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Colorado Health Service Corps Loan Repayment Program Advisory Council Report to the Governor and Legislature

December 1, 2015

C.R.S. § 25-1.5-505

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SECTION 1: PROGRAM OVERVIEW

Introduction

On June 2, 2009, House Bill 09-1111 was signed into law. The law created the Primary Care Office at the Colorado Department of Public Health and Environment and transferred administration of the State Health Care Professional Loan Repayment Program from the Department of Higher Education to the Primary Care Office. The loan repayment program, now known as the Colorado Health Service Corps (CHSC), is a public private partnership formed to improve access to care for medically underserved Coloradans.

The Primary Care Office is charged with reducing barriers to health care access. Specifically, the Office assesses the primary health care professional workforce needs of communities and directs clinician incentives, such as loan repayment, to areas of the state determined to have a clinician shortage. The core activities of the Office are funded by the U.S. Department of Health and Human Services, state appropriations, and foundation grants.

Importance of Health Care Professional Incentives

Evidence of Shortage: There is abundant evidence derived from program work of the Primary Care Office and other Colorado stakeholders affirming that clinics that serve publicly insured, uninsured, low-income and rural Coloradans have high barriers to health professional recruitment and retention. This problem is known to affect communities where more than one million Coloradans reside. Furthermore, 49 of 64 Colorado counties have a designation from the U.S. Secretary of Health and Human Services for primary care health professional shortages; 44 have dental health shortages; and 57 have mental health shortages.

Debt as an Influencer of Practice Choice: According to the American Association of Medical Colleges, the median level of debt for physicians completing medical school in 2014 was \$180,000. A high educational loan debt load is known to strongly influence the decision of newly licensed health professionals to opt for higher paying sub-specialties and opt for practices that do not significantly care for medically underserved people. Student loan debt repayment, in exchange for service, significantly reduces a key barrier to health professionals who might otherwise consider rural or low-income primary care practice settings.

Influence on Practice Choice: A 2010 study of 122 health care clinicians who had participated in one of three loan repayment programs in Colorado between 1992 and 2007 revealed that loan repayment had an important influence on the clinician's choice of practice community (Renner, DM, Westfall, JM, Wilroy, LA, & Ginde AA, 2010). A 2011 study conducted by the Colorado Commission on Family Medicine concluded that loan repayment is a significant contributing factor to the practice choices of new graduates (Colorado Commission on Family Medicine, 2011).

Economic Impact: A 2013 economic impact study conducted by the National Center for Rural Health concluded that one primary care physician can generate up to \$1.5 million in revenue, \$0.9 million in payroll and create 23 jobs in a community. The report also describes the potential economic impact of rural residency programs in rural regions. In a 2007 analysis, rural residencies created 15 full and part-time positions, with an estimated payroll of \$803,500. Clinicians and residents recruited or retained by a loan forgiveness program, therefore, create significant economic activity in communities with a shortage of health care resources.

Retention: A 2014 Primary Care Office evaluation of the CHSC noted that 78 percent of program alumni were retained at a safety net clinic. Among CHSC obligated health care professionals at the time of the survey, 41 percent anticipated staying at their clinic one to three years, 35 percent anticipated staying four to eight years and 44 percent anticipated continuing work in an underserved setting for 16 years or more (Colorado Primary Care Office, 2014).

SECTION 2: RESPONSE TO REPORT QUESTIONS IN C.R.S. § 25-1.5-505

Description of Programmatic Goals & Present Status (1) (b)

The purpose of the CHSC loan repayment program is to improve access to primary health care for underserved Coloradans through the development of the state's health care workforce. The CHSC program uses clinician educational loan debt repayment as a means of providing more access to care to medically underserved people. Through such methods, the CHSC increases the capacity of safety net clinics to respond to the primary health care access needs of uninsured, publicly insured and geographically isolated Coloradans.

The low-income portions of many urban communities and most rural communities have insufficient numbers of health care professionals to meet the needs of the population, and are therefore underserved on that basis. The program accomplishes the goal of increasing the workforce in underserved communities by forgiving a health care professional's educational loan debt in exchange for a minimum three-year service commitment in a Health Professional Shortage Area. Educational loan debt forgiveness has been demonstrated in state and national studies to increase the successful *recruitment* of clinicians to underserved communities and increase the rate of clinician *retention* once a successful placement has been made.

