funding covered one physician loan repayment (up to \$35,000 a year for up to three years). Funds will be added for up to three physicians a year in future years. The program is funded for a total of 10 years.

### **Management/Governance Structure:**

The program is managed for the foundation by the SORH – CRHC.

### **History:**

Started in 2006.

## COLORADO

### Program Details:

#### Providers eligible:

Only third-year residents graduating in family practice or general internal medicine who agree to a three-year service commitment in rural Colorado are eligible.

#### Amount available per provider:

Up to \$35,000 per year, for up to three years.

#### Match requirements:

Community is expected to match up to 25 percent of loans repaid, but, based on circumstances and need, match can be reduced or waived.

#### Eligibility requirements/preferences:

Residents in the foundation's three primary care residencies are given preference. If none match, eligibility is open to any of Colorado's primary care residents.

#### Default provisions:

Payment is made at the end of the provider's year of service.

### Program Results:

#### Number/types placed:

In 2006, one physician was placed. So far in 2007, one physician has been placed.

#### Contact Information:

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225 E. 16th Ave., Ste. 1050  
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[www.coruralhealth.org/crhc/programs/Documents/MJJ\\_factsheet.pdf](http://www.coruralhealth.org/crhc/programs/Documents/MJJ_factsheet.pdf)

## STATE DENTAL LOAN REPAYMENT

### Description:

This program provides funding for dentists and hygienists to pay back dental educational loans for practice with underserved populations.

### Funding Source:

State funds from tobacco settlement.

### Annual Funding:

\$243,466 for 2004-05.

### Management/Governance Structure:

The Primary Care Office collaborates with the Oral Health Program at the Colorado Department of Public Health and Environment.

**History:**

Authorized by Colorado General Assembly in 2001.

**Program Details:**

**Providers eligible:**

Dentists and dental hygienists.

**Amount available per provider:**

Dentists (D.D.S.) and dental hygienists (D.H.) are eligible and ranked according to number of underserved patients per month and paid loan repayment funds accordingly. Dentists may receive from \$10,000-\$25,000 per year. Hygienists may receive from \$3,000-\$6,000 per year.

**Match requirements:**

None.

**Eligibility requirements/preferences:**

Licensed dentists and dental hygienists.

**Program Results:**

**Number/types placed:**

In 2004-05, 13 dentists and seven dental hygienists received support.

**Contact Information:**

Diane Brunson  
Director of Oral Health  
Colorado Department of Public Health & Environment  
4300 Cherry Creek Drive South  
Denver, CO 80246-1530  
Tel: 303.692.2428  
diane.brunson@state.co.us  
www.cdph.state.co.us/pp/primarycare/workforce

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**COLORADO HEALTH CARE PROVIDER LOAN REPAYMENT PROGRAM**

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**Description:**

Loan repayment for primary care health professionals.

**Funding Source:**

The National Health Service Corps (NHSC) grants funds to the University of Colorado Health Sciences Center's Area Health Education Center (AHEC) program.

**Annual Funding:**

\$50,000, based on a Colorado grant request to the NHSC.

## COLORADO

### **Management/Governance Structure:**

The Colorado Health Professions Loan Repayment Program (CHPLRP) was sponsored by the University of Colorado Health Sciences Center (UCHSC) in conjunction with the Colorado Department of Public Health and Environment and the Colorado Community Health Network. This program is administered by UCHSC's Colorado AHEC program, with matching loan funds provided by the NHSC.

### **History:**

Legislated by the Colorado General Assembly in 1991, but without state funding.

### **Program Details:**

#### **Providers eligible:**

Physicians, family medicine (M.D.s and D.O.s), internal medicine, general pediatrics, obstetrics and gynecology, psychiatry, primary care dentists, physician assistants, nurse practitioners, certified nurse-midwives, dental hygienists, clinical/counseling psychologists, clinical social workers, psychiatric nurse specialists, mental health counselors, licensed professional counselors, and marriage and family therapists.

#### **Amount available per provider:**

The program will repay qualified educational loans of up to \$70,000 or a maximum of \$20,000 a year for each primary health care provider.

#### **Match requirements:**

Community/employing site must pay 50 percent of Loan Repayment Program funds for providers.

#### **Eligibility requirements/preferences:**

Providers must agree to practice in federally designated Health Professional Shortage Areas (HPSAs). Communities, as well as the health care providers, must meet federal participation requirements.

### **Program Results:**

#### **Number/types placed:**

Six current placements; total placed is 24.

### **Contact Information:**

Lynn Tindall  
Chief Operation and Compliance Officer  
CollegeInvest  
1801 Broadway, Suite 1300  
Denver, CO 80202  
Tel: 303.376.8819  
ltindall@collegeinvest.org  
www.collegeinvest.org

## OTHER INCENTIVES

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## COLORADO

### COLORADO STATE INCOME TAX CREDIT

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**Description:**

State tax credit.

**Funding Source:**

State of Colorado.

**Annual Funding:**

Not applicable.

**Management/Governance Structure:**

Colorado Department of Public Health and Environment.

**History:**

The program began in approximately 2001.

**Program Details:****Providers eligible:**

Physicians, physician assistants, nurse practitioners, certified nurse midwives, clinical nurse specialists, nurse aides, dentists, and dental hygienists with educational loans.

**Amount available per provider:**

State income tax credit, not to exceed the amount of the provider's loans.

**Match requirements:**

None.

**Eligibility requirements/preferences:**

Providers must practice in rural shortage areas, as defined by the state; three years of service is required, at a minimum of 20 hours per week.

**Program Results:****Number/types placed:**

Not found; the program estimated that 100-200 providers could qualify.

**Contact Information:**

Colorado State Income Tax Credit  
Colorado Dept. of Public Health and Environment  
4300 Cherry Creek Drive South  
Denver, CO 80246-1530  
Tel: 303.692.2035  
[www.cdphe.state.co.us/](http://www.cdphe.state.co.us/) (search on Tax Credit)

## COLORADO

## LEGISLATION

SB 07-232: Health Professional Loan Repayment Program.

Passed and signed by the governor. Concerns payment of education loans for health professionals who agree to work in medically underserved areas of the state. Eligible providers – physicians, nurse practitioners, certified nurse-midwives, licensed mental health practitioners, and physician assistants. Requires two years of service, minimum. Funded for \$500,000 in June 2007. Health professionals may receive up to \$35,000 per year of participation in the program. Loan repayment is only available for those professionals who have loans with Collegenest, a state enterprise to provide a secondary market for student lenders. The funding level for the Health Care Provider Loan Repayment Program is expected to be \$220,000 each year.

### Colorado Contacts

#### State Office of Rural Health (SORH)

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Denver, CO 80203  
Tel: 303.832.7493  
th@coruralhealth.org  
www.coruralhealth.org/crhc/  
crop/index.html

#### Primary Care Office (PCO)

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primarycare/workforce

#### Primary Care Association (PCA)

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#### Area Health Education Center (AHEC)

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## HAWAII

### SUMMARY OF PROGRAMS IDENTIFIED

- Native Hawaiian Health Scholarship Program (NHHSP)

#### SCHOLARSHIP PROGRAM OVERVIEW

##### NATIVE HAWAIIAN HEALTH SCHOLARSHIP PROGRAM

###### Description:

Scholarship.

###### Funding Source:

The program is funded by the U. S. Department of Health and Human Services, Bureau of Clinician Recruitment Services (BCRS), Bureau of Health Professions.

###### Annual Funding:

Not available.

###### Management/Governance Structure:

The Native Hawaiian Health Scholarship Program (NHHSP) is administered by Papa Ola Lokahi (POL). The agency collaborates with the Native Hawaiian Health Care Systems, community health centers, Native Hawaiian organizations, federal and state agencies and the community-at-large to enhance health services for Native Hawaiians and their families.

###### History:

NHHSP is authorized by the Native Hawaiian Health Care Improvement Act of 1992 (P.L. 102-396).

###### Program Details:

###### Providers eligible:

Native Hawaiians.

###### Amount Available per Provider:

NHHSP provides a monthly stipend of \$1,065 (before taxes) to scholarship recipients to cover living expenses.

Scholarships cover up to four years of education or the number of years the recipient requests or has left in his or her program. The scholarship does not cover the cost of residencies, fellowships, or internships.

###### Match Requirements:

None.

###### Eligibility Requirements/Preferences:

In return for each year of support, program recipients provide one year of service in (in order of priority): (i) any one of the five Native Hawaiian health care systems; or (ii) a Health Professional Shortage Area (HPSA) located in Hawaii or a geographic area or facility in Hawaii that is similarly designated by the United States Public Health Service. The minimum service obligation is two years, the maximum is four years. The service obligation begins after the recipient completes the professional

course of study funded by the program and licensure, if required. Scholars relocate to perform their service obligation.

**HAWAII**

**Program Results:**

**Number/types placed:**

Not available.

**Contact Information:**

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**LOAN REPAYMENT PROGRAM OVERVIEW**

None identified.

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**OTHER INCENTIVES**

None identified.

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**LEGISLATION**

HI H.B. 76, THE 24TH STATE LEGISLATURE, HOUSE BILL 76

Establishes interest-free home-purchase loan programs for physicians and advanced-practice registered nurses to provide them with an incentive to work in hard-to-staff rural areas; relates to loan incentives. Introduced in January 2007, but did not pass.

HI H.B. 223, THE 24TH STATE LEGISLATURE, HOUSE BILL 223

This bill was introduced on January 18, 2007 to earmark general excise taxes generated from providers of health care services to support subsidies for hospital on-call services; emergency transport services, rural-hospital-health-care services; affordable health care for part-time workers who are ineligible for employer-provided health insurance under the Prepaid Health Care Act; and support services for people without health insurance. The bill did not pass.

HI H.B. 1119, THE 24TH STATE LEGISLATURE, HOUSE BILL 1119

This bill was introduced January 22, 2007, but did not pass. It proposed stabilizing the Family Medicine Residency Program and access to primary care services in central and northern Oahu for two years. It also proposed developing the Hawaii Island Family Medicine Rural Training Track, which expands the number of family physicians training in the state.

## HAWAII

HI H.B. 1477, THE 24TH STATE LEGISLATURE, HOUSE BILL 1477

Appropriates funds to develop a statewide rural training model to provide a pipeline of well-trained family physicians to improve health care access and meet the future health needs of the people of Hawaii. This bill became law on July 10, 2007.

