



National Health Service Corps Students to Service Loan Repayment Program

FY 2022

Application and Program Guidance

August 2021

Application Submission Deadline: November 4, 2021; 7:30 p.m. ET

U. S. Department of Health and Human Services
Health Resources and Services Administration
Bureau of Health Workforce
[National Health Service Corps](#)
5600 Fishers Lane
Rockville, Maryland 20857

For questions, call 1-800-221-9393 (TTY: 1-877-897-9910) Monday through Friday (except federal holidays) 8:00 a.m. to 8:00 p.m. ET.

Authority: Section 338B of the Public Health Service Act (42 USC 254I-1), as amended; Section 331(i) of the Public Health Service Act (42 USC 254d(i)), as amended. Future changes in the governing statute, implementing regulations, and Program Guidance may also be applicable to Students to Service Loan Repayment Program participants.

CFDA Number: 93.547

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PRIVACY ACT NOTIFICATION STATEMENT

General

This information is provided pursuant to the Privacy Act of 1974 (Public Law 93-579), as amended, for individuals supplying information for inclusion in a system of records.

Statutory Authority

Section 338B of the Public Health Service (PHS) Act (42 United States Code Section 254I-1), as amended; Section 331(i) of the PHS Act (42 United States Code Section 254d(i)), as amended.

Purposes and Uses

The purpose of the National Health Service Corps (NHSC) Students to Service Loan Repayment Program (S2S LRP) is to recruit students, in their last year of medical, dental, physician assistant, or nursing school, to provide primary health services to eligible communities of need designated as Health Professional Shortage Areas (HPSAs). The information applicants' supply will be used to evaluate their eligibility, qualifications, and suitability for participating in the NHSC S2S LRP. In addition, information from other sources will be considered (e.g., credit bureau reports).

An individual's contract, application, supporting documentation, related correspondence, and data are maintained in a system of records used within the U.S. Department of Health and Human Services to monitor NHSC S2S LRP-related activities during school, postgraduate training, the service obligation, and program performance. The information may also be disclosed outside the Department, as permitted by the Privacy Act and Freedom of Information Act (FOIA), to the Congress, the National Archives, the Government Accountability Office, and pursuant to court order and various routine uses described in the [System of Record Notice 09-15-0037](#).

The name of an NHSC S2S LRP participant, discipline, specialty, business address, business telephone number, and service obligation completion date may be provided to professional placement firms in response to requests made under FOIA.

Effects of Nondisclosure

Disclosure of the information sought is voluntary; however, if not submitted, except for the replies to questions related to race/ethnicity, an application may be considered incomplete and therefore may not be considered for an award under this announcement.

PAPERWORK REDUCTION ACT PUBLIC BURDEN STATEMENT

The purpose of the NHSC SP, NHSC S2S LRP, and the NHHSP is to provide scholarships or loan repayment to qualified students who are pursuing primary care health professions education and training. In return, students agree to provide primary health care services at approved facilities located in designated Health Professional Shortage Areas (HPSAs) once they are fully trained and licensed health professionals. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this information collection is 0915-0146 and it is valid until 07/31/2023. This information collection is required to obtain or retain a benefit (NHSC SP: Section 338A of the PHS Act and Section 338C-H of PHS Act; NHSC S2S LRP: Section 338B of the PHS Act and Section 331(i) of the PHS Act; NHHSP: The Native Hawaiian Health Care Improvement Act of 1992, as amended [42 U.S.C. 11709]. Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send

comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, Maryland, 20857 or paperwork@hrsa.gov

Non-Discrimination Policy Statement

In accordance with applicable federal laws and U.S. Department of Health and Human Services policy, the Department does not discriminate on the basis of any non-merit factor, including race, color, national origin, religion, sex, sexual orientation, gender identity, disability (physical or mental), age, status as a parent, or genetic information.

Read the Application and Program Guidance (Guidance) in its entirety before proceeding with an application. The Guidance explains in detail the rights and commitments of individuals selected to participate in the National Health Service Corps (NHSC) Students to Service Loan Repayment Program (S2S LRP). Be sure you have a complete understanding of the commitment to serve at an NHSC-approved service site and the financial consequences of failing to perform that commitment.

Important Dates

NHSC S2S LRP participants should be aware of the following key dates:

- Submission Deadline: Thursday, November 4, 2021 at 7:30 p.m. ET
- Notification of Award: No later than April 15, 2022
- Contract Termination Deadline: Within 60 days following the execution of the contract (i.e., signature of both parties) or, at any time if the individual who has been awarded such contract has not received funds due under the contract.

PROGRAM OVERVIEW

INTRODUCTION

The National Health Service Corps (NHSC) Students to Service Loan Repayment Program (S2S LRP) is administered by the Bureau of Health Workforce (BHW) in the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS). The NHSC S2S LRP provides loan repayment awards to students pursuing a degree in allopathic medicine, osteopathic medicine, physician assistant studies, nursing, or dentistry. In exchange for loan repayment, individuals agree to provide primary health services in Health Professional Shortage Areas (HPSAs) of greatest need. HPSAs can be found in rural and urban communities across the nation, and are prioritized, based on a score; the higher the score, the greater the need in the community.

The NHSC seeks applicants who demonstrate the characteristics of a health professional student who has an interest in serving the nation's medically underserved populations and remaining in a HPSA beyond their service commitment. Service in communities with limited access to health care, not the repayment of educational loans, is the primary purpose of the NHSC S2S LRP. Students with a commitment to primary health care practice in HPSAs throughout the U.S. and who are willing to relocate based on the needs of the NHSC are the best candidates for this program.

Benefits of the NHSC S2S LRP

- (1) **Service.** By joining thousands of NHSC participants across the country, you have an opportunity to provide primary health services to communities in need.
- (2) **Loan Repayment.** The NHSC S2S LRP will provide funds to participants to repay their outstanding, qualifying, educational loans. NHSC S2S LRP funds are exempt from federal income and employment taxes. These funds are not included as wages when determining benefits under the Social Security Act. Participants will receive up to \$120,000 in loan repayment funds payable in four annual installments (of up to \$30,000 per year) subject to meeting program requirements. (If a participant's outstanding balance of qualifying educational loans is less than \$120,000, the NHSC S2S LRP will pay the total qualifying educational loans divided into four equal installments.) In return, participants agree to provide three years of full-time clinical practice at an NHSC-approved site in a HPSA upon completion of training. "Full-time clinical practice" is defined as no less than 40 hours per week, for a minimum of 45 weeks per service year.
- (3) **Complete Repayment of Qualifying Loans.** Once an NHSC S2S LRP participant has completed the initial three-year service contract, they may be eligible to apply for additional loan repayment funds to pay any remaining educational loans through one-year continuation service contracts. Note that there is no guarantee that a participant will receive a continuation contract for continued participation in the program beyond the initial contract. Continuation contracts will be made at the government's discretion and are subject to the availability of appropriated funds. Participants who wish to continue in the program after their initial three-year commitment must also demonstrate that they:

- Still have unpaid qualifying educational loans;
- Applied all previously received NHSC S2S LRP payments, during the contract period, to reduce their qualifying educational loans;
- Continue to serve at an NHSC-approved site; and
- Meet all other program requirements in effect at the time they are being considered for a continuation contract.