The Primary Care Office has substantially developed the resources available for the CHSC since 2009. The CHSC receives the maximum federal matching grant of \$1 million per year, has several foundation grants that have ranged between \$1.6 and \$3.8 million per year over the last five years and has received an additional state appropriation in 2015 of \$1.8 million.

The CHSC currently supports clinicians practicing full or part time in an outpatient primary care setting, who are licensed and specialize in one of the following disciplines:

- Allopathic or osteopathic physicians who specialize in family medicine, general internal medicine, general psychiatry, child psychiatry, general pediatrics, and general obstetrics/gynecology
- Doctors of dental surgery and doctors of dental medicine
- Certified nurse-midwives
- Clinical and counseling psychologists
- Licensed clinical social workers
- Licensed professional counselors
- Licensed dental hygienists
- Marriage and family therapists
- Nurse practitioners practicing in primary care
- Physician assistants practicing in primary care
- Psychiatric nurse specialists
- Clinical pharmacists

Under a full-time CHSC service obligation, physicians and dentists may receive up to \$90,000. Physician assistants, advanced practice nurses, clinical pharmacists and licensed mental health clinicians may receive up to \$50,000 and dental hygienists may receive up to \$20,000. Under a part-time obligation, physicians and dentists may receive up to \$45,000. Physicians assistants, advanced practice nurses, clinical pharmacists and licensed mental health clinicians may receive up to \$25,000 and dental hygienists may receive up to \$10,000. CHSC clinicians who have completed their initial three-year service obligation in good standing and have maintained practice at the same approved site where they were awarded, are eligible for a CHSC renewal award.

There are 280 eligible CHSC clinical sites across the state. Eligible sites are located in a health professional shortage area, are a public or nonprofit corporation, provide comprehensive, outpatient primary care services for at least 40 hours per week, accepts Medicaid, Medicare, CHP+ and offers a sliding fee scale for uninsured and low income patients, and have a declared nondiscrimination policy. Clinical sites common to the CHSC are:

- Federally Qualified Health Centers (FQHC)
- FQHC Look Alikes
- Certified Rural Health Clinics
- Community Mental Health Centers
- State Psychiatric Hospitals
- Colorado Department of Corrections sites
- School-based health centers
- Community supported, nonprofit, primary care clinics

Program Award Criteria: The CHSC Advisory Council ensures that statutory eligibility criteria in the Colorado program remains flexible up to the limits allowable under federal matching grant requirements and state statute. Applications to the CHSC are scored on a 100-point scale. The scale is used to weigh and stratify educational and practice attributes known to associate with long-term clinical employee retention. Points are awarded based on the following characteristics:

- Graduates of any Colorado health professional training program (6 points).
- Grew up in a rural or underserved area with a specific personal experience of medical under service (10 points).
- Training experience in preparation for working with rural or underserved populations (20 points).
- Clinical proficiency in a language other than English (5 points).
- Practices located in a geographic Health Professional Shortage Area (6 points).
- Two confidential letters of support (structured review with a maximum of 7 points for each letter).
- A personal statement to evaluate the applicant's commitment to serving the underserved people of the community (structured review with a maximum of 20 points).
- An interview is conducted with leadership at the applicant's clinic to assess the applicant's likelihood of retention (structured review with a maximum of 15 points).

Impact Analysis (1)(d)

Participation in the CHSC requires participants to report twice annually on practice hours and the characteristics of patient care. CHSC participating clinicians have provided 1,082,419 clinical encounters in underserved Colorado communities since July 2009. Nearly 82 percent of these clinical encounters were provided to individuals who were uninsured or insured by Medicaid or Medicare. The total contracted service of all 316 CHSC participants since 2009 constitutes nearly 1,000 years of service to medically underserved Colorado communities.

As of November 1, 2015 there are 141 obligated health professionals under current contract with the CHSC.

Table 1: CHSC Obligated Health Professionals by Location

County Setting	CHSC Field Strength
Urban	69%
Rural	31%

Table 2: CHSC Obligated Health Professionals by Clinic Setting

Clinic Setting	CHSC Field Strength
Federally Qualified Health Center	53%
Community Mental Health Center	19%
Rural Health Clinic	10%
Department of Corrections	6%
Indian Health Service Clinic	1%
State Psychiatric Institution	7%
Charitable Safety Net Clinics	4%

Table 3: CHSC Obligated Health Professionals by Discipline

Discipline	CHSC Field Strength
Physicians	35%
Physician Assistants	13%
Nurse Practitioners	14%
Dentists	9%
Registered Dental Hygienists	1%
Licensed Professional Counselors	11%
Clinical Pharmacists	4%
Psychologists	6%
Certified Nurse Midwifes	1%
Licensed Clinical Social Workers	6%

Maximizing Federal Matching Funds: The federal matching grant for the CHSC Loan Repayment Program in 2014 and 2015 was \$1 million for each year. This is the current maximum award available to states for clinician loan repayment programs. Colorado remains the model program among state loan repayment programs in the nation due to its successes in attracting private dollars and maximizing federal awards.