HI S.C.R. 197, THE 24TH STATE LEGISLATURE, SENATE CONCURRENT RESOLUTION 197

This bill was Introduced on March 14, 2007. Encourages the counties to form partnerships with the state and private sector to cover the costs of health care infrastructure and overhead for primary care and specialty physicians practicing medicine in Hawaii's rural areas. The resolution was adopted by both the house and senate, and copies were sent to the governor, mayors, the director of health, and the executive director of the Healthcare Association of Hawaii on May 9, 2007.

**Hawaii Contacts**

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**Other Contacts**

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## IDAHO

### SUMMARY OF PROGRAMS IDENTIFIED

- Rural Health Care Access Program (RHCAP)

### SCHOLARSHIP PROGRAM OVERVIEW

None identified.

### LOAN REPAYMENT PROGRAM OVERVIEW

None identified.

### OTHER INCENTIVES

#### RURAL HEALTH CARE ACCESS PROGRAM (RHCAP)

##### Description:

Grants for communities to improve access to primary medical or dental health care services, in the category of community development, recruitment and retention, telehealth, or “other”.

##### Funding Source:

State of Idaho general funds.

##### Annual Funding:

Individual grants can be up to \$35,000 per year, for up to three-year projects. The total funding available is \$220,000 per year.

##### Management/Governance Structure:

State Office of Rural Health and Primary Care, Bureau of Health Planning and Resource Development, Idaho Department of Health and Welfare

##### History:

The program was enacted in 2001.

##### Program Details:

###### Providers eligible:

Individuals may not apply for RHCAP grant on their own behalf. Applicants must be a nonprofit organization registered with the Idaho secretary of state or government entity.

Projects must serve an area designated as a primary care Health Professional Shortage Area (HPSA), a medically underserved area (MUA), or a dental health professional shortage area in the State of Idaho.

Grant projects improve access to primary care medical services. “Primary Care” means the provision of professional comprehensive health services by an Idaho licensed internist, obstetrician, gynecologist, pediatrician, family practitioner, general practitioner, dentist, dental hygienist, nurse practitioner, or physician assistant.

**Amount available per provider:**

Funding requests may be up to \$35,000 for three years (\$105,000 total).

**IDAHO**

**Match requirements:**

None.

**Eligibility requirements/preferences:**

See providers eligible.

**Program Results:**

**Number/types placed:**

No information available.

**Contact Information:**

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## LEGISLATION

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RURAL PHYSICIAN INCENTIVE FEE ASSESSMENT: Idaho Code Title 33, Chapter 37, Sections 22-25.

Idaho does not have a medical school but subsidizes seats on the University of Washington's program so Idaho students can pay in-state tuition. Through this program, medical students are assessed a tax, which may be returned to them if they return to Idaho to practice medicine upon the completion of their medical training. The first potential graduates who might benefit from this program will receive their degrees in 2008.

## IDAHO

### Idaho Contacts

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## MONTANA

### SUMMARY OF PROGRAMS IDENTIFIED

- Montana Rural Physician Incentive Program

### SCHOLARSHIP PROGRAM OVERVIEW

None identified.

### LOAN REPAYMENT PROGRAM OVERVIEW

#### MONTANA RURAL PHYSICIAN INCENTIVE PROGRAM

##### Description:

The Montana Rural Physician Incentive Program was established to encourage primary care physicians to practice in medically underserved areas of rural Montana. This program assists in the recruitment and retention of primary care physicians by providing debt-repayment benefits for medical education to physicians who practice in areas of the state that are medically underserved and that demonstrate the need for assistance in physician recruitment and retention.

##### Funding Source:

The program is funded through fees assessed to all medical students participating in the WWAMI program (a University of Washington partnership with the states of Wyoming, Alaska, Montana, and Idaho) and WICHE's Professional Student Exchange Program (PSEP).

##### Annual Funding:

There is no cap for annual funding at the current time.

##### Management/Governance Structure:

The Montana Rural Physician Incentive Program is administered by the Office of the Commissioner of Higher Education of Montana.

##### History:

The Montana Rural Physicians Incentive Program was authorized by the Montana Legislature on June 11, 1991.

##### Program Details:

###### Providers eligible:

M.D.s and D.O.s who are citizens or nationals of the United States and are eligible for licensure in the State of Montana.

###### Amount available per provider:

Program benefits allow payment of up to \$45,000 in total toward the qualified educational loans of participating health professionals over a one- to five-year period of service in a location of need. Graduated payments are disbursed directly to verified lending institutions in six-month increments over the physician's designated service period. Completion of the full six-month service period is required prior to disbursement. The graduated payment schedule is as follows:

\$3,500 - 6 mos. of service	\$4,500 - 36 mos. of service
\$3,500 - 12 mos. of service	\$5,000 - 42 mos. of service
\$4,000 - 18 mos. of service	\$5,000 - 48 mos. of service
\$4,000 - 24 mos. of service	\$5,500 - 54 mos. of service
\$4,500 - 30 mos. of service	\$5,500 - 60 mos. of service

**Match requirements:**

None.

**Eligibility requirements/preferences:**

Applications are made jointly by a physician and an organization or institution (i.e., a hospital or clinic) located in the community in which the physician wishes to practice. The application form contains sections for both the physician and supporting institution/organization to complete. The physician applicant must also submit loan verification forms for all educational loans being considered for repayment. Only verifiable medical education loans qualify toward the \$45,000 maximum repayment benefit.

Applications are reviewed by an advisory committee appointed by the commissioner of higher education (Board of Regents' Policy 940.25). Qualified applications are prioritized for participation based upon community needs and the availability of funds. Preference is given to those physicians who contributed to the trust fund during their participation in the WICHE PSEP or WWAMI programs. All advisory-committee nominations of physicians to receive awards are submitted to the board of regents for final approval.

**Program Results:**

**Number/types placed:**

Approximately six new physicians per year.

**Additional Information:**

The maximum debt repayment allowed under current guidelines is \$45,000. However, a new bill was passed during the 2007 Montana legislative session which will increase this amount to \$100,000, effective July 1, 2009. New legislation will combine additional state support to the fees collected from WICHE PSEP and WWAMI medical students.

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## MONTANA

### OTHER INCENTIVES

None identified.

### LEGISLATION

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SB 553: An act revising incentives for recruiting physicians to practice in medically underserved areas, passed during the 2007 Montana legislative session.

The legislation expands the repayment of education debt to include not only physicians practicing in medically underserved areas but also for those treating underserved populations. It also increases the maximum loan repayment amount from \$45,000 to \$100,000. The law increases the fee that may be assessed to students preparing to be physicians in the fields of medicine or osteopathic medicine who are supported by the state as WICHE or WWAMI students. The increased fee takes effect on July 1, 2008, and may not exceed an amount equal to 16 percent of the annual individual medicine support fee paid by the state. It will phase out the tax credit for physicians practicing in rural areas and provide for transfers from the state general fund to the state special revenue account, based on the phase-out of the physician tax credit.

## Montana Contacts

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## NEVADA

### SUMMARY OF PROGRAMS IDENTIFIED

- Nevada Health Care Access Program (HCAP)

### SCHOLARSHIP-LOAN REPAYMENT OVERVIEW

#### NEVADA HEALTH CARE ACCESS PROGRAM (HCAP)

**Description:**

Scholarship (tuition assistance) and loan repayment.

**Funding Source:**

State appropriations.

**Annual Funding:**

Approximately \$750,000 for the 2006-07 academic year.

**Management/Governance Structure:**

Nevada WICHE Student Exchange Program, located at the University of Nevada-Reno.

**History:**

None found.

**Program Details:****Providers eligible:**

Nevada provides financial assistance to individuals willing to work in Nevada and practice in an underserved area for one or two years. Financial aid is offered through two programs. The first option provides tuition assistance for state residents studying to obtain health professional degrees. The second option provides loan repayment funds to any state-licensed professional. The loan repayment program often collaborates with, and may follow the guidelines of, the National Health Service Corp (NHSC), offering an increased funding amount with a required two-year service obligation.

Tuition assistance is offered in nursing (undergraduate and graduate), pharmacy, physical therapy, and physician assistant. Loan repayment is offered to dentists, mental health professionals, and nurses.

**Amount available per provider:**

Tuition assistance varies by profession and may increase annually. The minimum amounts for 2007-08 are:

- \$2,800 to \$5,400 for nursing (varies by degree)
- \$6,300 for pharmacy.
- \$7,500 for physical therapy.
- \$10,500 for physician assistant.

Loan repayment amounts are:

- \$14,400 for dentists.
- \$2,000 for mental health providers.
- \$1,400 for nurses (undergraduate and graduate).

**Match requirements:**

If WICHE-Nevada collaborates with the NHSC by matching funds for the loan repayment program, professionals must work in designated areas and abide by NHSC guidelines.

**Eligibility requirements/preferences:**

The tuition assistance program is open to Nevada residents (individuals who have lived in Nevada for one year or longer).

The loan repayment program is open to professionals nationally who are licensed to work in the State of Nevada. Three of five loan repayment awards are specifically reserved for University of Nevada - Las Vegas dentistry graduates.

**Program Results:**

**Number/types placed:**

Tuition assistance and loan repayment awards for 2006 included: five dentists, five mental health professionals, 20 nurses, three pharmacists, two physical therapists, and three physician assistants.

**Contact Information:**

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www.wiche.state.nv.us/

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## **LOAN REPAYMENT PROGRAM OVERVIEW**

Nevada administered a NHSC State Loan Repayment Program, but due to a change in the funding cycle, it is currently inactive. The State Office of Rural Health has reapplied for the 2007 funding cycle.

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## **OTHER INCENTIVES**

None identified.

## NEVADA

### Nevada Contacts

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## NEW MEXICO

### SUMMARY OF PROGRAMS IDENTIFIED

- Allied Health Student Loan-for-Service Program
- Medical Loan-for-Service Program
- Nursing Student Loan-for-Service Program
- Health Professional Loan Repayment Program
- New Mexico Health Service Corps

### SCHOLARSHIP PROGRAM OVERVIEW

None identified.

### LOAN REPAYMENT PROGRAM OVERVIEW

#### LOAN-FOR-SERVICE PROGRAMS: ALLIED HEALTH, MEDICAL, and NURSING

##### Description:

Loan repayment/forgiveness program.