ELIGIBILITY REQUIREMENTS AND SELECTION FACTORS

Eligibility Requirements

To be eligible for an NHSC S2S LRP award, an applicant **must**:

- (1) Be a U.S. citizen or U.S. National.
- (2) Be pursuing one of the following:
 - a. An M.D., or D.O. degree at one of the following accredited schools located in a state, the District of Columbia, or a U.S. territory:
 - A school of allopathic medicine accredited by the Liaison Committee on Medical Education (sponsored by the American Medical Association and the Association of American Medical Colleges);
 - A school of osteopathic medicine accredited by the American Osteopathic Association Commission on Osteopathic College or Accreditation; or
 - b. A D.D.S., or D.M.D. degree at one of the following accredited schools located in a state, the District of Columbia, or a U.S. territory:
 - A school of dentistry accredited by the American Dental Association Commission on Dental Accreditation.
 - c. A Nurse Practitioner (NP) degree:
 - At a school or program of nurse practitioner education, pursuing a postgraduate degree or post graduate certificate
 - Accredited by the Accreditation Commission for Education in Nursing or the Commission on Collegiate Nursing Education; and.
 - Leading to national certification as a nurse practitioner specializing in adult medicine, family medicine, geriatrics, primary care pediatrics, psychiatric-mental health, or women’s health by the American Nurses Credentialing Center, the American Academy of Nurse Practitioners, or the Pediatric Nursing Certification Board.
 - d. A Certified Nurse Midwife (CNM) degree:
 - At a school or program of nurse-midwifery education, pursuing a postgraduate degree or postgraduate certificate;
 - Accredited by the American College of Nurse-Midwives, Division of Accreditation; and
 - Leading to national certification by the American Midwifery Certification Board.
 - e. A Certified Physician Assistant (PA) degree:

- At a school or program of primary care physician assistant education, pursuing a postgraduate degree or postgraduate certificate;
 - Accredited by the Accreditation Review Commission on Education for the Physician Assistant AND the affiliated school must be accredited by a U.S. Department of Education nationally recognized regional or state institutional accrediting agency; and
 - Leading to national certification by the National Commission on Certification of Physician Assistants.
- (3) Be enrolled as a full-time student in the last year of medical or dental school with a graduation date before July 1, 2022 or be enrolled as a full-time student in the last year of a health professional school for nurse practitioners, certified nurse midwives, or physician assistants with a graduation date before August 31, 2022. A full-time student is defined as a student enrolled for a sufficient number of credit hours in any academic term to complete the course of study within the number of academic terms normally required at the school. Be advised that any courses that are not required or are unrelated to the qualifying degree program will not count towards the hours required for full-time status.
- (4) Be eligible for federal employment. Most NHSC S2S LRP participants should expect to serve their commitments as salaried, non-federal employees of a public or private entity approved by the NHSC. However, there may be vacancies that require federal employment, including a security clearance. In light of the potential for federal employment, an applicant must be eligible to hold an appointment as a Commissioned Officer of the Public Health Service or as a federal civil servant. For more information, visit [Commissioned Corps of the U.S. Public Health Service](#).
- (5) **Submit a complete application**, as set forth in the “[Completing an Application](#)” section of this Guidance. Completed applications must be received on or before **Thursday, November 4, 2021 at 7:30 p.m. ET**.

Eligible Disciplines and Specialties

Full-time students in the last year of medical, dental, physician assistant, or nursing school who plan to train and become licensed to provide patient care under the following disciplines and specialties are eligible to apply to the NHSC S2S LRP:

Disciplines	Specialties
Physicians <ul style="list-style-type: none"> • Allopathic (MD) • Osteopathic (DO) 	<ul style="list-style-type: none"> • Family Medicine • General Internal Medicine • General Pediatrics • Geriatrics • Obstetrics/Gynecology • Psychiatry (including Child and Adolescent Psychiatrists; Substance Use Disorder Psychiatrists)

Disciplines	Specialties
Dentists <ul style="list-style-type: none"> • DDS • DMD 	<ul style="list-style-type: none"> • General Dentistry • Pediatric Dentistry
Nurse Practitioners (NPs) Physician Assistants (PAs)	<ul style="list-style-type: none"> • Adult • Family • Pediatric • Women’s Health • Geriatrics • Psychiatry & Mental Health
Certified Nurse-Midwives (CNMs)	<ul style="list-style-type: none"> • N/A

Requirements for Medical Students Only:

Medical students are **required** to complete accredited primary medical care postgraduate training in an NHSC-approved specialty (e.g., family practice, internal medicine, pediatrics, geriatrics, obstetrics/gynecology, or psychiatry) for at least three years before commencing service. See the [“Program Requirements While in Postgraduate Training”](#) section for the approved postgraduate training programs and associated time period.

Recommendations for Dental Students Only:

Dental students are **highly encouraged**, but not required, to complete **one** of the postgraduate clinical training programs approved by the NHSC prior to starting their service obligation; see the [“Program Requirements While in Postgraduate Training”](#) section for approved postgraduate training programs and associated time period. Dental students who start the service obligation before doing a postgraduate training program will not be eligible for postgraduate training deferment during the service obligation.

Recommendations for Nurse Practitioners and Certified Nurse Midwives Only:

Students are **highly encouraged**, but not required, to complete a postgraduate clinical training program approved by the NHSC prior to starting their service obligation; see the [“Program Requirements While in Postgraduate Training”](#) section. Nursing students who start the service obligation before doing a postgraduate training program will not be eligible for postgraduate training deferment during the service obligation.

Recommendations for Physician Assistant Students Only:

Students are **highly encouraged**, but not required, to complete a postgraduate clinical training program approved by the NHSC prior to starting their service obligation; see the [“Program Requirements While in Postgraduate Training”](#) section. Physician assistant students who start the service obligation before doing a postgraduate training program will not be eligible for postgraduate training deferment during the service obligation.

Selection Factors and Funding Priorities

The NHSC utilizes the selection factors and funding priorities detailed below while reviewing eligible NHSC S2S LRP applications to determine who will be offered an award.

Selection Factors

Applicants who meet the eligibility criteria outlined above must also demonstrate that they:

- (1) **Have passed the first component of required licensing examinations.**
 - a. Medical students will be required to submit documentation verifying that they have passed Step 1/Level 1 of the United States Medical Licensing Examination (USMLE) or the Comprehensive Osteopathic Medical Licensing Examination (COMLEX).
 - b. Dental students will be required to submit documentation verifying that they have passed Part I of the National Board Dental Examination.
 - c. Nurse practitioners, certified nurse midwives, and physician assistants who meet the [education, training, and licensure requirements](#) may serve at an NHSC-approved service site, and provide specialized services, if they have completed discipline-specific advanced training and received a certification. Documentation of appropriate specialized training and certification is required when completing the online application, and will be reviewed by the NHSC to determine whether the training or certification qualifies.
- (2) **Have a history of honoring prior legal obligations.** The NHSC will review credit bureau reports to verify that applicants have a history of honoring prior legal obligations. Applicants are encouraged to unlock any frozen credit reports. NHSC S2S LRP applicants who do not have a history of honoring prior legal obligations, as evidenced by one or more of the following factors, will not be selected:
 - a. Default on any federal payment obligations, e.g., Department of Education student loans, Health Education Assistance Loans, Nursing Student Loans, Federal Housing Administration (FHA) Loans, federal income tax liabilities, federally-guaranteed/insured loans (e.g., student or home mortgage loans) or any non-federal payment obligations (e.g., court-ordered child support payments or state tax liabilities), even if the applicant is currently considered to be in good standing by that creditor.
 - b. Write off of any federal or non-federal debt as uncollectible or waiver of any federal service or payment obligation.
 - c. Default on a prior service obligation, e.g., applicants who have defaulted on a prior service obligation to the federal government, a state or local government, or other entity, even if the applicant subsequently satisfied that obligation through service, monetary payment or other means.
 - d. Any judgment liens arising from federal debt.
- (3) **Are not in breach of any service obligation.** Applicants who are in breach of a health professional service obligation to a federal, state, or other entity will not be selected to participate in the NHSC S2S LRP.

- (4) **Do not have an existing service obligation and will not incur a service obligation that would be performed concurrently or overlap with their NHSC S2S LRP service obligation.** Applicants who are already obligated to a federal, state, or other entity for professional practice or service (e.g., active military duty, the NHSC Scholarship Program, the Nurse Corps Scholarship Program) will not be selected for an award unless that obligation will be completely satisfied prior to commencement of the NHSC S2S LRP service (see [“Start of Service Commitment”](#) section). Further, participants who subsequently enter into other service commitments (e.g., State Loan Repayment Program) and are not immediately available after completion of their approved postgraduate training to fulfill their NHSC service commitment will be subject to the breach of contract provision (see [“Breaching the NHSC S2S LRP Contract”](#) section). An exception exists for individuals of a Reserve component of the Armed Forces (including the National Guard), as described below.