Results of Surveys Conducted to Evaluate other Loan Repayment Programs (1)(e)

The Primary Care Office has successfully consolidated all major health care professional loan repayment programs in the state for oral health, primary care and health professional faculty. This consolidation has resulted in the following benefits:

Operational Efficiency: A consolidated state program simplifies the search, eligibility determination and application process for care clinicians who are seeking incentives in consideration of a practice in a medically underserved community. In addition, a consolidated program reduces the cost of program administration in proportion to the total funds available for annual awards. This is because the infrastructure and staffing necessary to run a loan forgiveness program are largely fixed and do not significantly increase as available award funding increases. Because the authorizing legislation for the state program creates a distributed decision-making process in the CHSC Advisory Council, most major interests and organizations invested in health professional workforce development are represented in decision-making regarding program policies and award priorities.

Federal Matching Grants: The CHSC participates in the federal matching grant program of the Health Resources and Services Administration. All non-federal dollars in the CHSC program may receive up to a one-to-one federal match. Though the amount available from the federal government for matching grants is limited, a successful application for \$4 million (\$1 million a year for four years) was awarded in 2013. This was the maximum available federal award for 2013.

Income Tax Exemption for Awards: The third, and perhaps most compelling reason for a consolidated state program is that awards made from the CHSC are exempted from federal and state income taxes. In all other monetary clinician incentives, the award is treated as ordinary income and taxed on that basis. The diminution of the award resulting from income taxation ranges from 25 to 35 percent, depending on individual clinician tax circumstances. This effect causes a portion of state tax dollars and philanthropic dollars outside of the CHSC to flow to the federal government as tax revenue rather than to the exclusive purpose of providing a primary care clinician incentive.

The combined effect of these three program advantages can be quantified in comparing the following two scenarios.

Appropriation or private grant *outside* of the CHSC

- \$ 1.00 state appropriation and/or private grant
- \$-0.10 approximate operating expenses
- \$-0.30 approximate federal and state income tax liability
- \$ 0.60 net incentive benefit to clinician

Appropriation or private grant inside of the CHSC

- \$ 1.00 state appropriation and/or private grant
- \$-0.05 approximate operating expenses
- \$ 0.95 federal matching funds potential
- \$ \$0 federal and state income tax liability
- \$ 1.90 net incentive benefit to clinician

The clinician benefit of the state program, per dollar invested, is more than three times that of other options for primary care practice incentives. Although these examples are based on assumptions that may vary among individual awardees and annual federal matching grant opportunities, the overall benefit of consolidation under the state program is clear.

Existing Efforts & Strategies for Further Collaboration & Addressing Barriers (1)(c)

Barriers: The CHSC has been successful in identifying and addressing risks to program sustainability. The program has resolved administrative, policy, regulatory and statutory challenges to assure an effective and efficient program, including the timing and payment of contracts, contract risk management, and program promotion to employers and clinicians.

The CHSC is experiencing an unprecedented level of program demand. For the September 2012 CHSC application cycle, the Primary Care Office processed 54 loan repayment applications and granted 22 awards. In contrast, the March 2015 application cycle received 150 eligible loan repayment applications and made 52 awards:

Table 4: Colorado Health Service Corps Program Demand Growth 2012-2015

Application Cycle	Eligible Applications	Awards
September 2012	54	22
March 2013	80	24
September 2013	105	24
March 2014	Insufficient Funds	to Make Awards
September 2014	149	22
March 2015	150	52

According to the Colorado Health Institute, the percentage of Coloradans without health insurance fell to a record low 6.7 percent, from 14.3 percent in 2013. Medicaid enrollment soared by 450,000 between 2013 and 2015. This has resulted in increased demand for primary care services in the communities where CHSC clinicians practice. Just as the newly insured begin seeking care, a precipitous decrease in CHSC award capacity in the absence of grants and appropriations, will negatively affect the access which potential coverage expansions are intended to provide.