##### Funding Source:

State of New Mexico

##### Annual Funding:

Information unavailable.

##### Management/Governance Structure:

Financial Aid Division of the New Mexico Higher Education Department.

##### History:

Program was created by the legislature in 1989.

##### Program Details:

###### Providers eligible:

The Loan-for-Service programs were created to increase the number of health care professionals in designated shortage areas.

Allied health: Includes students enrolled in programs of: physical therapy; occupational therapy; speech-language pathology; audiology; pharmacy; nutrition; respiratory care; laboratory and radiologic technology; mental health services; and emergency medical services.

Medical: Students preparing their M.D. at the University New Mexico School of Medicine.

Nursing: Students enrolled in a nursing program at a public college or university in New Mexico.

## NEW MEXICO

### Amount available per provider:

Up to \$12,000 for a maximum of four years. For every year of service, a portion of the loan will be forgiven. If the entire service agreement is fulfilled, 100 percent of the loan is eligible for forgiveness.

### Match requirements:

Information not available.

### Eligibility requirements/preferences:

- New Mexico resident and a U.S. citizen or eligible noncitizen.
- Enrolled at least half-time at a public college or institution in New Mexico and accepted into a health professional program leading to a degree or certification.
- Demonstrate financial need.

### Program Results:

#### Number/types placed:

Information not available.

### Contact Information:

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Financial Aid Specialist/Loan-for-Service Programs  
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## HEALTH PROFESSIONAL LOAN REPAYMENT PROGRAM

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### Description:

Loan repayment.

### Funding Source:

State and federal.

### Annual Funding:

\$500,000 per year.

### Management/Governance Structure:

The Financial Aid Division of the New Mexico Higher Education Department screens all applicants for criteria. The Health Professions Advisory Committee then ranks the applicants and makes recommendations.

### History:

Information not available.

## NEW MEXICO

### Program Details:

#### Providers eligible:

Practicing allied health professionals; physicians and physician assistants; advanced practice nurses; osteopathic physicians and physician assistants; dentists; optometrists; and podiatrists.

#### Amount available per provider:

The maximum award is \$12,500 per year, dependent on legislative funding.

#### Match requirements:

Not available.

#### Eligibility requirements/preferences:

Open U.S. citizens licensed to practice the health care professions listed above. Preference given to New Mexico residents and/or graduates of New Mexico public post-secondary institutions. Recipients are required to make a two-year service commitment to practice full-time in a designated medical shortage area in New Mexico.

### Program Results:

#### Number/types placed:

The amount varies each year. In 2005, 36 of 119 applicants were supported. In 2006, 10 of 106 applicants were awarded. In 2007, 35 of 98 applicants were awarded. By profession they included: 21 allied health professionals; nine licensed social workers; six certified nurse midwives; four dentists; three nurse practitioners; three physicians; two LPCs; and one clinical psychologist.

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## OTHER INCENTIVES

### NEW MEXICO HEALTH SERVICE CORPS (NMHSC)

#### Description:

The New Mexico Health Service Corps (NMHSC) provides stipends to eligible health professionals during their last two years of training or residency; recipients must contract with the Department of Health to provide (when licensed) health service for a minimum of two years (1,600 hours a year) in an underserved area of New Mexico.

**Funding Source:**

State of New Mexico.

**Annual Funding:**

The actual number of NMHSC stipends and community contracts awarded each year depends on the needs of the underserved areas and the funds appropriated by the New Mexico Legislature.

**Management/Governance Structure:**

State-supported program administered by the New Mexico Department of Health, Public Health Division, Office of Primary Care/Rural Health, which recruits, places, and helps support designated health professionals in rural and medically underserved areas of New Mexico.

**History:**

The NMHSC was established in 1994 and provides financial support to primary care providers (physicians, nurse practitioners, nurse midwives and physician assistants) and emergency medical service providers as an incentive to increasing the supply of these providers in underserved parts of the state. In 2002 a special appropriation was made to fund a similar program for dentists and dental hygienists. The NMHSC Advisory Committee is appointed by the secretary of the Department of Health and is composed of representatives from the Department of Health, the University of New Mexico Health Sciences Center’s training departments, health professional organizations, primary care clinics, and consumers. The committee’s purposes are to: recommend student selection of commitment stipends; prioritize a list of eligible communities and practice sites; and advise the corps on program policy.

**Program Details:**

**Providers eligible:**

To be eligible for a stipend, potential participants must pursue a program of study in one of the following health professions:

- Primary care physician in residency (M.D. or D.O.): up to \$20,000.
- Physician assistant: up to \$15,000.
- Family nurse practitioner: up to \$15,000.
- Certified nurse midwife: up to \$15,000.
- Emergency medical technician/paramedic: up to \$10,000.
- Dentists: up to \$20,000.
- Dental hygienists (associate’s): up to \$12,500.
- Dental hygienists (bachelor’s): up to \$15,000.

**Amount available per provider:**

See above.

**Match requirements:**

None.

## NEW MEXICO

### Eligibility requirements/preferences:

Applicants must:

- Be enrolled or accepted by an accredited or approved educational program of study or be engaged in a residency-training program or preceptorship.
- Be within 24 months of completing a program of study and becoming eligible to apply for a license or certificate in the profession of study.
- Be a citizen or a permanent resident of the United States and be domiciled in New Mexico.

### Program Results:

#### Number/types placed:

To date, 122 health care professionals have been supported.

#### Additional information:

NMHSC stipends are awarded for one year at a time from July 1 to June 30. Applications are submitted to the NMHSC program and undergo an initial screening to ensure that they are complete and meet funding basic requirements. The NMHSC Advisory Committee reviews applications and makes final recommendations.

### Contact Information:

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### Primary Care Association (PCA)

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State NHSC Loan Repayment  
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Administrative Services Director/CFO  
New Mexico Higher Education  
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## **NORTH DAKOTA** **SUMMARY OF PROGRAMS IDENTIFIED**

- State Community Matching Physician Loan Repayment Program
- State Community Matching P.A./N.P./C.N.M. Loan Repayment Program

### **SCHOLARSHIP PROGRAM OVERVIEW**

None identified.

### **LOAN REPAYMENT PROGRAM OVERVIEW**

#### **STATE COMMUNITY MATCHING LOAN REPAYMENT PROGRAM**

##### **Description:**

The State Community Matching Loan Repayment Program is a state-financed program designed to attract health care providers to North Dakota to practice in areas of need.

##### **Funding Source:**

State and community site cofund loan repayment monies for physicians.

##### **Annual Funding:**

\$375,000 in state funding for the biennium.

##### **Management/Governance Structure:**

The State Community Matching Loan Repayment Program is jointly administered by the North Dakota Department of Health and the Center for Rural Health at the University of North Dakota School of Medicine & Health Sciences.

##### **History:**

None found.

##### **Program Details:**

###### **Providers eligible:**

- Physicians (M.D. or D.O.) in family practice, internal medicine, pediatrics, obstetrics/gynecology, general surgery, and psychiatry; nurse practitioners; physician assistants; and certified nurse midwives.
- Nursing program: Students seeking associate, bachelor's, master's or doctoral degrees, as well as nurses in refresher courses.

###### **Amount available per provider**

- M.D.s: \$90,000.
- Physician assistant/nurse practitioner/certified nurse midwife: \$10,000.

###### **Match requirements:**

Community or employer pays half of the loan repayment in all programs but dentistry.

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### Eligibility requirements/preferences:

M.D.s must serve two years. Preference is given to communities in Health Professional Shortage Areas (HPSAs) or populations of 15,000 or less. Nurse practitioners/physician assistants/certified nurse midwives must serve two years. Preference to communities of 15,000 or less.

### Program Results:

#### Number/types placed:

As of May 2007: three physicians (M.D.s) and one nurse practitioner.

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ggarland@nd.gov  
www.ndhealth.gov/OCA

## OTHER INCENTIVES

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None identified.

## LEGISLATION

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ND H.B. 1125: Veterinarian Loan Repayment.

It enables the state health council, in consultation with the state board of animal health, to select no more than three veterinarians who will provide food animal services in communities in the state. The veterinarians are eligible to receive up to \$80,000 in loan repayment funds. The law also outlines the duties of the State Health Council and provides for rural community selection procedures. The bill passed in April 2007. Program details to be announced.

ND S.B. 2152: Dentists' Loan Repayment Program and New Practice Grants.

Outlines selection, eligibility and community service obligations for dentists selected for loan repayment. It also provides for dentists who are licensed to practice in North Dakota to apply for a grant to establish a dental practice in a city with a population of 7,500 or fewer residents. Two grants may be awarded per year and the maximum grant per applicant is \$50,000. The community must provide a 50

## NORTH DAKOTA

percent match, and the grant must be distributed over a five-year period. The bill passed in April 2007. Program details to be announced.

<b>North Dakota Contacts</b>	
<p><b>State Office of Rural Health (SORH)</b></p> <p>Mary Wakefield, Director Lynette Dickson, Project Director Center for Rural Health School of Medicine University of North Dakota 501 North Columbia Rd., Stop 9037 Grand Forks, ND 58202-9037 Tel: 701.777.3848 mwake@medicine.nodak.edu ldickson@medicine.nodak.edu www.med.und.nodak.edu/depts/rural/sorh/index.html</p> <p><b>National Health Service Corps (NHSC)</b></p> <p>Mary Amundson Assistant Professor Center for Rural Health School of Medicine University of North Dakota 501 North Columbia Rd., Stop 9037 Grand Forks, ND 58202-9037 Tel: 701.777.4018 mamundson@medicine.nodak.edu www.med.und.nodak.edu/depts/rural/</p> <p><b>Primary Care Office (PCO)</b></p> <p>Gary Garland Director Office of Community Assistance North Dakota Department of Health 600 E. Boulevard, Department 301 Bismarck, ND 58505-0200 Tel: 701.328.4839 ggarland@nd.gov</p> <p>HPSA Contact: Terri Lang Tel: 701.858.6795 telang@medicine.nodak.edu</p> <p>NHSC Contact: Mary Amundson Tel: 701.777.4018 mamundson@medicine.nodak.edu</p>	<p><b>Primary Care Association (PCA)</b></p> <p>Scot Graff Chief Executive Officer Community Health Association of the Dakotas 1400 West 22nd St. Sioux Falls, SD 57105 Tel: 605.357.1515 sgraff@usd.edu</p> <p>Karen Larson Deputy Director Community Health Care Association of the Dakotas (CHAD) 1003 East Interstate Ave., Ste. 6 Bismarck, ND 58503 Tel: 701.221.9824 karen@communityhealthcare.net</p> <p><b>Area Health Education Center (AHEC)</b></p> <p>H. David Wilson, M.D. Dean, Associate AHEC Director North Dakota AHEC Program University of North Dakota, School of Medicine and Health Sciences PO Box 9037 Grand Forks, ND 58203-9037 Tel: 701.777.2514 hdwilson@medicine.nodak.edu</p> <p><b>STATE NHSC LOAN REPAYMENT PROGRAM</b></p> <p><b>Contact Information:</b></p> <p>Gary Garland Director North Dakota Department of Health 600 E. Boulevard Ave., Dept.301 Bismarck, ND 58505-0200 Tel: 701.328.2352 ggarland@nd.gov www.medicine.nodak.edu/crh</p>



## OREGON

### SUMMARY OF PROGRAMS IDENTIFIED

- Oregon Rural Health Services Loan Repayment Program
- The Oregon Nursing Services Program
- State Income Tax Credits
- Rural Medical Liability Financial Reinsurance Plan

### SCHOLARSHIP PROGRAM OVERVIEW

None identified.