EXCEPTION: Individuals in a Reserve component of the Armed Forces, including the National Guard, are **eligible** to participate in the NHSC S2S LRP. Reservists should understand the following:

- Military training or service performed by reservists will not satisfy the NHSC S2S LRP service commitment. If a participant’s military training and/or service, in combination with the participant’s other absences from their NHSC-approved site, will exceed seven weeks per service year, the participant should request a suspension. The NHSC S2S LRP service commitment end date will be extended to compensate for the break in NHSC service.
 - If the reservist is deployed, they are expected to return to the NHSC-approved site where they were serving prior to deployment. If unable to do so, the reservist must request a transfer to another NHSC-approved site. If the reservist fails to seek a transfer and subsequently refuses to accept an NHSC assignment to another approved site, they will be placed in default of their service obligation.
- (5) **Are not currently excluded, debarred, suspended, or disqualified by a federal agency.** Applicants are required to report certain information, which is described in the “Certification Regarding Debarment, Suspension, Disqualification and Related Matters” located in the online application. The applicant should sign the certification that is applicable to their situation. As a condition of participating in the NHSC S2S LRP, a participant must agree to provide immediate written notice to the NHSC S2S LRP if the participant learns that they failed to make a required disclosure or that a disclosure is now required due to changed circumstances. BHW will verify each participant’s status through the U.S. Treasury Department’s [Do Not Pay tool](#).
- (6) **Are committed to providing primary care service in a HPSA.** The NHSC S2S LRP seeks to recruit clinicians with a strong commitment to providing primary care in communities most in need of these services. Applicants will be evaluated based on their degree of commitment to a career in primary care and interest/motivation in providing care to underserved communities based on a review of the following:
- a. **Essay Question.** Applicants must respond to the essay question. The essay response is limited to 500-words or less and should include a description of relevant work

experiences and/or activities (e.g., community service, research, and internships) that have prepared the applicant to work with underserved populations.

- b. **Recommendation Letters.** Applicants must provide two (2) letters of recommendation that provide a detailed description of the applicant's performance in school; education/work achievements; community/civic or other non-academic achievements; ability to work and communicate constructively with others from diverse backgrounds; and interest and commitment to a career in primary care and service to underserved populations and communities.
- c. **Resume/CV.** Applicants must submit a resume with relevant work experience; academic/professional achievements; and community/civic or other non-academic achievements.
- d. **Transcript.** Applicants must submit a transcript with information for at least the two most recent terms on the courses taken and rotations completed, as well as academic performance.

Funding Priorities

Based on statutory requirements (42 U.S.C. 254l-1(d)(2)), priority will be given to qualified applicants who demonstrate the following:

- (1) **Likelihood of Remaining in a HPSA and Disadvantaged Background** (see the "[Definitions](#)" section). The NHSC S2S LRP will give priority to applicants who have (and whose spouse, if any, has) characteristics that indicate a higher likelihood of continuing to practice in a HPSA once the service commitment is completed **and** who come from a disadvantaged background. Applicants must submit certification from their school that they were identified as having a "disadvantaged background" based on environmental and/or economic factors.
- (2) **Likelihood of Remaining in a HPSA.** The NHSC S2S LRP will next give priority to applicants who have (and whose spouse, if any, has) characteristics that indicate a higher likelihood of continuing to practice in a HPSA once the service commitment is completed. Generally, the program will assess the applicant's experience in working with underserved populations, which can be demonstrated through past work and volunteer experiences, as well as an applicant's background. The NHSC will base its assessment on an applicant's responses to the essay question, and information gathered in the recommendation letters and resume/CV.

Qualifying and Non-Qualifying Educational Loans

An NHSC S2S LRP participant will receive loan repayment funding to be applied to the principal, interest, and related expenses of outstanding government (federal, state, or local) and commercial (i.e., private) student loans for undergraduate or graduate education obtained by the participant for school tuition, other reasonable educational expenses, and reasonable living expenses. The educational loans must be obtained prior to the date the participant submits their online application to the NHSC S2S LRP.

(1) **Consolidated/Refinanced Loans** may be considered for repayment in the following circumstances:

- a. A consolidated/refinanced loan must be from a government (federal, state, or local) or commercial lender and must include only qualifying educational loans of the applicant.
- b. If an otherwise eligible educational loan is consolidated/refinanced with ineligible (non-qualifying) debt of the applicant, **no** portion of the consolidated/refinanced loan will be eligible for loan repayment.
- c. For loans to remain eligible, applicants/participants must keep their eligible educational loans apart from all other debts.
- d. Eligible educational loans consolidated with loans owed by any other person, such as a spouse or child, are ineligible for repayment.

(2) **Non-Qualifying Educational Loans**

- a. Loans for which the associated documentation does not identify the loan was solely applicable to the undergraduate or graduate education of the applicants.
- b. Loans not obtained from a government entity or private commercial student lending institution. Most loans made by private foundations to individuals are not eligible for repayment.
- c. Loans that have been repaid in full.
- d. [Primary Care Loans](#)
- e. Parent PLUS Loans (made to parents).
- f. Personal lines of credit.
- g. Loans subject to cancellation.
- h. Residency loans.
- i. Credit card debt.

Award Process

Once an applicant has been selected for an award, the applicant will be provided with information for logging into the [BHW Customer Service Portal](#). This web-based system will allow them to communicate with the NHSC and to manage customer service-related inquiries, such as contact information changes.

Applicants selected as finalists will receive a Confirmation of Interest email with instructions to sign and return the NHSC S2S LRP contract and provide banking information to facilitate the electronic transfer of the award funds (assuming that the contract is approved by a representative of the Secretary of HHS).

An applicant's signature alone on the NHSC S2S LRP contract document does not constitute a contractual agreement. The NHSC S2S LRP contract becomes effective on the date it is countersigned by the Secretary of HHS or their designee, which is anticipated to be on or before

April 15, 2022. Awards are made at the government's discretion and are subject to the availability of appropriated funds

An applicant may withdraw their application any time **before** a contract is countersigned by the Secretary or their designee. After a contract has taken effect, the Secretary or their designee may terminate the contract only under certain circumstances (see "[Contract Termination](#)" section).

PROGRAM REQUIREMENTS DURING THE LAST YEAR OF SCHOOL

Medical Students

While in school, an NHSC S2S LRP participant pursuing an M.D. or a D.O. degree must meet the following requirements and provide documentation to the NHSC no later than **May 1, 2022**:

- (1) **Maintain enrollment in and graduate from medical school.** The awardee must:
 - a. Maintain full-time enrollment and remain in good academic standing through their graduation from medical school;
 - b. Provide verification that the last day of classes will be no later than May 31, 2022; and
 - c. Graduate before July 1, 2022. Awardees must submit a letter from an appropriate school official on official letterhead confirming that the student is expected to graduate prior to July 1, 2022. An awardee should notify the NHSC S2S LRP if they experience any changes in enrollment status that would result in the student not graduating before July 1, 2022. Participants who do not graduate by July 1, 2022 will be advised to request that the Secretary of HHS terminate their contracts if the period for termination has not yet expired.
- (2) **Pass Step 2/Level 2 of the Licensing Examination.** An awardee must take and provide documentation from the testing organization showing proof that they have passed:
 - a. Step 2 (both the clinical skills and clinical knowledge components) of the USMLE; OR
 - b. Level 2 (both the cognitive evaluation and performance evaluation components) of the COMLEX.
- (3) **Letter of Acceptance to an NHSC-approved Primary Care Postgraduate Program.** NHSC S2S LRP participants pursuing M.D. or D.O. degrees are required to complete primary care postgraduate training prior to commencing their service obligation. Awardees must submit a letter of acceptance to an approved primary care postgraduate training program (see the "[Program Requirements While in Postgraduate Training](#)" section), which must:
 - a. Be on official letterhead;
 - b. Be signed by the postgraduate training program director; and
 - c. Include the start and anticipated end dates of the postgraduate training in mm/dd/yyyy format. Participants are expected to commence postgraduate training directly after graduation from medical school.

Dental Students

While in school, an NHSC S2S LRP participant pursuing a D.D.S. or D.M.D. degree must meet the following requirements and provide documentation to the NHSC no later than **May 1, 2022**:

- (1) **Maintain enrollment in and graduate from dental school.** The awardee must:
 - a. Maintain full-time enrollment and remain in good academic standing through their graduation from dental school;
 - b. Provide verification that the last day of classes will be no later than May 31, 2022; and
 - c. Graduate before July 1, 2022. Awardees must submit a letter from an appropriate school official on official letterhead indicating that the student is expected to graduate prior to July 1, 2022. An awardee should notify the NHSC S2S LRP if they experience any changes in enrollment status that would result in the student not graduating before July 1, 2022. Participants who do not graduate by July 1, 2022, will be advised to request that the Secretary of HHS terminate their contracts if the period for termination has not yet expired.
- (2) **Pass the National Board Dental Examination Part II.** Awardees must take and provide an official document from the testing organization showing proof that they have passed Part II of the National Board Dental Examination.
- (3) **If applicable, Letter of Acceptance to an NHSC-approved Dental Postgraduate Program.** S2S LRP participants pursuing D.D.S. or D.M.D. degrees may, but are not required to, pursue approved postgraduate training in general practice dentistry, advanced education in general dentistry, pediatric dentistry, public health dentistry, or geriatric dentistry. NHSC will **not** approve any other postgraduate training programs. If an awardee intends to delay the commencement of service for approved postgraduate training, they must submit a letter of acceptance to an approved primary care postgraduate training program, which must:
 - a. Be on official letterhead;
 - b. Be signed by the postgraduate training program director; and
 - c. Include the start and anticipated end dates of the postgraduate training in mm/dd/yyyy format. Dental students who intend to do a postgraduate training are expected to commence postgraduate training directly after graduation from dental school. Dental students who do not pursue approved postgraduate training will be expected to begin their NHSC service obligation no later than 6 months after graduation. They will be offered site search assistance by the Division of Regional Operations (DRO).