National Health Service Corps, a similar federal program to the CHSC, prioritizes loan repayment to areas with the greatest clinician shortage. Colorado has relatively fewer highest scoring HPSAs, thus we are less able to compete for federal resources as federal funding has leveled. Primary care clinicians and their employers have, therefore, turned to the CHSC for recruitment and retention assistance.

Successful Loan Forgiveness Programs and Best Practices Across the County (1)(a)

Health professional loan repayment programs in California, Iowa, Kansas, Minnesota, North Dakota, Ohio, Washington and Wyoming were selected for review and comparison in this report. A detailed overview of each state's program can be found in Section 3. These states were chosen based on their proximity to Colorado, the rural disposition of their state, or their reputation for program effectiveness.

Each of these state loan repayment programs conforms to several broad principles. All states appear to focus on incentives for outpatient care in areas known to be short of health care professionals. All programs emphasize primary care, but a few states include additional health professions such as physical therapy and general nursing. Most states require multiyear commitments from clinicians, ranging from two to five years. Total clinician award values range from \$8,000 to \$105,000. The largest programs, by total funding, are those that receive a blend of support from state, federal and private sources. The smaller programs tend to be those that only use a state appropriation to draw down federal matching funds.

Nursing Faculty or Other Health Care Professional Faculty Members (1)(f)

Since the submission of the last CHSC legislative report no nursing faculty or other health care professional faculty members have received a loan repayment award from the CHSC. However, in FY2015 the Primary Care Office received a state appropriation of \$270,000 to administer three loan repayment contracts for faculty members of Colorado's Family Medicine Residencies. These contracts will continue to be administered on an annual basis so long as funds are appropriated for this purpose. Currently, there are no state funds available to support loan repayment for nursing faculty.

SECTION 3: ATTACHMENTS A: REVIEW OF OTHER STATE PROGRAMS

Program	Award Characteristics	Eligibility	Funding and Administration
California	Licensed Vocational Nurse Loan Repayment Program: ≤\$8,000 for a one year service obligation Advanced Practice Healthcare Loan Repayment Program: ≤\$50,000 for a two year service obligation Bachelor of Science Nursing Loan Repayment Program: ≤\$8,000 for a two year service obligation. May be awarded a second time for up to an additional \$11,000 Licensed Mental Health Services Provider Education Program: ≤\$15,000 for a two year service obligation Licensed Vocational Nurse Loan Repayment Program: ≤\$6,000 for a two year service obligation Mental Health Loan Assumption Program: ≤\$10,000 for a one year service obligation for mental health professionals practicing in the state's public mental health system Steven M. Thompson Physician Corp Loan Repayment Program: ≤\$105,000 for a three year service obligation	Occupations supported by the state's loan forgiveness programs include: • Allopathic or Osteopathic Physicians (family medicine, general internal medicine, general pediatrics and general obstetrics/gynecology) • Allopathic or Osteopathic surgeons • General Dentists • Dental Hygienists • Certified Nurse-Midwives • Clinical Nurse Specialists • Occupational Therapists • Clinical Pharmacists • Physical Therapists • Speech Language Pathologists • Clinical or Counseling Psychologists • Clinical Social Workers • Licensed Clinical Social Workers • Licensed Professional Counselors • Mental Health Counselors • Marriage and Family Therapists • Nurse Practitioners • Physician Assistants • Psychiatric Nurse Specialists	Administered by the California Office of Health Planning and Development, Healthcare Workforce Development Division California operates six scholarship programs and eight health professional loan repayment programs. State programs are supported by state funds. The Mental Health Loan Assumption program is the MHLAP was created by the Mental Health Services Act (Act), passed by California voters in November 2004. The California State Loan Repayment Program is supported by \$1,000,000 in federal funds. Matching funds are the responsibility of the provider's clinical site. Field strength of the California State Loan Repayment Program as of November 1, 2015: 127 obligated health professionals 402 eligible clinical sites