### LOAN REPAYMENT PROGRAM OVERVIEW

#### OREGON RURAL HEALTH SERVICES LOAN REPAYMENT PROGRAM

**Description:**

Loan repayment.

**Funding Source:**

State of Oregon.

**Annual Funding:**

A maximum of 10 nurse practitioners, 10 pharmacists, 10 physicians, 10 dentists, and 10 physician assistants may be added to the program each year. When funding is limited, there will be fewer new participants than the maximum allowed by law. Factors considered in the selection process may include: applicant's professional specialty; applicant's student loan debt in relation to available funding; rural background and/or practice experience in a rural community; and information pointing to the likelihood of an applicant's eventual practice in a qualifying area.

**Management/Governance Structure:**

Oregon Student Assistance Commission.

**History:**

The Oregon Student Assistance Commission began in approximately 1993.

**Program Details:****Providers eligible:**

Providers eligible for the program include: physicians, dentists, pharmacists, physician assistants and nurse practitioners who are willing to practice in qualifying practice sites, as determined by the Oregon Office of Rural Health. Physicians, dentists, and pharmacists may receive annual payments equal to 20 percent of the total qualifying loan principal for a minimum service obligation of three years and maximum program participation of five years. Physicians and pharmacists must serve for a minimum of three years in a qualifying site. Nurse practitioners and physician assistants may receive annual payments equal to 25 percent of the total qualifying loan principal for a minimum service obligation of two years and maximum program participation of four years. Nurse practitioners and physician assistants must serve a minimum of two years.

**Amount available per provider:**

**OREGON**

The maximum total benefit from this program per participant is \$100,000. A maximum of 10 nurse practitioners, 10 pharmacists, 10 physicians, 10 dentists, and 10 physician assistants may be added to the program per year.

**Match requirements:**

None.

**Eligibility requirements/preferences:**

See above.

**Program Results:**

**Number/types awarded:**

- Physicians: 46 (met or currently completing obligation: 37).
- Nurse practitioners: 47 (met or currently completing obligation: 21).
- Physician assistants: 27 (met or currently completing obligation: 11).
- Pharmacists: two (met or currently completing obligation: two).
- Dentists: Added July 1, 2007; no placement numbers available at this time.

**Contact Information:**

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[www.getcollegefunds.org/ad\\_repay\\_rural\\_health.html#3](http://www.getcollegefunds.org/ad_repay_rural_health.html#3)

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**THE OREGON NURSING SERVICES PROGRAM**

**Description:**

Nursing student loan repayment.

**Funding Source:**

State funds.

**Annual Funding:**

Not available.

**Management/Governance Structure:**

Oregon Student Assistance Commission.

**History:**

The program began in 2002.

**Program Details:**

**Providers eligible:**

Nurses.

## OREGON

### **Amount available per provider:**

A maximum of \$10,078, if warranted by the applicant's total qualifying student loan debt.

### **Match requirements:**

Not available.

### **Eligibility requirements/preferences:**

The Oregon Nursing Services Program is designed to provide student loan repayment on behalf of registered nurses (R.N.s) who enter into agreements to practice in "nursing critical shortage areas" in Oregon. A "nursing critical shortage area" is a locality or practice specialty identified as such by the Oregon State Board of Nursing, in consultation with the Office of Rural Health.

Participants receive annual payments toward the debt incurred during their professional nursing program in exchange for qualifying service. Annual employment verification is required.

Nurses may receive annual payments equal to 25 percent of their total qualifying loan principal for a minimum of two years and maximum of four years of qualifying practice. Prorated payment amounts will be made if the participant is employed in a qualifying shortage area.

Students enrolled in the last year of an R.N. program, recent R.N. graduates, and R.N.s currently practicing may apply. Oregon residency is not required when applying. Nurse practitioners and licensed practical nurses are not eligible. The application is available February 1st of each year.

### **Program Results:**

#### **Number/types placed:**

For the 2005-07 biennium, the office anticipates scholarships totaling \$22.5 million. This includes 24 existing recipients and 16 new awards. These figures are for all scholarship programs; individual programs results are not available.

### **Contact Information:**

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[www.getcollegefunds.org/ad\\_repay\\_nursing](http://www.getcollegefunds.org/ad_repay_nursing)

## OTHER INCENTIVES

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## OREGON

### STATE INCOME TAX CREDITS

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**Description:**

State income tax credit.

**Funding Source:**

State of Oregon.

**Annual Funding:**

No cap for amount funded per year.

**Management/Governance Structure:**

Oregon Office of Rural Health, Oregon Health & Science University.

**History:**

The tax credit was passed by the Oregon Legislature in 1989 and continues to be funded by Senate Bill 438. Dentists were added in 1995; optometrists were added in 1997.

**Program Details:****Providers eligible:**

Rural physicians, podiatrists, nurse practitioners, physician assistants, dentists, certified registered nurse anesthetists, and optometrists are eligible

**Amount available per provider:**

Maximum amount of \$5,000 annual state income tax credit per professional.

**Match requirements:**

None.

**Eligibility requirements/preferences:**

Professional must practice in a rural community as designated by the state. Must have a minimum of 60 percent of practice in a rural community. Dentists must practice in a frontier county or in a community of 5,000 people or fewer that is at least 25 miles from a larger population center. Optometrists must either practice in a frontier county or have hospital privileges at their local qualifying rural hospital.

**Program Results:****Number/types placed:**

Approximately 1,750 in 2006. Distribution was as follows:

- Physicians (M.D. or D.O.): 1,145.
- Physician assistants: 125.
- Nurse practitioners: 329.
- Optometrists: 19.
- Certified registered nurse anesthetists: 62.
- Dentists: 52.
- Podiatrists: 18.

## OREGON

### **Comment:**

Since 2005, Oregon has allowed a maximum tax credit of \$250 per year for rural volunteer emergency medical technicians.

## **RURAL MEDICAL LIABILITY FINANCIAL REINSURANCE PLAN**

### **Description:**

Malpractice insurance reduction program.

### **Funding Source:**

State of Oregon.

### **Annual Funding:**

Will not exceed an average of \$10 million per year from 2004 to 2007.

### **Management/Governance Structure:**

State program managed by Oregon Rural Health.

### **History:**

Legislation was first passed by the Oregon Legislature in 2003. The 2007 session reinstated the program through December 2011.

### **Program Details:**

#### **Providers eligible:**

Physicians (M.D.s or D.O.s) are currently eligible. Nurse practitioners will be eligible beginning January 2008.

#### **Amount available per provider:**

The amount varies by location and specialty. Providers must be practicing 60 percent or more of their time in a rural community, as defined by the Office of Rural Health. Obstetricians receive an 80 percent reduction; effective January 1, 2008, nurse practitioners certified in obstetric care will be eligible. Family physicians providing obstetrical services receive a 60 percent reduction. Other eligible doctors receive a 40 percent reduction, as will nurse practitioners (effective January 2008).

#### **Match requirements:**

Physicians must pay the balance of the malpractice insurance premium.

#### **Eligibility requirements/preferences:**

Recipients must practice in a rural area and provide services as noted above. Effective January 1, 2008, practitioners must be willing to serve a proportionate number of Medicare or Medicaid patients.

### **Program Results:**

#### **Number/types deemed eligible:**

Total of 1,396 physicians.

### Contact Information:

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**OREGON**

## LEGISLATION

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### OR H.B. 3197, 74TH LEGISLATIVE ASSEMBLY, HOUSE BILL 3197

Introduced March 8, 2007. Establishes a one-time tax credit for a health care provider participating in the TRICARE system; directs Office of Rural Health to establish criteria to certify eligibility for tax credit; creates subtraction from federal taxable income for income from TRICARE paid to health care provider in first two years of provider's participation in TRICARE system; applies to tax years beginning on or after January 1, 2008.

### S.B. 188, 74TH LEGISLATIVE ASSEMBLY, SENATE BILL 188

Introduced January 11, 2007. Requires health professionals to complete a minimum practice requirement in the time period immediately following completion of training requirements or execution of Rural Health Services agreement; adds dentists to the list of health professionals who may qualify for the Rural Health Services Program; directs Office of Rural Health to select qualifying practice sites for purposes of program; allows Oregon Student Assistance Commission to give preference for program participation to specified health professionals.

## OREGON

### Oregon Contacts

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## **SOUTH DAKOTA** **SUMMARY OF PROGRAMS IDENTIFIED**

- Physician Tuition Reimbursement Program
- Dentist Tuition Reimbursement Program
- Midlevel Tuition Reimbursement Program
- South Dakota State Loan Repayment Program
- Health Professional Recruitment Incentive Program

### **SCHOLARSHIP PROGRAM OVERVIEW**

None identified.

### **LOAN REPAYMENT PROGRAM OVERVIEW**

#### **TUITION REIMBURSEMENT PROGRAMS: PHYSICIAN, DENTIST, and MIDLEVEL**

##### **Description:**

This program provides qualifying family physicians, dentists, nurse practitioners, physician assistants, and certified nurse midwives with a payment in return for three continuous years of practice in an eligible rural community.