Nurse Practitioners and Certified Nurse-Midwives

While in school, an NHSC S2S LRP participant pursuing an NP or a CNM degree must meet the following requirements and provide documentation to the NHSC no later than **May 1, 2022**:

- (1) **Maintain enrollment in and graduate from nursing school.** The awardee must:
 - a. Maintain full-time enrollment and remain in good academic standing through their graduation from nursing school;

- b. Provide verification that the last day of classes will be no later than August, 30, 2022; and
- c. Graduate before August 31, 2022. Awardees must submit a letter from an appropriate school official on official letterhead indicating that the student is expected to graduate prior to August 31, 2022. An awardee should notify the NHSC S2S LRP if they experience any changes in enrollment status that would result in the student not graduating on or before August 31, 2022. Participants who do not graduate by August 31, 2022, will be advised to request that the Secretary of HHS terminate their contracts if the period for termination has not yet expired.

(2) ***If applicable, Letter of Acceptance to an NHSC-approved Nursing Postgraduate Program.*** S2S LRP participants pursuing advanced nursing degrees may, but are not required to, pursue [approved postgraduate training](#). If an awardee intends to delay the commencement of service for approved postgraduate training, they must submit a letter of acceptance to an approved primary care postgraduate training program, which must:

- a. Be on official letterhead;
- b. Be signed by the postgraduate training program director; and
- c. Include the start and anticipated end dates of the postgraduate training in mm/dd/yyyy format. Nursing students who intend to do a postgraduate training are expected to commence postgraduate training directly after graduation from nursing school. Nursing students who do not pursue approved postgraduate training will be expected to begin their NHSC service obligation no later than 6 months after graduation; they will be offered site search assistance by BHW's Division of Regional Operations (DRO).

Physician Assistant Students

While in school, an NHSC S2S LRP participant pursuing a PA degree must meet the following requirements and provide documentation to the NHSC no later than

May 1, 2022:

- (1) **Maintain enrollment in and graduate from a physician assistant school.** The awardee must:
 - a. Maintain full-time enrollment and remain in good academic standing through their graduation from physician assistant school;
 - b. Provide verification that the last day of classes will be no later than August, 30, 2022; and
 - c. Graduate before August 31, 2022. Awardees must submit a letter from an appropriate school official on official letterhead indicating that the student is expected to graduate prior to August 31, 2022. An awardee should notify the NHSC S2S LRP if they experience any changes in enrollment status that would result in the student not graduating on or before August 31, 2022. Participants who do not

graduate by August 31, 2022, will be advised to request that the Secretary of HHS terminate their contracts if the period for termination has not yet expired.

- (2) ***If applicable, Letter of Acceptance to an NHSC-approved Physician Assistant Program:*** S2S LRP participants pursuing PA degrees may, but are not required to, pursue approved postgraduate training in physician assistant advanced education. If an awardee intends to delay the commencement of service for approved postgraduate training, they must submit a letter of acceptance to an approved primary care postgraduate training program, which must:
- a. Be on official letterhead;
 - b. Be signed by the postgraduate training program director; and
 - c. Include the start and anticipated end dates of the postgraduate training in mm/dd/yyyy format. Physician Assistant students who intend to do a postgraduate training are expected to commence postgraduate training directly after graduation from physician assistant school. Physician assistant students who do not pursue approved postgraduate training will be expected to begin their NHSC service obligation no later than 6 months after graduation; they will be offered site search assistance by BHW's DRO.

Submitting the Required Documents

Medical, dental, physician assistant, and nursing students must submit the applicable documentation referenced above by **May 1, 2022**, by uploading it through the [BHW Customer Service Portal](#). Participants who are unable to submit the applicable documentation by May 1, 2022, will be advised to request that the Secretary of HHS terminate their contracts if the period for termination has not yet expired, see the "[Contract Termination](#)" section. If the participant does not meet the conditions for contract termination, they are required to fulfill the terms and conditions in the contract and the program will withhold payment of the S2S award funds until the above documentation requirements are met.

Contract Termination

The Secretary may terminate an NHSC S2S LRP contract if, within 60 days following the execution of the contract (i.e., signature of both parties), the participant:

- (1) Submits a signed written request to terminate the contract; and
- (2) Repays all S2S funds paid to, or on behalf of, the participant under that contract
- (3) Or, at any time if the individual who has been awarded such contract has not received funds due under the contract.

The check should be made payable to the "DHHS Collections Officer." A written request to terminate the contract can be submitted through the [BHW Customer Service Portal](#).

Please note the check must be submitted by mail to:

NHSC S2S LRP
Contract Termination
5600 Fishers Lane, Room 14N29
Rockville, Maryland 20857

The Secretary of HHS cannot grant a participant's request to terminate their FY 2022 NHSC S2S LRP contract after the 60-day timeframe regardless of whether the participant is completing an approved postgraduate training program. **Requests to terminate the contract more than 60 days after its execution will not be considered.** Participants who do not meet the conditions for contract termination in a timely manner will be expected to perform their service obligations under the contract. Failure to fulfill the terms of the contract may be considered a breach of contract (see the "[Breaching the NHSC S2S LRP Contract](#)" section).

PROGRAM REQUIREMENTS WHILE IN POSTGRADUATE TRAINING

Postgraduate Training Eligibility

To defer the service commitment for completion of postgraduate training, a participant must:

- (1) Pursue a medical, dental, physician assistant, or nursing specialty that is approved under the NHSC S2S LRP;
- (2) Not incur a conflicting service commitment;
- (3) Complete and return the electronic Postgraduate Training Verification (PGTV) by **May 1** of each year;
- (4) Make no change to the type or period of training without prior written approval of the NHSC S2S LRP;
- (5) Notify the NHSC S2S LRP of any changes to personal information (e.g., name, address, phone, or email) or financial information for deposit of S2S LRP funds, through the [BHW Customer Service Portal](#); and
- (6) Notify the NHSC S2S LRP immediately of any changes that affect training status (e.g., maternity or paternity leave of absence or other delay in completion date, transfer to another postgraduate training program, dropping out or being terminated from the postgraduate training program).

Note: Time spent in postgraduate training, even if at an NHSC-approved site, will not count toward a participant's service commitment.

Medical Students: Medical students are **required** to complete accredited primary medical care postgraduate training in an NHSC-approved specialty (e.g., family practice, internal medicine, pediatrics, obstetrics/gynecology, or psychiatry) for at least three years before commencing service. The approved postgraduate training programs and associated time periods are:

Approved Postgraduate Training for Medical Students	Time Period
Family Practice	3-4 years
General Internal Medicine	3 years

Approved Postgraduate Training for Medical Students	Time Period
General Pediatrics	3 years
General Psychiatry	4 years
Obstetrics-Gynecology	4 years
Internal Medicine/Family Practice	4 years
Internal Medicine/Pediatrics	4 years
Family Medicine/Psychiatry	5 years
Internal Medicine/Psychiatry	5 years

The NHSC S2S LRP may approve, on a case-by-case basis, and consistent with the needs of the NHSC, requests by physician participants in their last year of postgraduate training for a 1-year chief residency or fellowship. The following fellowships are currently approved by the NHSC:

- A two-year child psychiatry fellowship following the completion of postgraduate training in general psychiatry;
- A one to two-year addiction medicine or substance use disorder fellowship following the completion of postgraduate training in one of the following three areas: Family Practice, General Internal Medicine, or a dual residency in Internal Medicine/Family Practice;
- A one-year obstetrics/gynecology fellowship following the completion of postgraduate training in family practice; and
- A one-year geriatrics fellowship following the completion of postgraduate training in one of the following three areas: Family Practice, General Internal Medicine, or a dual residency in Internal Medicine/Family Practice.