Program	Award Characteristics	Eligibility	Funding and Administration
California (cont.)	State Loan Repayment Program/National Health Service Corps Loan Repayment Program: <pre><\$50,000 for an initial two year full-time service obligation or four year part-time service obligation</pre>	Registered Nurses and Licensed Practical Nurses Allied healthcare professionals (clinical laboratory specialists, community health workers, diagnostic medical sonographers, medical assistants, medical imagers, medical laboratory technicians, nuclear medicine technicians, pharmacy technicians, physical therapy assistants, radiation therapy assistants, radiological technicians, respiratory care therapists, surgical technicians, ultrasound technicians	
lowa	The Primary Care Recruitment and Retention Endeavor (PRIMECARRE) \$50,000 full-time, <25,000 part-time for a maximum two year service obligation	Occupations supported by the state's loan forgiveness program include: • Allopathic or Osteopathic Physicians (family medicine, general internal medicine, general/child psychiatry, general pediatrics and general obstetrics/gynecology) • General Dentists • Dental Hygienists • Certified Nurse-Midwives • Clinical Psychologists • Licensed Clinical Social Workers • Mental Health Counselors • Marriage and Family Therapists • Nurse Practitioners • Physician Assistants • Psychiatric Nurse Specialists	Administered by the Iowa Department of Public Health, Bureau of Oral and Health Delivery Systems. PRIMECARRE was authorized by the Iowa Legislature in 1994 to strengthen the primary health care infrastructure in Iowa. PRIMECARRE allocations currently support the Iowa Loan Repayment Program, with matching federal and state funds. The program is supported by \$140,000 in federal funds and \$140,000 in state funds. Field strength of the PRIMECARRE as of November 1, 2015: • 12 obligated health professionals • 200 eligible clinical sites

Program	Award Characteristics	Eligibility	Funding and Administration
Kansas	Kansas Bridging Plan ≤\$26,000 offered to physicians in Kansas residency programs of Family Practice, Internal Medicine, Pediatrics and Medicine/Pediatrics Kansas State Loan Repayment Program ≤\$50,000 per year for primary care physicians and general dentists for a two-year commitment. ≤\$40,000 per year for nurse practitioners, nurse midwives, physician assistants, psychologists, licensed clinical social workers, psychiatric nurse specialists, mental health counselors, licensed clinical professional counselors, and marriage and family therapists for a two-year commitment ≤\$30,000 Dental Hygienists for a two year commitment.	Occupations supports by the state's loan forgiveness programs include: • Allopathic or Osteopathic Physicians (family medicine, general internal medicine, general/child psychiatry, general pediatrics and general obstetrics/gynecology) • Physician Residents • General Dentists • Dental Hygienists • Certified Nurse-Midwives • Clinical or Counseling Psychologists • Licensed Clinical Social Workers • Licensed Professional Counselors • Marriage and Family Therapists • Nurse Practitioners • Physician Assistants • Psychiatric Nurse Specialists	The Kansas Bridging Plan is administered by the University of Kansas Medical Center, Rural Health Education and Services. As of November 1, 2015 there were 212 Kansas Bridging Plan participants practicing medicine in Kansas. The Kansas State Loan Repayment Program is administered by the Kansas Department of Health and Environment, Division of Public Health, Bureau of Community Health Systems, Primary Care and Rural Health The Kansas State Loan Repayment Program is supported by \$250,000 in federal funds and \$250,000 in state funds. Field Strength of the Kansas State Loan Repayment Program as of November 1, 2015: • 16 obligated health professionals • 50 eligible clinical sites
Minnesota	Rural and Urban Physician Loan Repayment Program ≤\$17,000 per year, for a minimum of three years for family practice, pediatric, internal medicine, obstetrics and gynecology and psychiatric residents Rural Midlevel Practitioner Loan Forgiveness Program ≤\$6,750 per year for a maximum of four years for nurse practitioners, certified nurse midwives, nurse anesthetists, advanced clinical nurse specialists and physician assistant students	Occupations supported by the state's loan forgiveness programs include: • Allopathic or Osteopathic Physicians (family medicine, general internal medicine, general/child psychiatry, general pediatrics and general obstetrics/gynecology) • Physician Residents • Nurse Practitioners • Certified Nurse Midwives • Nurse Anesthetists • Advanced Clinical Nurse	Administered by the Minnesota Department of Health, Office of Rural Health and Primary Care Faculty and resident loan repayment programs are state supported. By April 2007, these programs had served over 564 health care practitioners and the state had expanded its annual appropriation for the program to \$1.3 million. The Minnesota State Loan Repayment Program is supported by \$100,000 in federal funds and \$100,000 in state funds. Field