##### **Funding Source:**

State of South Dakota.

##### **Annual Funding:**

Not applicable.

##### **Management/Governance Structure:**

The Office of Rural Health administers these programs to assist communities in recruiting health care professionals.

##### **History:**

Programs started in 2004.

##### **Program Details:**

###### **Providers eligible:**

Physicians, general dentists, physician assistants, nurse practitioners, and certified nurse midwives are eligible.

###### **Amount available per provider:**

Physicians and dentists: Practitioners must enter into a contract with the South Dakota Department of Health. The amount of tuition reimbursement for a qualifying physician is equal to twice the amount of the University of South Dakota School of Medicine's resident tuition for the most recent four-year period. The current amount is approximately \$100,000.

## SOUTH DAKOTA

Midlevel professionals: The amount reimbursable is equal to the average resident tuition at the University of South Dakota's Physician Assistant Program and the South Dakota State University's Nurse Practitioner Program during the time the physician assistant, nurse practitioner, or certified nurse midwife attended training. If the training was completed prior to 1994, an amount equal to the average tuition during the 1994-1995 school year will be used.

### Match requirements:

An eligible community/practice site must agree to pay a prorated portion of the reimbursement payments and must be qualified as to need and ability to sustain a provider. Assessed portion of payment is dependent on type of provider.

### Eligibility requirements/preferences:

Licensed providers in primary care. Must practice in a community of 10,000 or less and be accessible to Medicaid, Medicare, and State Children's Health Insurance.

### Program Results:

#### Number/types placed:

- Physicians: two completed program in 2007.
- Dentists: one completed program in 2007.
- Midlevel professionals: one completed program in 2007.

### Contact Information:

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Office of Rural Health  
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## SOUTH DAKOTA STATE LOAN REPAYMENT PROGRAM

### Description:

This program provides for the repayment of qualifying educational loans for health professionals. In return, the health professional commits to fulfill a service obligation in an eligible practice site within a federally designated Health Professional Shortage Area (HPSA) for a minimum of two years.

### Funding Source:

The state requests a grant from HRSA/NHSC for loan repayment funds.

### Annual Funding:

Amount varies based on available funding.

## **SOUTH DAKOTA**

### **Management/Governance Structure:**

South Dakota State Health Department and the Office of Rural Health.

### **History:**

None found.

### **Program Details:**

#### **Providers eligible:**

Primary care physicians, primary care nurse practitioners, certified nurse midwives, primary care physician assistants, general practice dentists, registered clinical dental hygienists, clinical or counseling psychologists, psychiatric nurse specialists, certified social workers, mental health counselors, licensed professional counselors, and marriage and family therapists are eligible.

#### **Amount available per provider:**

Loan repayment amounts for a two-year contract are \$35,000 for physicians and dentists and \$19,000 for nonphysicians. Physicians and dentists can contract for up to four years and receive \$100,000. Nonphysicians can contract for up to three years and receive \$35,000.

#### **Match requirements:**

The community or employing site must match the funding from National Health Service Corps or the Student Loan Repayment Program grant.

#### **Eligibility requirements/preferences:**

Must be a public entity or nonprofit private entity located in a federally designated HPSA, offering services in the areas of primary care, mental health, or dental health. Providers must be licensed and have their application approved by the state.

### **Program Results:**

#### **Number/types placed:**

Not available.

### **Contact Information:**

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## OTHER INCENTIVES

## SOUTH DAKOTA

### HEALTH PROFESSIONAL RECRUITMENT INCENTIVE PROGRAM

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#### **Description:**

The Health Professional Recruitment Incentive Program is intended to assist in the recruitment of health professionals to South Dakota communities.

#### **Funding Source:**

State and community/practice site.

#### **Annual Funding:**

The program is funded through July 1, 2008.

#### **Management/Governance Structure:**

South Dakota State Health Department and the Office of Rural Health.

#### **History:**

None found.

#### **Program Details:**

##### **Providers eligible:**

Dietitians or nutritionists, nurses (L.P.N. or R.N.), occupational therapists, respiratory therapists, pharmacists, physical therapists, paramedics, certified medical technologists, laboratory technologists, and radiological technologists are eligible.

##### **Amount available per provider:**

The program provides \$5,000 directly to each health care professional who has entered into a contract and completed a two-year service obligation.

##### **Match requirements:**

The state and employing facility share the cost. The proportion each pays is dependent on the size of the community. Communities of 2,500 or less pay 25 percent of the \$5,000. Communities of over 2,500 pay 50 percent of the \$5,000. The community match can be made at any time; the state payment occurs only after completion of the two-year service obligation.

##### **Eligibility requirements/preferences:**

Eligible facilities include licensed nursing homes, federally certified home health agencies, licensed inpatient chemical dependency facilities, intermediate care facilities for the mentally retarded, adjustment training centers, community mental health centers, and community health centers located in South Dakota.

An eligible health professional must be a "new employee," licensed, and practicing full time at an eligible facility for two years.

#### **Program Results:**

##### **Number/types placed:**

Sixty applicants awarded annually; 43 providers completed program in 2007.

## SOUTH DAKOTA

### Contact Information:

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### South Dakota Contacts

#### State Office of Rural Health (SORH)

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#### National Health Service Corps (NHSC)

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#### Primary Care Office (PCO)

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#### Primary Care Association (PCA) - (shared with North Dakota)

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## UTAH

### SUMMARY OF PROGRAMS

- Mental Health Therapist Scholarship and Grant Program
- Utah Health Care Workforce Financial Assistance Program

### SCHOLARSHIP PROGRAM OVERVIEW

#### MENTAL HEALTH THERAPIST SCHOLARSHIP AND GRANT PROGRAM

##### Description:

Both scholarships and loan repayment grants.

##### Funding Source:

State funds.

##### Annual Funding:

\$25,000 per fiscal year.

##### Management/Governance Structure:

Administered by Utah's Department of Human Services.

##### History:

Rural areas in Utah have had difficulty hiring and retaining mental health therapists. This program began in 1994 and is now part of Utah Code Title 62A, Chapter 13. It was established to assist place-committed individuals from rural areas to seek educational opportunities to become mental health therapists, and to give them an incentive to remain in rural underserved areas.

##### Program Details:

###### Providers eligible:

Mental health therapists including: physicians, surgeons, or osteopathic physicians engaged in the practice of mental health therapy; registered psychiatric mental health nurse specialists; psychologists qualified to engage in the practice of mental health therapy; certified psychology residents; clinical social workers; certified social workers; marriage and family therapists; certified marriage and family therapist interns; professional counselors; and, certified professional counselor interns.

###### Amount available per provider:

Up to \$5,000 per recipient.

###### Match requirements:

None.

###### Eligibility requirements/preferences:

Students studying to become mental health professionals are eligible to receive scholarships to pay educational expenses. Recipients must provide service in a rural underserved area upon graduation.

Mental health practitioners currently practicing in rural underserved areas are eligible to receive funds to repay bona fide loans for educational expenses.

**UTAH**

**Program Results:**

**Number/types placed:**

In FY 2007, the state awarded three scholarships and five loan repayment grants.

**Contact Information:**

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Utah Division of Substance Abuse and Mental Health  
120 North 200 West  
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<http://le.utah.gov/~code/TITLE62A/62A0B.htm>

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**OTHER INCENTIVES**

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None identified.

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**LOAN REPAYMENT PROGRAM OVERVIEW**

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**UTAH HEALTH CARE WORKFORCE FINANCIAL ASSISTANCE PROGRAM**

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**Description:**

The Utah Health Care Workforce Financial Assistance Program provides professional education loan repayment assistance to health care professionals who locate or continue to practice in underserved areas of Utah.

**Funding Source:**

State funds.

**Annual Funding:**

As needed and available.

**Management/Governance Structure:**

Utah Health Department, Office of Primary Care & Rural Health.

**History:**

Began assistance in 1990 to three provider programs: M.D./D.D.S., midlevel professionals, and mental health practitioners. In 2002 the three programs were combined into one new program.

## UTAH

### Program Details:

#### Providers eligible:

Dentists (D.D.S. and/or D.M.D.), nonphysician mental health therapists (clinical psychologists, licensed clinical social workers, licensed professional counselors, and/or marriage and family therapists), nurses (L.P.N. through Ph.D.s, who received their degree from a college/school of nursing), physicians (D.O. or M.D.), and physician assistants (who have passed the National Certification Examination) are eligible.

#### Amount available per provider:

- M.D./D.D.S.: maximum of \$30,000.
- Midlevel professionals: \$24,000.
- Amounts vary for nursing staff.

#### Match requirements:

None.

#### Eligibility requirements/preferences:

The health care professional and his/her employment site must apply to the program at the same time. The health care professional cannot have practiced at an employment site for more than 24 months to be eligible. A minimum two-year service commitment is required.

### Program Results:

#### Number/types placed:

2007 placements: 11 nurses; 11 physicians; two dentists; two mental health practitioners; and one physician assistant. Since 1990, 457 health professionals have been assisted.

#### Contact Information:

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Support Services Coordinator  
Utah Department of Health  
Office of Primary Care and Rural Health  
PO Box 142005  
Salt Lake City, UT 84114-2005  
Tel: 801.538.6214  
elolsen@utah.gov  
health.utah.gov/primarycare/

## OTHER INCENTIVES

None identified.

## Utah Contacts

### State Office of Rural Health (SORH)

Don Beckwith  
Program Manager  
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### Primary Care Association (PCA)

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bette@auch.org  
www.auch.org/aboutus/staff.html

### National Health Service Corps (NHSC) and State Loan Repayment Program

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### Area Health Education Center (AHEC)

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Center  
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www.ahec.utah.edu

### Primary Care Office (PCO)

See SORH.

## WASHINGTON

### SUMMARY OF PROGRAMS IDENTIFIED

- Health Professional Scholarships
- Western Interstate Commission for Higher Education (WICHE) – Professional Student Exchange Program (PSEP)
- Health Professional Loan Repayment Program (HPLRP)

### SCHOLARSHIP PROGRAM OVERVIEW

#### HEALTH PROFESSIONAL SCHOLARSHIPS

**Description:**

Scholarship.

**Funding Source:**

State of Washington.

**Annual Funding:**

Funding for both the loan repayment and scholarship programs is \$6.2 million for the 2007-09 biennium.