The total period of deferment for postgraduate training is limited to five years, including a chief residency and/or fellowship program that is **not** a two-year fellowship such as child psychiatry and/or addiction medicine as indicated above.

Participants in the final year of an approved residency program who intend to pursue additional advanced training in one of the above-listed fellowships or a chief residency must submit a request for additional deferment of the service obligation by February 1 of the final year of the residency program. Participants who wish to pursue a type of training not listed above **must** submit a request to the NHSC for approval before starting the fellowship.

Annual verification of participation in an NHSC-approved postgraduate training program will be required before any installments for loan repayment are disbursed. See [“Requirements for Receiving Loan Repayments during Postgraduate Training”](#) section.

Dental Students: Dental students are **highly encouraged**, but not required, to complete **one** of the following postgraduate clinical training programs approved by the NHSC prior to starting their service obligation. Dental students who start the service obligation before doing a postgraduate

training program will not be eligible for postgraduate training deferment during the service obligation.

Approved Postgraduate Training for Dental Students	Time Period
General Practice Dentistry	1 year
Advanced Education in General Dentistry	1 year
Pediatric Dentistry	2 years
Public Health Dentistry	2 years
Geriatrics Dentistry Fellowship	2 years

The total period of deferment for postgraduate training is limited to **two** years, including a chief residency and/or fellowship program.

The NHSC will not approve any other postgraduate training programs for dental students. Dental students who wish to pursue training other than the postgraduate training programs listed above are advised not to apply for participation in the NHSC S2S LRP.

Annual verification of participation in an NHSC-approved postgraduate training program will be required before any installments for loan repayment are disbursed. See [“Program Requirements During the Last Year of Medical School, Dental School, Physician Assistant, and Nurse Practitioners for primary care or behavioral health practice”](#).

Physician Assistants, Nurse Practitioners, and Certified Nurse Midwives: PAs, NPs, and CNMs are **highly encouraged**, but are not required to pursue postgraduate training. For those physician assistants, nurse practitioners, and certified nurse midwives who are entering postgraduate training in 2022-2023, the NHSC approves a one-year training in a [community-based care setting](#) only.

Annual verification of participation in an NHSC-approved postgraduate training program will be required before any installments for loan repayment are disbursed.

Requirements for Receiving Annual Loan Repayment Installments When Pursuing Postgraduate Training

The NHSC S2S LRP will continue to issue annual loan repayment installments during a participant’s period of NHSC-approved postgraduate training as long as the following conditions are met:

- (1) The participant continues to pursue their postgraduate training (including residency, chief residency, or fellowship) in an NHSC-approved specialty (evidenced by timely submission of the PGTV no later than **May 1** of each year);
- (2) The participant has submitted their most recent loan account statement, no later than **May 1** of each year, to show that all loan repayment funds provided in the previous year were put towards reducing the balance of the participant’s qualifying educational loan debt. Loans approved for payment will be listed on the Payment Authorization Worksheet (PAW). The payment history must be an official document from the lender that includes:

- a. the lender's name;
 - b. account holder's name (NHSC S2S LRP participant);
 - c. account number;
 - d. payment date; and
 - e. payment amount.
- (3) Note that cancelled checks and bank statements will not be accepted as proof that award payments were properly applied to the qualifying loans. Payment histories may take 30 or more days to obtain from lenders; therefore, to ensure this is received prior to the May 1, 2022, deadline, participants should request payment histories from their lender(s) well in advance. To expedite the process, many lenders make payment histories available online.
- (4) Consolidated Loans
- a. For loans consolidated during the current contract period, loan documents, including the lending institution's list of the loans included in the consolidation and their original disbursement dates, are required.
 - b. If a participant has consolidated their loans and the NHSC does not receive an itemized loan list, the participant will not be given credit for payments made toward those loans.
 - c. If the participant consolidated their qualifying educational loans with non-qualifying debt, the NHSC cannot give credit for payments made toward the consolidated loans.
- (5) ***For M.D. and D.O. participants only.*** In addition to the above requirements, physician participants must provide documentation of a passing score for Step 3/Level 3 of the USMLE or COMLEX prior to the completion of their second year of postgraduate training. Documentation of passing scores must be submitted with the PGTV no later than May 1, 2022.

If all of the applicable conditions above are met and the required documentation is submitted annually by the established deadlines, annual installments will be disbursed on or about the first week of August each year.

If the conditions are not met or documentation is not submitted in a timely manner, the NHSC S2S LRP will suspend that year's annual installment (and any subsequent annual installments) until such documentation is received by the NHSC.

All program participants are required to provide a postgraduate training verification (PGTV) and loan repayment verification no later than May 1 of each year; if the S2S LRP service obligation is deferred. Additional documentation is required by discipline:

Medical Students:

Final year of school:

- Proof of Expected Graduation by July 1, 2022
- Step 2/Level 2 USMLE/COMLEX Scores
- Acceptance Letter from Program Director

Second Year of Training:

- Step 3/Level 3 USMLE/COMLEX Scores

Dental Students:

Final year of school:

- Proof of Expected Graduation by July 1, 2022
- Part II NBDE Scores
- PGTV & Acceptance Letter from Program Director (if applicable)

Nursing Students:

Final year of school:

- Proof of Expected Graduation by August 31, 2022
- PGTV & Acceptance Letter from Program Director (if applicable)

Physician Assistant Students:

Final year of school:

- Proof of Expected Graduation by August 31, 2022
- PGTV & Acceptance Letter from Program Director (if applicable)

Requirements for Receiving Annual Loan Repayment Installment When Not Pursuing Postgraduate Training

Dental, physician assistant, and nursing participants who do not pursue postgraduate training and other participants who have not received all of their loan repayment installments prior to beginning service will receive the remaining annual installments once they meet the following requirements:

- (1) Submit an Employment Verification form confirming that they have commenced their service obligation at an NHSC-approved site;
- (2) Provide proof of licensure; and
- (3) Continue to remain in compliance with the terms of their S2S LRP contract and all NHSC policies, including the timely submission of In-Service Verifications (see "[Service Verifications](#)" section) and providing proof that all loan repayment funds provided in the previous year(s) were applied to reduce the balance of the participant's qualifying educational loan debt.

SERVICE OBLIGATION

Participants are obligated to complete three years of full-time clinical practice at one or more NHSC-approved sites determined by the NHSC to be serving a HPSA of greatest need (i.e., high HPSA score). For S2S LRP participants commencing service in FY 2022, sites in or serving HPSAs with scores of 14 or above are determined to be of high-need.

"Full-time clinical practice" is broadly defined as no less than 40 hours per week, for a minimum of 45 weeks per service year. More specific requirements may apply, depending on the participant's discipline/specialty. Participants are subject to the service requirements in effect at the time they are scheduled to begin service.

At the participant's request and with written concurrence of the NHSC-approved site, the Secretary of HHS may subsequently allow the participant to convert to half-time service for double the period of the full-time service obligation, by entering into an addendum to their contract.

The NHSC reserves the right to make final decisions on all site assignments. There is no guarantee that currently approved sites will remain NHSC-approved until the time participants are available to serve. Participants who fail to obtain a position in an NHSC-approved site within six months following (a) graduation from dental school (for dental students who are not pursuing postgraduate training), or (b) the completion of approved postgraduate training, will be assigned to a site identified by the NHSC based on the needs of the NHSC.

Note: Participants who, for any reason, fail to begin or complete their service commitment at their assigned service location are in breach of the NHSC S2S LRP contract and incur the damages described in the "[Breaching the NHSC S2S LRP Contract](#)" section.

Finding an NHSC-Approved Site

All awardees of NHSC S2S LRP are required to fulfill their service commitment at NHSC-approved sites (see "[Definitions](#)" section) in HPSAs with a "Designated" status and a minimum score established for the year in which service is to commence (e.g., currently 14 or above).

NHSC uses the [Health Workforce Connector](#) to support our members in finding an NHSC Approved Site. [The Health Workforce Connector](#) can:

- Show job vacancies at thousands of NHSC-approved sites nationwide;
- Use Google Maps technology to allow users to view the surrounding community (e.g., schools, restaurants, parks, places of worship, shops);
- Help narrow the job search by: field of practice, specialty, HPSA score, site name, zip code, or sites with open positions; and
- Be used on mobile platforms.