Program	Award Characteristics	Eligibility	Funding and Administration
Minnesota (cont.)	Nurses in Nursing Home Loan Forgiveness Program ≤\$3,750 for a maximum four years for registered nurses and licensed practical nurses who agree to practice in a nursing home or in an Intermediate Care Facility for Persons with Mental Retardation Rural Pharmacists Loan Forgiveness Program ≤\$13,750 per year for a maximum of four years to students and residents in pharmacy programs or practicing licensed pharmacists Dentist Loan Forgiveness Program ≤\$19,000 per year is available for up to four years to students and residents in dental programs or licensed dentists Allied Health and Nurse Faculty Loan Forgiveness Program ≤\$6,750 per year for a minimum of three years is available to individuals teaching or studying to teach in allied health or nursing programs Minnesota Sate Loan Repayment Program ≤40,000 full-time service or ≤\$20,000 part-time service for a minimum of 2 years of service	Specialists Physician Assistants Nurses in Nursing Homes Dentists Dental Hygienists Clinical Psychologists Licensed Clinical Social Workers Pharmacists Allied Health and Nursing Faculty Professional Counselors Psychiatric Nurse Specialists Marriage and Family Therapists	Strength of the Minnesota State Loan Repayment Program as of November 1, 2015: 12 obligated health professionals 300 eligible clinical sites
North Dakota	Health Care Professional Student Loan Repayment Program	Occupations supported by the state's loan forgiveness programs include:	Administered by the University of North Dakota, Department of Health
	<\$150,000 physicians;	Allopathic or Osteopathic Physicians (family medicine,	

Program	Award Characteristics	Eligibility	Funding and Administration
	<pre><\$22,000 advanced nurse practitioners and physicians assistants; <\$75,000 clinical psychologists; <\$22,000 behavioral health professionals for a service obligation not lasting more than five years Dentists Loan Repayment Program <\$100,000 for a service obligation not lasting more than five years Federal State Loan Repayment Program <\$50,000 for a two year service obligation</pre>	general internal medicine, general/child psychiatry, general pediatrics and general obstetrics/gynecology) • Nurse Practitioners • Clinical Nurse Specialists • Nurse Anesthetists • Certified Nurse Midwives • Physician Assistants • Clinical Psychologists • Licensed Additional Counselors • Licensed Professional Counselors • Licensed Clinical Social Workers • Registered Nurses • Specialty Practice Registered Nurses • General Dentists • Pediatric Dentists • Pediatric Dentists • Psychiatric Nurse Specialists • Marriage and Family Therapists • Registered Pharmacists	The Health Care Professional Student Loan Repayment Program and Dentists Loan Repayment Program are state supported. The Federal State Loan Repayment Program is supported by \$308,000 in federal funds. Requires a 1:1 match from the sponsoring organization or community. Field strength of the North Dakota Federal State Loan Repayment Program as of November 1, 2015: • 9 obligated health professionals • 60 eligible clinical sites
Ohio	Ohio Dentist and Dental Hygienist Loan Repayment Programs: <pre><\$50,000 full-time, <pre><\$25,000 part-time</pre> for a two year service obligation Ohio Physician Loan Repayment Program: <pre><\$50,000 full-time</pre> and <pre><\$25,000 part-time</pre> for a two year service obligation.</pre>	Occupations supported by the state's loan forgiveness programs include: • Allopathic or osteopathic physicians who specialize in family medicine, general internal medicine, general/child psychiatry, general pediatrics and general obstetrics/gynecology • General Dentists • Dental Hygienists	Administered by the Ohio Department of Health, Office of Health Policy, Primary Care Office The Ohio Dentist and Dental Hygienist Loan Repayment Programs are state supported. The Ohio Physician Loan Repayment Program is supported by \$430,000 in federal funds and \$430,000 in state funds. Field strength of the Ohio Physician Loan Repayment Program as of November 1, 2015: • 29 obligated health professionals • 45 eligible clinical sites