**Management/Governance Structure:**

Washington Higher Education Coordinating Board, Department of Health, Office of Community and Rural Health.

**History:**

The first programs began in 1988.

**Program Details:****Providers eligible:**

Washington residency not required for applicants. Those eligible must be enrolled in a program for the following professions: physicians (M.D. or D.O.), physician assistant or nurse practitioner, licensed nurse (any licensed level), midwife (certified nurse or licensed), pharmacist, dentist, and dental hygienist.

**Amount available per provider:**

Scholarship program awards vary by educational program. The scholarship is not based on financial need; applicants do not have to attend a Washington state school.

**Upon completion of your academic program:**

There is a nine-month grace period to find employment that meets the program criteria. Exception: Medical students do not have a grace period upon completion of their residency program.

Recipients must serve full-time (40 or more hours per week) in the state of Washington for a minimum of three years. Participants must submit a service confirmation form at the end of each quarter.

**Match requirements:**

None.

**Eligibility requirements/preferences:**

Listed above.

**Program Results:**

**Number/types placed:**

The number of providers participating in each program varies each year, depending on the debt for loan repayment and the tuition of the applicants for scholarship. Twenty-four scholarships were awarded out of 59 applications in 2006.

**Contact Information:**

Washington State Department of Health  
Office of Community and Rural Health  
PO Box 47834  
Olympia, WA 98504-7834  
Tel: 360.236.2816  
healthprof@doh.wa.gov  
www.hecb.wa.gov/health

Kathy McVay, Program Administrator  
kathy.mcvay@doh.wa.gov  
Chris Wilkins, Program Coordinator  
chris.wilkins@doh.wa.gov

**Western Interstate Commission for Higher Education –  
Professional Student Exchange Program (WICHE/PSEP)**

**Description:**

Student tuition assistance with a shortage-area service obligation for loan forgiveness.

**Funding Source:**

State of Washington.

**Annual Funding:**

Approximately \$308,000 for the 2007-08 academic year.

**Management/Governance structure:**

Washington Higher Education Coordinating Board.

**History of Program:**

Washington began supporting students in optometry through the WICHE program in 1985; at that time the support was awarded as a grant. In 1995 osteopathic medicine was added, and the loan was changed to a conditional one that requires a service obligation in rural or underserved areas.

**Program Details:**

**Providers eligible:**

Physicians (D.O.s) and optometrists.

## WASHINGTON

### **Amount available per provider:**

For the 2007-08 academic year, students studying osteopathic medicine are awarded \$17,600; students studying optometry receive \$14,100. The award increases every year of study to help meet increasing tuition costs. Students receive a maximum of four years of support for completion of their professional degree.

### **Match Requirements:**

None.

### **Eligibility Requirements/Preferences:**

Competitive program. Applicants must be Washington residents and demonstrate financial need (determined by Free Application for Federal Student Aid (FAFSA) results). Recipients must agree to practice for four years in a shortage area, as determined by the state, or pay back support with interest penalties. Students must attend a cooperating WICHE program, as listed at [www.wiche.edu/sep/psep](http://www.wiche.edu/sep/psep). Applicants must apply by October 15th of the year prior to their enrollment in a cooperating professional program.

### **Program Results:**

Washington supports, on average, seven students studying osteopathic medicine and seven students studying optometry (new and continuing) per academic year.

### **Contact Information:**

Dawn Cypriano McAferty  
WICHE Certifying Officer  
Washington Higher Education Coordinating Board  
917 Lakeridge Way, SW  
PO Box 43430  
Olympia, WA 98504-3430  
Tel: 360.753.7846  
[dawnc@hecb.wa.gov](mailto:dawnc@hecb.wa.gov)  
[www.hecb.wa.gov/Paying/waaidprgm/wiche.asp](http://www.hecb.wa.gov/Paying/waaidprgm/wiche.asp)

## **LOAN REPAYMENT PROGRAMS OVERVIEW**

### **HEALTH PROFESSIONAL LOAN REPAYMENT PROGRAM (HPLRP)**

#### **Description:**

Loan repayment program.

#### **Funding Source:**

State of Washington.

#### **Annual Funding:**

Funding for both the loan repayment and scholarship programs is \$6.2 million for the 2007-09 biennium.

#### **Management/Governance Structure:**

Washington Higher Education Coordinating Board, Department of Health, and the Office of Community and Rural Health.

## History:

The combined program was created in 1992 by the Washington Legislature; the first program was created 1989.

## Program Details:

### Providers eligible:

Physicians (M.D.s and D.O.s), naturopathic doctors (N.D.s) physician assistants, nurse practitioners, licensed nurses (any level), midwives (certified nurse or licensed), pharmacists, dentists, and dental hygienists are eligible.

### Amount available per provider:

The loan repayment program provides up to \$25,000 per year for a minimum of three years. The service obligation period is based on full-time (40 or more hours per week) employment and is prorated for less than full time. The award amount is based on outstanding educational debt. There is an opportunity to apply for a fourth and fifth year, for up to \$35,000 per year, based on remaining eligible debt.

The award period is divided into quarters. Credit is earned during the quarter and paid at the end of each quarter. Those funds must be fully and directly applied to the approved lender(s) identified in the award notification.

### Match requirements:

None.

### Eligibility requirements/preferences:

- Be employed or have a contract to begin employment at an eligible site.
- Submit documentation of eligible outstanding educational debt (does not include Parent Plus Loans or loans not in applicant's name).
- Be a United States citizen.
- Provide primary care (specialty care not eligible).
- Sign a contract to serve for a minimum of three years or pay funds back at double penalty.

## Program Results:

### Number/types placed:

The number of providers participating in each program varies each year, depending on the total loan repayment debt and the tuition of the applicants for scholarship. In 2006, 61 new loan repayment awards were made.

## Contact Information:

Washington State Department of Health  
Office of Community and Rural Health  
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healthprof@doh.wa.gov  
www.hecb.wa.gov/health

Kathy McVay, Program Administrator  
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Chris Wilkins, Program Coordinator  
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## WASHINGTON

### Washington Contacts

#### State Office of Rural Health (SORH)

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Washington State Department of Health  
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Olympia, WA 98504-7834  
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kris.sparks@doh.wa.gov  
www.doh.wa.gov/hsqa/ocrh

#### Primary Care Office (PCO)

See SORH.

#### Primary Care Association (PCA)

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#### Area Health Education Center (AHEC)

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#### Regional AHEC Centers

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Executive Director  
Western Washington AHEC  
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#### NHSC Loan Repayment Program

Juno Whittaker  
Washington State Dept. of Health  
Office of Community & Rural Health  
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#### Washington Rural Health Association

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Washington Rural Health Association  
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## WYOMING

### SUMMARY OF PROGRAMS IDENTIFIED

- Wyoming Health Care Provider Loan Repayment Program

### SCHOLARSHIP PROGRAM OVERVIEW

None identified.

### LOAN REPAYMENT PROGRAM OVERVIEW

#### WYOMING HEALTH CARE PROVIDER LOAN REPAYMENT PROGRAM

**Description:**

Loan repayment program.

**Funding Source:**

State of Wyoming.

**Annual Funding:**

\$990,000 for the first and second rounds (2005-06 biennium); and \$5,093,000 for the third round (2007-08 biennium).

**Management/Governance Structure:**

The program is administered by the Office of Rural Health, the Division of Community and Rural Health, and the Wyoming Department of Health. It is authorized and funded by the State of Wyoming.

**History:**

The provider loan repayment program was created in the 2004 legislative session with an allocation of \$990,000 for the 2005/06 biennium. A 25 percent community match of recipient awards was required. The program was reauthorized in the 2006 legislative session with an appropriation of \$5,093,000 for the 2007/08 biennium. The match requirement has been eliminated for allied health care professionals.

**Program Details:****Providers eligible:**

Physicians, dentists, podiatrists, chiropractors, dental hygienists, advanced practice registered nurses, registered nurses, licensed practical nurses, certified nurse assistants, optometrists, pharmacists, pharmacy technicians, physical therapists, physician assistants, psychologists, speech pathologists, audiologists, laboratory directors, emergency medical technicians, radiologic technologists, professional counselors, marriage and family therapists, social workers, chemical dependency specialists, occupational therapists, and respiratory care practitioners are eligible.

**Amount available per provider:**

Physicians and dentists are eligible to receive up to \$30,000 per year for three years, for a maximum of \$90,000. Allied health care professionals are eligible to receive up to \$10,000 per year for three years, for a maximum of \$30,000.

**Match requirements:**

Physicians and dentists must obtain a community cash match of 25 percent of their award. No match is required for allied health care providers.

**Eligibility requirements/preferences:**

Must be a licensed provider and accept Medicare, Medicaid, and/or S-CHIP insurance at a full-time practice in an underserved area of Wyoming for three years.

**Program Results:**

**Number/types placed:**

In 2006 (first and second round), there were 23 awardees (listed by county):

- Albany (two): Licensed professional counselor, physical therapist.
- Campbell (one): Orthopedic surgeon.
- Carbon (one): Licensed clinical social worker.
- Converse (two): Family practice physician (with obstetrics), internal medicine physician (with pediatrics).
- Fremont (three): Certified registered nurse anesthetist, dentist, podiatrist.
- Hot Springs (one): Physician in family medicine.
- Johnson (one): Physician in family practice.
- Laramie (one): Licensed professional counselor.
- Park (one): Youth and family therapist.
- Sheridan (two): Advanced practice nurse, pediatrics physician.
- Sweetwater (three): Certified nurse midwife, two dentists.
- Uinta (one): Dentist.
- Washakie (four): Physical therapists, physician (family practice/ER), speech-language pathologist.

**Contact Information:**

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Office of Rural Health  
Wyoming Department of Health  
6101 Yellowstone Rd., Ste. 510  
Cheyenne, WY 82002  
Tel: 307.777.2930  
jeff.hopkins@health.wyo.gov  
<http://wdh.state.wy.us/familyhealth/rural/loan.html>

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**OTHER INCENTIVES**

None identified.

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**LEGISLATION**

WY H.B. 164 – Physician and Dentist Loan Repayment Program

This act amends certain provisions of loan repayment programs for physicians, dentists and health care providers; it provides that loans resulting from undergraduate and postgraduate education are eligible for payment. The bill passed in March 2007.