Participants must serve at NHSC-approved sites located in a designated HPSA that corresponds with the participant's discipline (i.e., dentists must serve in dental HPSAs, primary care physicians must serve in primary care HPSAs, psychiatric specialties must serve in mental health HPSAs, etc.). Generally, [NHSC-approved sites](#) are health care facilities that provide primary health services to populations residing in urban or rural HPSAs. Examples include:

- Federally Qualified Health Centers (FQHCs)
- Rural Health Clinics (RHCs)
- Federal Indian Health Service (IHS) Clinics

- Tribal, or Urban Indian Health (ITU) Clinics
- Certain Indian and Tribal Hospitals
- Solo or group private practices
- Public Health Departments
- Hospital-affiliated outpatient primary care practices
- Critical Access Hospitals (CAHs)

Participants who are providing services in a private practice (either solo or group) will only be allowed to fulfill their NHSC service obligations if it can be demonstrated that the practice is formally affiliated with a comprehensive community-based facility. See “[Definitions](#)” section for “*Comprehensive Community-Based Behavioral and Mental Health Setting or Facility*”.

Psychiatrists are required to practice in a community-based setting that provides access to comprehensive mental and behavioral health services.

Note: The following are **not** eligible sites, even if they are located within a HPSA: inpatient hospitals (except for CAHs and IHS hospitals), other inpatient facilities (such as military hospitals and Veterans Health Administration Medical Centers), and county/local prisons.

All participants will receive resources and invitations to virtual events that include information on fulfilling their service commitment and the opportunity to learn about sites with eligible vacancies for NHSC S2S LRP participants. NHSC offers online recruitment events such as [Virtual Job Fairs](#).

This effort accommodates the transition to service by:

- Connecting clinicians and students with health care organizations;
- Using interactive webinars to ask real-time questions to site administrators; and
- Giving access to presentations highlighting the NHSC site, local community, population served, positions available, salary, and benefits.

The NHSC S2S LRP by default allows only one S2S LRP participant per discipline to serve at a given site within a yearly placement cycle. However, the NHSC will consider requests from an NHSC-approved site for up to one additional S2S LRP participant per placement cycle on a case-by-case basis. S2S LRP participants do not count against the number of NHSC scholars allowed at any given site.

Start of Service Commitment

Participants are expected to begin service within six months following completion of their postgraduate training program, including fellowship (generally within six months of June 30). Dental, physician assistant, and nursing participants who do not pursue a postgraduate training are expected to begin service within six months following the completion of their health profession degree program. Credit for service toward the NHSC S2S LRP commitment does not begin until the participant does all of the following:

- (1) Successfully completes an NHSC-approved primary care postgraduate training program (applicable only to M.D. and D.O. participants);

- (2) Obtains a full, permanent, unencumbered, unrestricted health professions license to practice in the state where and NHSC approved site is located, except those participants serving as (i) federal employees; (ii) federal contractors; or (iii) employees of a tribal health program (see “[Definitions](#)” section) performing services described in the tribal contract/compact can be licensed in any state; and
- (3) Begins full-time or half-time clinical practice (as applicable) at the NHSC-approved site.

Delaying the Start of Service

If a participant is unable to start their service within six months following completion of an approved postgraduate training program or degree program, they must request a suspension of the start of the service obligation and document the circumstances underlying the suspension request. If the documentation shows that the participant meets the criteria for a suspension, the NHSC may grant a suspension for up to one year. Requests must be submitted in writing through the [BHW Customer Service Portal](#) and must include a detailed explanation and supporting documentation. Participants unable to pass all parts of the licensing examinations and obtain a license by the time the service is scheduled to begin should immediately contact the NHSC S2S LRP through the [BHW Customer Service Portal](#) to request a suspension (See “[Suspensions and Waivers](#)” section).

End of Service Commitment

The last day of the service commitment is determined in whole years from the start date. For example, the last day of service for a participant with a three-year full-time service commitment that begins on July 15, 2022, would be July 14, 2025. Adjustments in the end date will be made by the NHSC if a participant is away from the NHSC-approved site for more than seven weeks (roughly 35 workdays) per service year (see “[Worksite Absences](#)” section).

Serving Half-Time Instead of Full-Time

When a participant signs the NHSC S2S LRP contract, they agree to serve full-time. However, at the discretion of the Secretary of HHS or their designee, a waiver may be granted to allow the participant to complete the service commitment through half-time service. The following conditions must be met to be considered for half-time service:

- (1) A participant’s NHSC-approved site agrees in writing that the participant may convert to half-time clinical practice (as defined by the NHSC);
- (2) A participant is a federal employee or a PPA practitioner (see “[Practice Types in the NHSC](#)” section). The half-time option is not authorized for PPO practitioners; and
- (3) A participant agrees in writing (by signing an amendment to the NHSC S2S LRP full-time contract) to complete the remaining service commitment through half-time clinical practice for twice as long as the full-time commitment.

The current half-time clinical practice policies are set forth in the “[Half-Time Clinical Practice Requirements, by Discipline](#)” section and are subject to change. Participants who receive waivers to serve half-time must fulfill the **remainder** of their service commitment serving half-time.

Participants will not be allowed to switch back to full-time service once they have been authorized for half-time service.

Requirements for Full-Time or Half-Time Clinical Practice

IMPORTANT: The discussion below of service requirements reflects the requirements in effect currently. For S2S LRP participants who will be engaged in approved postgraduate training and therefore not available for service for several years, note that NHSC service requirements established by statute, regulation, or policy could change and that participants will be subject to the rules in effect when they are due to begin service.

Upon completion of postgraduate training or nurse practitioner, certified nurse midwife, physician assistant, and dental degree programs, participants must engage in three years of full-time clinical practice at one or more NHSC-approved sites or, at the Secretary's discretion, may provide six years of half-time clinical practice at one or more NHSC-approved service sites.

- (1) **Full-Time Clinical Practice.** For the purposes of the NHSC, full-time clinical practice is defined as a minimum of 40 hours/week, for a minimum of 45 weeks each service year. The 40 hours/week may be compressed into no less than four days/week, with no more than 12 hours of work to be performed in any 24-hour period. Of the 40 hours/week, a minimum of 32 hours must be spent providing patient care. Participants do not receive service credit for hours worked over the required 40 hours/week and excess hours cannot be applied to any other work week. Also, time spent "on call" will not be counted towards the service commitment, except to the extent the provider is providing patient care during that period. Additional rules apply based on discipline and practice location. For these rules, see the "[Full-Time Clinical Practice Requirements, by Discipline](#)" section.
- (2) **Half-Time Clinical Practice.** For the purposes of the NHSC, half-time clinical practice is defined as 20-39 hours/week, for a minimum of 45 weeks each service year. The minimum 20 hours/week may be compressed into no less than two days/week, with no more than 12 hours of work to be performed in any 24-hour period. Of the minimum 20 hours/week, a minimum of 16 hours must be spent providing patient care. Participants do not receive service credit for hours worked over the required 20 hours/week and excess hours cannot be applied to any other work week. Also, time spent "on call" will not be counted towards the service commitment, except to the extent the provider is providing patient care during that period. Additional rules apply based on discipline and practice location. For these rules, see the "[Half-Time Clinical Practice Requirements, by Discipline](#)" section.

The following definitions apply to both full-time and half-time clinical practice:

Clinical-related administrative, management or other activities may include charting, care coordination activities, training, laboratory follow-up, patient correspondence, attending staff meetings, activities related to maintaining professional licensure, and other non-treatment related activities pertaining to the participant's approved NHSC practice. Managerial functions, including the managerial duties of a medical director, NHSC S2S LRP applicants serving in a

supervisory or managerial capacity should keep in mind that they cannot count more than eight hours per week of administrative and/or management time (four hours in the case of half-time participants) toward the total required 40 hours per week (or 20-39 hours in the case of half-time participants).

Teaching activities, to qualify as clinical practice, require NHSC S2S LRP participants to provide clinical education to students and residents in their area of expertise. Per statute, the NHSC allows teaching activities to be counted toward a participant's service obligation for up to 20 percent of the minimum time providing patient care. All teaching must be conducted as detailed below at the NHSC-approved site(s). The clinical education may:

- (1) Be conducted as part of an accredited clinical training program;
- (2) Include the clinical supervision of a student/resident that is required in order for that student/resident to receive a license under state law; or
- (3) Include mentoring through a structured program, such as the Centers of Excellence Program or the Health Careers Opportunity Program.