Program	Award Characteristics	Eligibility	Funding and Administration
Washington	Health Professional Loan Repayment Programs: Federal State Loan Repayment Program ≤\$70,000 maximum award for two-year service obligation Health Professional Loan Repayment Program ≤75,000 maximum award for a minimum three-year service obligation.	Occupations supported by the state's loan forgiveness programs include: • Allopathic or Osteopathic Physicians (family medicine, general internal medicine, general/child psychiatry, general pediatrics and general obstetrics/gynecology) • Naturopathic Physicians • Registered Nurse • Licensed Practical Nurses • Pharmacists • Dentists • Dental Hygienists • Certified Nurse-Midwives • Licensed Midwives • Nurse Practitioners • Physician Assistants	Administered by the state of Washington Higher Education Coordinating Board, Washington Student Achievement Council The Health Professional Loan Repayment Program provides financial assistance through either conditional scholarships or loan repayment and is uses state dollars only for awards. The Federal State Loan Repayment Program is supported by \$525,000 in federal funds and \$525,000 in state funds. Field Strength of the Health Professional Loan Repayment as of November, 1, 2015: 14 obligated health professionals 14 eligible clinical sites
Wyoming	Wyoming Healthcare Professional Loan Repayment Program ≤\$30,000 per year for three years for primary care physicians and general dentists ≤\$20,000 per year for three years for allied health professionals, including but not limited to hospital, medical, surgical, dental, vision, nursing, radiology, mental health, speech/language pathology and pharmaceutical services Wyoming State Loan Repayment Program ≤\$60,000 for physicians, physician assistants and nurse practitioners for two (2) years of full-time service	Occupations supported by the state's loan forgiveness programs include: • Allopathic or Osteopathic Physicians (family medicine, general internal medicine, general/child psychiatry, general pediatrics and general obstetrics/gynecology) • Physician Assistants • Nurse Practitioners (including adults, family pediatrics, geriatrics and women's health) • Certified Nurse Midwives • Dentists • Allied Health Professionals (podiatrists, chiropractors,	Administered by the Wyoming Office of Rural Health, Public Health Division The Wyoming Healthcare Professional Loan Repayment Program is state supported. Between 2006 and 2012 Wyoming made 258 loan repayment awards to 75 physicians, 18 Dentists and 165 allied health or other eligible health professionals. The Wyoming State Loan Repayment Program is supported by \$80,000 in federal funds and \$80,000 in state funds. Field Strength of the Wyoming State Loan Repayment Program as of November, 1, 2015: • 4 obligated health professionals • 13 eligible clinical sites

Program	Award Characteristics	Eligibility	Funding and Administration
Wyoming (cont.)	< \$20,000 for certified nurse midwives in exchange for two (2) years of full-time service	dental hygienists, advanced practice nurses, licensed practical nurses, certified nurse assistants, optometrist, pharmacists, pharmacy technicians, physical therapists, physician assistants, psychologists, speech pathologists and audiologists, laboratory directors, emergency medical technicians, radiological technologists, professional counselors, marriage and family therapists, social workers, chemical dependency specialists, occupational therapists, and respiratory care practitioners)	

B: Comparison of Existing Provider Incentive Programs in Colorado

Program	Award Characteristics	Participants and Patients Served	Eligibility	Administration and Funding
Colorado Health Service Corps Loan Repayment Program	Three Year Service Obligations:	CHSC Field Strength as of November 1, 2015: 133 obligated health professionals 44 Physicians 14 Physician Assistants 20 Nurse Practitioners 12 General Dentists 1 Registered Dental Hygienist 11 Psychologists 9 Licensed Clinical Social Workers 15 Licensed Professional Counselors 1 Certified Nurse Midwife 6 Clinical Pharmacists CHSC 2014 Totals: 239,911Coloradans served 64% Medicaid 13% Medicare 7% CHP+ 16% Uninsured	This program is open to the following providers who are practicing full time in a public or nonprofit, outpatient, primary care, clinical setting. All providers must practice in a rural or low-income are • Allopathic or Osteopathic Physicians (family medicine, general internal medicine, general/child psychiatry, general pediatrics and general obstetrics/gynecology) • General Dentists* • Dental Hygienists* • Certified Nurse-Midwives • Clinical or Counseling Psychologists • Licensed Clinical Social Workers • Licensed Professional Counselors • Marriage and Family Therapists • Nurse Practitioners • Physician Assistants • Psychiatric Nurse Specialists • Clinical Pharmacists *Oral health professionals who do not meet the CHSC criteria are directed to apply for the Expanded Dental Option of the CHSC.	The Primary Care Office at CDPHE administers the program. Award decisions are determined by the Colorado Health Service Corps Advisory Council. Colorado Health Service Corps applications are accepted twice annually (March and September) The program is funded by the state of Colorado, the Health Services and Resources Administration, The Colorado Health Foundation and the Comprecare Foundation 2009 to Present Annual state appropriations from \$202,000 to \$2,672,000 Annual federal matching from \$120,000 to \$1,000,000 Annual philanthropic \$0 to \$1,750,000 Total funding for 2016 is \$5.4 million