## WYOMING

### Wyoming Contacts

#### State Office of Rural Health (SORH)

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Office of Rural Health  
Wyoming Department of Health  
6101 Yellowstone Rd., Ste. 510  
Cheyenne, WY 82002  
Tel: 307.777. 6970  
lweide@state.wy.us

HPSA and NHSC Contact:  
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jeff.hopkins@health.wyo.gov

#### Primary Care Office (PCO)

See SORH.

#### Primary Care Association (PCA)

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#### Area Health Education Center (AHEC)

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WWAMI Medical Education Program  
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Laramie, WY 82071  
Tel: 307.766.2496  
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#### Wyoming Health Resource Network, Inc.

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## FEDERAL PROGRAMS

### SUMMARY OF NHSC FEDERAL PROGRAMS

- National Health Service Corps Loan Repayment Program
- National Health Service Corps Scholarship Program
- Nursing Scholarship Program
- Nursing Education Loan Repayment Program

#### NHSC LOAN REPAYMENT PROGRAM (LRP)

##### Description:

The NHSC Loan Repayment Program (LRP) was created to ensure an adequate supply of health professionals to provide primary health services to populations located in selected Health Professional Shortage Areas (HPSAs), as identified by the secretary of the Department of Health & Human Services.

##### Funding Source:

U.S. Department of Health & Human Services.

##### Annual Federal Funding:

\$125,528,000 in 2006.

##### Management/Governance Structure:

Administered by the Division of National Health Service Corps, Bureau of Clinician Recruitment, Health Resources and Services Administration (an agency of the U.S. Department of Health and Human Services).

The states, usually the primary care office or the SORH, assist the NHSC in selecting sites and monitoring the providers on duty.

##### History:

Started in 1987.

##### Program Details:

###### Providers eligible:

Physicians, psychiatrists, nurse practitioners, physician assistants, certified nurse midwives, dentists, dental hygienists, psychologists, clinical social workers, psychiatric nurses, marriage and family counselors, and licensed professional counselors are eligible.

###### Amount available per provider:

\$50,000 (or amount of loans if less than \$50,000) for two years of service in a qualifying site; paid to directly to the provider. Contracts may be extended as follows (effective October 1, 2005):

- For a third year of assistance, up to \$35,000.
- For a fourth year of assistance, up to \$35,000.
- For a fifth year of assistance, up to \$25,000.
- For a sixth year of assistance, up to \$20,000.
- For years seven and beyond, up to \$15,000 per year.

**Match requirements:**

None.

**Eligibility requirements/preferences:**

Providers must complete an application and be approved. They must serve at a HPSA site identified by the NHSC as eligible for the loan repayment program; HPSAs with the highest scores are given priority. Communities or practice sites located in an HPSA may apply for LRP status. Providers must secure a position with the appropriate site for consideration for LRP funds. LRP site and provider consideration is determined each year, based on congressional funding and supply and demand of providers and listed vacancies. A two-year commitment is required; additional one-year contract extensions may be approved.

**Program Results:**

**Number/types placed:**

In 2006: 1,223 new LRP awards and 598 LRP contract extensions.

**WICHE state participation as of May 2007:**

- Alaska: Not available.
- Arizona: 88.
- California: Not available.
- Colorado: 78.
- Hawaii: 13.
- Idaho: 53.
- Montana: Not available.
- Nevada: 16.
- New Mexico: Not available.
- North Dakota: 16.
- Oregon: 52.
- South Dakota: 13.
- Utah 47.
- Washington: 61.
- Wyoming: 26.

**Contact Information:**

U.S. Department of Health & Human Services  
Bureau of Clinician Recruitment and Service  
5600 Fishers Lane, Rm. 8A-55  
Rockville, MD 20857  
NHSC@discoverylogic.com  
Tel: 800.638.0824 (to request an application)

All states have an NHSC contact, either within the state's health department, primary care office (PCO), or in the Office of Rural Health. For a list of state partners, see <http://nhsc.bhpr.hrsa.gov/publications/factsheets.asp>.

## FEDERAL PROGRAMS

### NATIONAL HEALTH SERVICE CORPS SCHOLARSHIP PROGRAM

#### Description:

The NHSC offers a competitive scholarship program designed for students committed to providing primary health care in communities of greatest need. Scholarship recipients serve where they are most needed upon completion of their training.

#### Funding Source:

U.S. Department of Health & Human Services.

#### Annual Funding:

\$125,528,000 in 2006.

#### Management/Governance Structure:

Administered by the Division of National Health Service Corps (NHSC), Bureau of Clinician Recruitment and Service, and the Health Resource and Services Administration (an agency of the U.S. Department of Health and Human Services).

#### History:

Began in the early 1980s; amended in 2004.

#### Program Details:

##### Providers eligible:

Primary care physicians, dentists, nurse practitioners, physician assistants, and certified nurse midwives.

##### Amount available per provider:

The program covers the following for up to four years of education:

- Tuition and fees.
- 12 monthly stipends per year of scholarship support.
- Other reasonable educational expenses (books, supplies, equipment, etc.).

##### Match requirements:

None.

##### Eligibility requirements/preferences:

Any provider enrolled or about to be enrolled in a primary care program.

Directly upon completion of training, provider will choose a practice site in a federally designated HPSA identified as having the greatest need. Period of service is one year for each year of support received, with a two-year minimum commitment. Preference is given to HPSAs with the highest scores.

#### Program Results:

##### Number/types placed:

In 2006: 164 new scholarship awards; 86 continuing awards.

**WICHE state participation for 2007 (as of May 2007):**

- Alaska: Not available.
- Arizona: 37.
- California: Not available.
- Colorado: 11.
- Hawaii: Three.
- Idaho: Four.
- Montana: Not available.
- Nevada: Six.
- New Mexico: Not available.
- North Dakota: None.
- Oregon: Six.
- South Dakota: None.
- Utah: 16.
- Washington: 14.
- Wyoming: 26.

**Contact Information:**

U.S. Department of Health & Human Services  
Bureau of Clinician Recruitment and Service  
5600 Fishers Lane, Rm. 8A-55  
Rockville, MD 20857  
Tel: 800.221.9393 (to request an application)

All states have an NHSC contact, either within the state's health department, primary care office, or in the Office of Rural Health. For a list of state partners, see <http://nhsc.bhpr.hrsa.gov/publications/factsheets.asp>.

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**NURSING SCHOLARSHIP PROGRAM**

**Description:**

Nursing scholarship.

**Funding Source:**

U.S. Department of Health & Human Services.

**Annual Funding:**

Not available.

**Management/Governance Structure:**

Department of Health & Human Services, Bureau of Clinician Recruitment & Service.

**History:**

Authorized in 2002.

**Program Details:**

**Providers eligible:**

Applicants must be enrolled or accepted for enrollment in a nursing degree program.

## FEDERAL PROGRAMS

### Amount available per provider:

The program includes:

- Tuition and required fees.
- A monthly stipend (\$1,182 for the 2006-07 academic year).
- Other reasonable education costs (books, clinical supplies, laboratory expenses).

### Match requirements:

None.

### Eligibility requirements/preferences:

Enrolled or accepted for enrollment as a full-time or part-time student in an accredited school of nursing in a professional registered nurse program (baccalaureate, graduate, associate degree, or diploma). Preference is given to qualified applicants with the greatest financial need who are enrolled full time in an undergraduate nursing program. Participants must serve two years at a health care facility with a critical shortage of nurses.

### Program Results:

#### Number/types placed:

220 students received assistance during the 2006-07 academic year. Individual state placement information is not available.

### Contact Information:

Rick Smith  
Associate Administrator  
U.S. Department of Health and Human Services  
Health Resources and Services Administration  
Bureau of Clinician Recruitment and Service  
5600 Fishers Lane  
Rockville, MD 20857  
<http://bhpr.hrsa.gov/nursing/scholarship/default.htm>

## NURSING EDUCATION LOAN REPAYMENT PROGRAM (NELRP)

### Description:

Loan repayment.

### Funding Source:

U.S. Department of Health & Human Services.

### Annual Funding:

Not available.

### Management/Governance Structure:

A participant's contract, application, required supplemental forms, supporting documentation, correspondences, and related data are maintained in a system of records to be used within the Department of Health and Human Services to monitor NELRP-related activities.

**History:**

Not found.

**Program Details:**

**Providers eligible:**

Registered nurses.

**Amount available per provider:**

NELRP is a competitive program that repays 60 percent of the qualifying loan balance of registered nurses selected for funding in exchange for two years of service at a critical shortage facility. Participants may be eligible to work a third year and receive an additional 25 percent of the qualifying loan balance. Payments are made directly to the provider.

**Match requirements:**

None.

**Eligibility requirements/preferences:**

- Have received a bachelor's or associate's degree in nursing (or equivalent), a diploma in nursing, or a graduate degree in nursing from an accredited school of nursing.
- Have outstanding qualifying loans obtained for nursing education leading to a degree or diploma in nursing.
- Are employed full time (32 hours or more per week) at a critical shortage facility.
- Have a current permanent unrestricted license as a registered nurse in the state in which they intend to practice.

**Program Results:**

**Number/types placed:**

All WICHE states have NELRP providers, except Hawaii, Nevada, and Wyoming. Specific placement numbers are not available.

**Contact Information:**

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U.S. Department of Health and Human Services  
Health Resources and Services Administration  
Bureau of Clinician Recruitment and Service  
5600 Fishers Lane  
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## KEY RURAL HEALTH WORKFORCE AGENCIES

### **AREA HEALTH EDUCATION CENTERS (AHEC)**

The AHEC (Area Health Education Centers) program was developed by Congress in 1971 to recruit, train, and retain a health professions workforce committed to underserved populations. The HETC (Health Education Training Centers) program was created in 1989 to provide programs for specific populations with persistent, severe, unmet health needs. Together, the AHEC and HETC programs help bring the resources of academic medicine to bear in addressing local community health needs.

Today, 50 AHEC programs with more than 200 centers and a dozen HETCs operate in almost every state (except South Dakota) and the District of Columbia. Approximately 120 medical schools and 600 nursing and allied health schools work collaboratively with AHECs and HETCs to improve health for underserved and underrepresented populations.