Clinical service provided by NHSC participants while a student/resident observes should be counted as patient care, not teaching, as the S2S LRP participant is treating the patient.

Full-Time Clinical Practice Requirements by Discipline

Note these rules apply to the "full-time clinical practice" definitions below:

- Of the overall minimum 40 hours/week, clinical-related administrative activities shall not exceed a total of eight hours/week. For more information, refer to "*Clinical-related Administrative, Management or Other Activities*" in the "[Definitions](#)" section.
- NHSC allows clinicians to receive service credit for teaching activities as set forth below. Of the minimum 32 hours/week for patient care, teaching shall not exceed a total of eight hours/week. If the teaching takes place in a HRSA-funded Teaching Health Center (see "[Definitions](#)" section), teaching activities shall not exceed 20 hours/week.

(1) Medical Providers

- a. **For providers of primary care services, including pediatricians and geriatricians:** Clinicians must work a minimum of 40 hours/week, for a minimum of 45 weeks/service year. At least 32 hours/week are spent providing patient care at the approved service site(s). Of the minimum 32 hours spent providing patient care, no more than eight hours per week may be spent in a teaching capacity. The remaining eight hours/week may be spent providing patient care for patients at the approved site(s), providing patient care in approved alternative settings (e.g., hospitals, nursing homes, shelters, and other community-based settings) as directed by the approved site(s), or performing clinical-related administrative activities (limited to eight hours/week).

If working in a HRSA-funded Teaching Health Center, teaching activities shall not exceed 20 hours/week. The remaining 20 hours/week must be spent providing patient care at the approved site(s), eight hours/week of which may be spent providing patient care in alternative settings (e.g., hospitals, nursing homes, shelters) or community-based setting as directed by the approved site(s), or performing clinical-related administrative activities. Clinical-related administrative time is limited to eight hours/week.

If working in an IHS Hospital or a CMS-approved CAH, at least 16 hours/week must be spent providing patient care in the IHS or CAH-affiliated outpatient clinic. Of the minimum 16 hours/week spent providing patient care, no more than eight hours/week may be spent in a teaching capacity. The remaining 24 hours/week may be spent providing patient care at the IHS Hospital or CAH or the IHS or CAH-affiliated outpatient clinic, providing patient care at the CAH-affiliated skilled nursing facility or swing bed unit, or performing clinical-related administrative activities. Clinical-related administrative time is limited to eight hours/week.

- b. **For providers of obstetrics/gynecology services, including family medicine physicians who practice obstetrics on a regular basis, certified nurse midwives, and physician assistants, or geriatric services:** Clinicians must work a minimum of 40 hours/week, for a minimum of 45 weeks/service year. At least 21 hours/week are spent providing patient care at the approved site(s). Of the minimum 21 hours spent providing patient care, no more than eight hours/week may be spent in a teaching capacity. The remaining 19 hours/week may be spent providing patient care at the approved site(s), providing patient care in alternative settings (e.g., hospitals, nursing homes, shelters and other community-based settings) as directed by the approved site(s), or performing clinical-related administrative activities (limited to eight hours/week).

If working in a HRSA-funded Teaching Health Center, teaching activities shall not exceed 20 hours/week. The remaining 20 hours must be spent providing patient care at the approved site(s), eight hours/week of which may be providing patient care in alternative settings (e.g., hospitals, nursing homes, shelters) as directed by the approved site(s), or performing clinical-related administrative activities (limited to eight hours/week).

If working in an IHS Hospital or CMS-approved CAH, at least 16 hours/week must be spent providing patient care in the IHS or CAH-affiliated outpatient clinic. Of the minimum 16 hours spent providing patient care, no more than eight hours/week may be spent in a teaching capacity. The remaining 24 hours/week are spent providing patient care at the IHS Hospital or CAH or the IHS or CAH-affiliated outpatient clinic, providing patient care at the CAH-affiliated skilled nursing facility or swing bed unit, or performing clinical-related administrative activities (limited to eight hours/week).

- c. **For providers of behavioral/mental health services, including nurse practitioners and physician assistants:** Clinicians must work a minimum of 40 hours/week, for a minimum of 45 weeks/service year. At least 20 hours/week are spent providing patient care at the approved service site(s). Of the minimum 20 hours spent providing patient care, no more than eight hours per week may be spent in a teaching capacity, performing clinical-related administrative activities, or in an alternative setting (e.g. hospitals, nursing homes, and shelters) as directed by the approved site(s). The remaining 20 hours/week may be spent providing patient care at the approved service site(s) or in schools or other community-based settings, when directed by the approved site(s).

If working in a HRSA-funded Teaching Health Center, teaching activities shall not exceed 20 hours/week. The remaining 20 hours/week must be spent providing patient care at the approved site(s), or in schools or other community-based settings, as directed by the approved site(s); only eight hours/week of which may be spent providing patient care in approved alternative settings (e.g., hospitals, nursing homes, and shelters) or performing clinical-related administrative activities (limited to eight hours/week).

If working in an IHS Hospital or a CMS-approved CAH, at least 16 hours/week must be spent providing patient care in the IHS or CAH-affiliated outpatient clinic. Of the minimum 16 hours/week spent providing patient care, no more than eight hours/week may be spent in a teaching capacity. The remaining 24 hours/week are spent providing patient care at the IHS Hospital or CAH or the IHS or CAH-affiliated outpatient clinic; providing patient care at the CAH-affiliated skilled nursing facility or swing bed unit; providing patient care for patients at the approved service site(s); providing patient care in schools or other community-based settings, as directed by the approved site(s) (limited to 20 hours/week); or performing clinical-related administrative activities (limited to eight hours/week).

(2) Dental providers

For general dentists, including pediatric dentists: Clinicians must work a minimum of 40 hours/week, for a minimum of 45 weeks/service year. At least 32 hours/week are spent providing patient care at the approved service site(s). Of the minimum 32 hours spent providing patient care, no more than eight hours per week may be spent in a teaching capacity. The remaining eight hours/week are spent providing patient care for patients at the approved site(s), providing patient care in alternative settings (e.g., hospitals and shelters, or approved community-based settings) as directed by the approved site(s), or performing clinical-related administrative activities (limited to eight hours/week).

If working in a HRSA-funded Teaching Health Center, teaching activities shall not exceed 20 hours/week. The remaining 20 hours must be spent providing patient care at the approved site(s), eight hours/week of which may be spent providing patient care in approved alternative settings (e.g., hospitals, and shelters, or community-based settings) as directed by the approved site(s), or performing clinical-related administrative activities (limited to eight hours/week).

Half-Time Clinical Practice Requirements, by Discipline

Note these rules apply to the “half-time clinical practice” definitions below:

- Of the overall minimum 20 hours/week, clinical-related administrative activities shall not exceed a total of four hours per week. For more information, refer to “Clinical-related Administrative, Management or Other Activities” in the [“Definitions”](#) section.
- The NHSC allows clinicians to receive service credit for teaching activities as set forth above. There is no guarantee that service credit for teaching will be available at the time when S2S LRP participants begin their service commitment. Of the minimum 16 hours/week for patient care, teaching shall not exceed a total of four hours/week.

(1) Medical Providers

- a. **For providers of primary medical care services, including pediatricians and geriatricians:** Clinicians must work a minimum of 20 hours/week, for a minimum of 45 weeks/service year. At least 16 hours/week are spent providing patient care at the approved service site(s). Of the minimum 16 hours spent providing patient care, no more than 4 hours/week may be spent in a teaching capacity. The remaining 4 hours/week are spent providing patient care at the approved site(s), providing patient care in approved alternative settings (e.g., hospitals, nursing homes, shelters, or community-based settings, or schools) as directed by the approved site(s), or performing clinical-related administrative activities (limited to 4 hours/week).

If working in an IHS Hospital or CMS-approved CAH, at least 8 hours/week must be spent providing direct patient care in the IHS or CAH-affiliated or outpatient clinic. Of the minimum eight hours spent providing patient care, no more than 4 hours/week may be spent in a teaching capacity. The remaining 12 hours/week are spent providing patient care at the IHS Hospital or CAH or the IHS or CAH-affiliated outpatient clinic, providing patient care at the CAH-affiliated skilled nursing facility or swing bed unit, or performing clinical-related administrative activities (limited to 4 hours/week).