National	<pre><\$3,333 for dental hygienists (nontaxable income)</pre>	CHSC 2015 Totals: 92,701 Coloradans served 71% Medicaid 14% Medicare 2% CHP+ 13% Uninsured National Health Service	The NHSC Loan Repayment	The Health Resources and
Health Service Corps	Program: Up to \$50,000 for a two- year service commitment against educational loan debt; renewable for \$20,000 full-time and \$10,000 part-time for the third and fourth year of service; \$10,000 and \$5,000 for the fifth and sixth year of service NHSC Scholars Program: Competitive federal program that awards scholarships to students pursing eligible primary care health professions training. The Program pays for tuition and education- related expenses and also provides a monthly stipend for living expenses for a minimum of two years full- time service in an NHSC- approved site.	Corps field strength as of November 1, 2015: • 187 obligated health professionals • 17 NHSC scholars • 121 Nurse Corps participants • 96 eligible clinical sites	Program is open to the same providers and with the same eligibility criteria as the Colorado Health Service Corps state loan repayment program, with the addition of a private practice option.	Services Administration administers the program. The Primary Care Office manages certain aspects of eligibility, provider placement and a range of technical assistance to service sites NHSC provider applications are typically accepted in January New NHSC sites my apply in the spring of each calendar year while existing clinical sites my recertify in the fall of each calendar year

	SC Nurse Corps Loan payment Program		
Rep prov prac port	e NHSC Nurse Corps Loan payment Program vides funds to full-time cticing RNs to repay a tion of their qualifying ecational loans.		
qua edu for s	percent of total lifying nursing cational loans balance an initial two year vice obligation		
tota edu for a	additional 25 percent of al qualifying nursing icational loan balance a third, optional, year iervice		

C: Colorado Health Service Corps Advisory Council

Board Member	Organization Name	Interest Served on the Board	Year Appointed	Term Expiration
Andrea Nederveld, MD	Fruita Family Medicine / Juniper Family Medicine, Grand Junction, CO	Representative with expertise in providing health care in health professional shortage areas of the state	5/1/2012	11/20/2016
Rachel Lunney	Northwest Colorado Council of Governments	Representative of an economic development organization that operates in Colorado	1/15/2015	11/20/2017
Rosario Medina, PhD, FNP-BC, ADNP, CNS	University of Colorado Denver and Health Sciences Center	Representative advanced practice nurse licensed to practice in Colorado	1/15/2015	11/20/2017
Jeannie Larsen	Southeast Mental Health Services	Representative of a behavioral health organization that operates in Colorado	9/10/2013	11/20/2016
Karen Funk, MD	Clinica Family Health Services, Inc.	Representative to serve as a person with expertise in providing health care in rural or other medically underserved areas of the state	10/29/2013	11/20/2016
Kim Marvel, Ph.D.	Colorado Association of Family Medicine Residencies	Representative of the Commission on Family Medicine	11/12/2015	11/20/2018
Katya Mauritson, DMD	Colorado Department of Public Health and Environment, Oral Health Unit	Representative of a state loan forgiveness program for oral health professionals	11/19/2014	11/20/2017
Marcia Gilbert, DNP, APRN-BC	Regis University	Representative with expertise in providing health care in a health professional shortage areas of the state	11/19/2014	11/20/2017
Brian Bacak, MD, FAAFP	University of Colorado School of Medicine, Rural Track	Representative person with expertise in providing health care in health professional shortage areas of the state, and a representative from a public institution of higher education in the state that provides health care professional education programs	1/15/2015	11/20/2017
Melissa Bosworth	Colorado Rural Health Center	Representative of a nonprofit statewide membership organization providing programs and services to enhance rural health care	9/10/2013	11/20/2016

Brian Ross	Colorado Behavioral Health	Representative from a membership organization	8/22/2014	11/12/16
	Council	representing community behavioral health care		
		providers		
Polly Anderson	Colorado Community Health	Representative of a membership organization	9/10/2013	11/20/2016
	Network	representing federally qualified health centers in		
		Colorado		
Tonya Weinberg	The Colorado Health	Representative of a foundation that funds a health	11/12/2015	11/20/2018
	Foundation	care professional loan forgiveness program		