Both AHECs and HETCs are committed to expanding the health care workforce, including maximizing diversity and facilitating distribution, especially in underserved communities. To achieve this goal, AHECs and HETCs offer the creative, hands-on, and innovative Medical Academy of Science and Health (MASH) Camp; science enrichment programs; healthy lifestyles programs; health careers curriculum; and other programs for elementary, middle school, and high school students. These programs introduce students to a wide assortment of health career possibilities, guide them in goal setting and educational planning, and offer science courses that strengthen crucial thinking skills. Working with schools, colleges, and community partners, AHECs and HETCs target both economically disadvantaged students and those from underrepresented minority groups in school programs and summer institutes.

State participation levels in AHEC vary. South Dakota is the only WICHE state that does not have an AHEC office. For additional information, and to find a state AHEC or HETC office, visit: [www.nationalahec.org](http://www.nationalahec.org).

### **NATIONAL HEALTH SERVICE CORPS (NHSC)**

For 35 years the National Health Service Corps (NHSC) has been committed to improving the health of the nation's underserved. Through scholarship and loan repayment programs, the NHSC recruits and retains health professionals to deliver health care in rural and urban underserved communities. The NHSC also provides assistance in developing and preparing sites and communities to place and retain these providers.

More than 27,000 health professionals have served with NHSC since 1972. Current field strength totals more than 4,000 clinicians/health care professionals, whose careers are influencing the outcomes of underserved populations and communities. Many of these clinicians have remained in service after fulfilling their initial NHSC commitments.

## **NHSC – State Loan Repayment Program (SLRP)**

Created in 1987, the NHSC State Loan Repayment Program (SLRP) increases the availability of primary care clinicians practicing in HPSAs. Grants are made to states to operate their own loan repayment programs. Primary care health professionals who are providing full-time clinical services in public or non-profit facilities located in a federally designated HPSA are eligible to apply for loan repayment. Other eligibility requirements and benefits vary from state to state.

The federal government provides a dollar-for-dollar match to states to assist in the repayment of qualifying educational loans for primary health care clinicians who agree to practice in a public or nonprofit entity located in a federally designated HPSA. Currently, there are 33 state grantees.

SLRP represents a collaboration of federal, state, and community efforts. The federal government provides up to 50 percent of the funds to make loan repayment awards to primary health care clinicians. The remaining 50 percent of the funding comes from state and/or community resources. In addition, states provide all funds necessary to administer the program.

For additional information on all NHSC programs, visit: [www.nhsc.bhpr.hrsa.gov](http://www.nhsc.bhpr.hrsa.gov).

## **PRIMARY CARE ASSOCIATION (PCA)**

Primary Care Associations (PCAs) are state and/or regional membership associations representing federally qualified health centers (also known as: Community Health Centers of CHCs). Federally Qualified Health Centers (FQHCs) are nonprofit, consumer-directed health care corporations that provide comprehensive primary and preventive health care services.

They either: (1) receive grants under the U.S. Public Health Service Act (PHSA) (i.e., community health centers, migrant health programs, health care for the homeless programs, health care in public housing programs, Indian tribal health centers, urban Indian centers); or (2) do not receive federal PHSA grants but meet the standards for funding.

There are over 1,000 FQHCs which serve 16 million people through 5,000 sites located in all of the 50 states, Puerto Rico, the District of Columbia, the U.S. Virgin Islands, and Guam. There are over 50 state and regional primary care associations. For a list visit [www.nachc.com/primcare/srpalist.asp](http://www.nachc.com/primcare/srpalist.asp) or contact:

National Association of Community Health Centers  
7200 Wisconsin Ave., Ste. 210  
Bethesda, MD 20814  
Tel: 301.347.0400  
[contact@nachc.com](mailto:contact@nachc.com)

## **PRIMARY CARE OFFICES (PCOs)**

The Health Resources and Services Administration (HRSA) – through its Bureau of Health Professions (BHP) and Bureau of Primary Health Care (BPHC) – provides, through cooperative agreement grants, funding to state Primary Care Offices (PCOs) in all 50 states and trust territories to address the following overarching goals:

**KEY RURAL  
HEALTH  
WORKFORCE  
AGENCIES**

## KEY RURAL HEALTH WORKFORCE AGENCIES

- Organizational effectiveness and collaboration.
- Technical assistance to organizations and communities wishing to expand access to primary care for underserved populations.
- Needs assessment and data sharing.
- Workforce development for the National Health Service Corps (NHSC) and Safety Net/Health Center Network.
- Shortage designation.

State PCOs assist in the coordination of local, state, territorial, and federal resources that contribute to improving primary care service delivery and workforce availability in the state or territory to meet the needs of underserved populations. PCOs work with health centers, professional organizations, public and private entities, and community-based providers of comprehensive primary care.

The mission of HRSA is to assure equal access to comprehensive, culturally competent, quality health care throughout the nation. In HRSA the Bureau of Health Professions (BHP) works to improve the health status of the population by providing national leadership in the development, distribution, and retention of a diverse, culturally competent health workforce that provides the highest quality care for all. Also in HRSA the Bureau of Primary Health Care works to assure the availability of quality health care to low-income, uninsured, isolated, vulnerable, and special needs populations and to meet these populations' unique health care needs.

For more information and a list of PCOs, visit <http://nhsc.bhpr.hrsa.gov/resources>.

## STATE OFFICES OF RURAL HEALTH (SORH)

All 50 states have a State Office of Rural Health (SORH) that is funded in part through a grant from the federal Office of Rural Health Policy (ORHP). Under the program each state office serves its rural communities by:

- Collecting and disseminating information within the state.
- Improving recruitment and retention of health professionals into rural areas.
- Providing technical assistance to attract more federal, state, and foundation funding.
- Coordinating rural health interests and activities across a state.

Today's 50 state offices provide an institutional framework that links small rural communities with state and federal resources and develops long-term solutions to rural health problems. State offices can draw upon a wide range of technical assistance and professional support from the ORHP.

In addition, these offices established the National Organization of State Offices of Rural Health (NOSORH) to ensure a state perspective on national issues. Each year the state offices convene regional workshop at an annual conference. All offices are working in partnership with their rural communities, their state, and with the federal government to solve rural health problems.

For further information and a list of state offices of rural health, visit [www.ruralhealth.hrsa.gov](http://www.ruralhealth.hrsa.gov) or [www.nosorh.org](http://www.nosorh.org).



## WICHE OVERVIEW

### Western Interstate Commission for Higher Education (WICHE)

The Western Interstate Commission for Higher Education and its 15 member states work collaboratively to expand educational access and excellence for all citizens of the West. By promoting innovation, cooperation, resource sharing, and sound public policy among states and institutions, WICHE strengthens higher education's contributions to the region's social, economic, and civic life.

WICHE's programs – The Student Exchange Program, WCET, the Policy Analysis and Research unit, and the Mental Health Program – are working to find answers to some of the most critical questions facing higher education today. WICHE is the only organization in the West that focuses exclusively on higher education issues, from access and accountability to ensuring a workforce in areas of critical need, to distance learning and innovation. Public higher education is the primary backbone of the Western economy, and WICHE's collaborative programs and policy research support the West's citizens and its constantly evolving cultures.

WICHE's 15 member states pay equally apportioned dues; they represent approximately one-third of WICHE's annual budget and are used to support our core programs. Grants from foundations and corporations, federal support, and other fees leverage the state investments by more than a two-to-one ratio, sustaining and maximizing the return on taxpayer dollars.

#### WICHE's programs

WICHE's flexible, state-responsive **Student Exchange Programs** provide a broad range of higher education options for some 22,500 students each year at undergraduate, graduate, and professional levels. Students gain affordable access to desired programs, while states avoid unnecessary duplication of programs and institutions can devote their resources to improving the quality of their educational offerings.

Through WICHE's **Professional Student Exchange Program (PSEP)**, over 14,000 professionals, most in health care, have received home-state support when enrolled in programs in another Western state since the program's inception in 1953. The majority of graduates remain in the region to practice their careers. In 2007-08, 770 students enrolled in the program, which offers professional education in 10 health care fields.

In WICHE's **Western Undergraduate Exchange (WUE)**, students pay 150 percent of the receiving school's resident tuition, substantially less than standard nonresident tuition. Over 21,500 students enrolled in 2006-07, saving over \$131 million in tuition.

Finally, in 2006-07, 450 students paid in-state tuition for master's and doctoral programs through WICHE's **Western Regional Graduate Program (WRGP)**. The network counts 179 distinctive graduate programs at 35 institutions in 14 states. Many of the WRGP programs relate to health care, including nursing, public health, social work, and others.

In addition WICHE oversees the **State Scholars Initiative**, a national program – funded by the Office of Vocational and Adult Education of the U.S. Department of Education – that utilizes business leaders to motivate students to complete a

rigorous course of study in high school, one that will give them a boost in college and their careers; 24 states currently participate.

WICHE's **Western Policy Exchanges (WPE)**, funded in part through projects supported by private foundations, support roundtables and forums on higher education topics, assisting educational leaders and policymakers by advocating for good public policy in the West.

Another initiative, WICHE's **Legislative Advisory Committee**, works to strengthen state policymaking in higher education, engaging legislators in the discussion of higher ed issues and seeking their input on strategies for interstate collaboration. WICHE also supports decision makers via our publications, including Policy Insights and the WPE reports, a regional fact book, and in-depth reports like Knocking at the College Door: Projections of High School Graduates by State, Income, and Race/Ethnicity.

The WICHE **Internet Course Exchange (ICE)** is an alliance of member institutions and systems that share policies, procedures, and support systems for sharing distance-delivered courses among two- and four-year institutions in the WICHE region.

The **Master Property Program and the Property & Casualty Program** are group insurance programs that WICHE offers in partnership with the Midwestern Higher Education Compact. Participating institutions can broaden their property insurance coverage, reduce premium rates, and encourage improved asset protection strategies.

**WCET** addresses pressing technology-related issues in higher education, helping member institutions and organizations achieve their goals in areas such as: educational quality; increased higher education access; academic services and administrative processes that support student success; financial models for technology-delivered or supported education; and others.

The **Mental Health Program** works with the public mental health systems of the West, higher education, mental health practitioners and administrators, and consumers and family members. Its initiatives focus on improving training and research in mental health, expanding public mental health resources, developing an educated and trained workforce, and providing research and information services. WICHE's Mental Health Program has worked extensively on reforming policy to better meet the behavioral health workforce needs of rural and frontier populations.