- b. **For providers of obstetrics/gynecology services, including family medicine physicians who practice obstetrics on a regular basis, certified nurse midwives, and physician assistants, or geriatric services:** Clinicians must work a minimum of 20 hours/week, for a minimum of 45 weeks/service year. At least 11 hours/week are spent providing patient care at the approved site(s). Of the

minimum 11 hours spent providing patient care, no more than 4 hours/week may be spent in a teaching capacity. The remaining 9 hours/week are spent providing patient care at the approved site(s), providing patient care in approved alternative settings (e.g., hospitals, nursing homes, and shelters) as directed by the approved site(s), or performing clinical-related administrative activities (limited to 4 hours/week).

If working in an IHS Hospital or CMS-approved CAH, at least 8 hours/week must be spent providing patient care in the IHS or CAH-affiliated outpatient clinic. Of the minimum 8 hours spent providing patient care, no more than 4 hours/week may be spent in a teaching capacity. The remaining 12 hours/week are spent providing patient care at the IHS Hospital or CAH or the IHS or CAH-affiliated outpatient clinic, providing patient care at the CAH-affiliated skilled nursing facility or swing bed unit, or performing clinical-related administrative activities (limited to 4 hours/week).

- c. **For providers of behavioral/mental health services, including nurse practitioners and physician assistants:** Clinicians must work a minimum of 20 hours/week, for a minimum of 45 weeks/service year. At least 10 hours/week are spent providing patient care at the approved service site(s). Of the minimum 10 hours spent providing patient care, no more than 4 hours per week may be spent in a teaching capacity, performing clinical-related administrative activities, or in an alternative setting (e.g. hospitals, nursing homes, and shelters) as directed by the approved site(s). The remaining 10 hours/week may be spent providing patient care at the approved service site(s) or in schools or other community-based settings, as directed by the approved site(s).

If working in an IHS Hospital or a CMS-approved CAH, at least 8 hours/week must be spent providing patient care in the IHS or CAH-affiliated outpatient clinic. Of the minimum 8 hours/week spent providing patient care, no more than 4 hours/week may be spent in a teaching capacity. The remaining 12 hours/week are spent providing patient care at the IHS Hospital or CAH, or the IHS or CAH-affiliated outpatient clinic; providing patient care at the CAH-affiliated skilled nursing facility or swing bed unit; or performing clinical-related administrative activities (limited to 4 hours/week).

(2) Dental providers

For general dentists, including pediatric dentists: Clinicians must work a minimum of 20 hours/week, for a minimum of 45 weeks/service year. At least 16 hours/week are spent providing patient care at the approved site(s). Of the minimum 16 hours spent providing patient care, no more than 4 hours/week may be spent in a teaching capacity. The remaining 4 hours/week are spent providing patient care at the approved site(s), providing patient care in alternative settings

(e.g., hospitals, nursing homes, shelters) as directed by the approved site(s), or performing clinical-related administrative activities (limited to 4 hours/week).

Requirements for School-Based Clinics

All school-based clinics must be NHSC-approved service sites. Participants serving at school-based clinics as their primary service site(s) must provide required documentation (e.g., ISV forms) that demonstrates they are meeting their NHSC service obligation at that facility. For participants serving at an NHSC-approved school-based clinic, the NHSC understands that the school-based clinic may not be open year-round. Providers who work at school-based clinics that are not open year-round will not receive NHSC service credit for any period of time they are not serving at a school-based clinic. In order to meet the NHSC's clinical practice requirements, participants who are working at school-based clinics that are not open for a minimum of 45 weeks per service year have the option to work at an additional NHSC-approved site (or sites). The additional NHSC-approved site (or sites) must satisfy the HPSA requirements identified in the participant's initial NHSC S2S LRP contract.

If the participant's school is closed for a portion of the year, and the participant does not have an alternate NHSC-approved site that will enable the participant to fulfill the NHSC's annual clinical practice requirements, the participant's service obligation will be extended.

Telehealth Policies

NHSC participants who are performing telehealth are encouraged to utilize HRSA's [Telehealth Resource Centers \(TRCs\)](#). These centers provide free telehealth technical assistance and training for providers using telehealth.

Subject to the restrictions below, the NHSC will consider telehealth as patient care when both the **originating site** (location of the patient) and the **distant site** (location of the NHSC clinician) are located in a HPSA and are NHSC-approved.

- a. The NHSC clinician must be practicing in accordance with applicable licensure and professional standards.
- b. NHSC clinicians must be available, at the discretion of the NHSC-approved site, to provide in-person care at the direction of each telehealth site on the LRP application regardless of whether such sites are distant or originating.
- c. Telehealth may be conducted to or from an **alternative setting** as directed by the participant's NHSC-approved site. All service completed in an approved alternative setting are restricted to the program guidelines. For more information, please see the definition for approved alternative setting in the "[Definitions](#)" section.
- d. Self-employed clinicians are not eligible for NHSC service credit for telehealth services.
- e. If telehealth services are provided to patients in another state, the clinician must be licensed to practice (including compacts) in both the state where the clinician is

located (i.e., the distant site) and the state where the patient is physically located (i.e., the originating site).

- f. Telehealth services must be furnished using an interactive telecommunications system, defined as multimedia communications equipment that includes, at a minimum, audio and video equipment permitting two-way, real time interactive communication between the patient at the originating site and the NHSC clinician at the distant site.

Home Health Policies.

The NHSC does not currently recognize the homes of patients or providers as NHSC-approved sites. As such, home visits may only be conducted at the direction of the NHSC- approved site and time spent conducting home visits may only be counted in the alternative setting allotment for patient care (see the “[Full-Time Clinical Practice Requirements, by Discipline](#)” and “[Half-Time Clinical Practice Requirements, by Discipline](#)” sections).

PROGRAM COMPLIANCE

Worksite Absences

Note that the information provided below pertains to compliance with the NHSC S2S LRP service commitment and is not a guarantee that a service site will allow any particular amount of leave.

- (1) Full-time participants are allowed to spend no more than seven weeks (approximately 35 full-time workdays) per service year away from the NHSC-approved site for vacation, holidays, continuing professional education, illness, or any other reason.
- (2) Half-time participants are allowed to spend no more than seven weeks (approximately 35 half-time workdays) per service year away from the NHSC-approved site for vacation, holidays, continuing professional education, illness, or any other reason.

Service Verification

Every NHSC S2S LRP participant who has completed their training and is practicing at an NHSC-approved site must submit service verification documentation for each six months of service. The In-Service Verification form is available through the [BHW Customer Service Portal](#) and must be completed and electronically signed by the participant. Once completed by the participant, it will be forwarded to an appropriate official at the participant’s NHSC-approved site for electronic verification. By signing, the appropriate site official will be certifying the participant’s compliance or noncompliance with the applicable clinical practice requirement during the prior six-month period. The In-Service Verification will also record the time spent away from the service site (e.g., the total number of days during the six-month period that the participant fell below the minimum service requirement).

Participants who fail to complete and submit their In-Service Verification on time may jeopardize receiving service credit and may also be recommended for default. It may also make the participant ineligible for a continuation contract. While the NHSC will take steps to alert both the participant and the site to the due date for an In-Service Verification submission, it is the

participant's responsibility to ensure that their NHSC-approved site completes the verification in a timely manner.

If a participant works more than the minimum number of hours per week (40 hours for full-time and 20 hours for half-time), then the participant only needs to report absences (or time spent away from the site) that will impede them from meeting the minimum weekly service requirement. This time should be deducted from the participant's bank of allowable absences, which is 35 workdays per service year. For example, a half-time participant whose work schedule is 32 hours per week would not need to report 12 hours of sick leave because the participant has still met the minimum service requirement of 20 hours per week.

Absences over 35 workdays will result in the extension of the participant's service commitment. If the absences are caused by a medical or personal emergency that will result in an extended period of absence, a participant **will need to request a suspension** of the NHSC service commitment and provide supporting documentation. The NHSC cannot guarantee that a suspension request will be approved. If a suspension is requested and approved, the participant's service commitment end date will be extended accordingly (see "[Suspensions and Waivers](#)" section). Note that absences above the 35 allotted workdays without a documented medical or personal reason may render a participant unqualified for a continuation contract.

Sites

To be considered an NHSC-approved service site, a participant's site(s) must meet the following requirements:

- (1) Have a currently approved Site Application (formerly called a Multi-Year Recruitment and Retention Assistance Application) on file with the NHSC; and
- (2) Be located in or serving a HPSA.
 - a. The HPSA must have a status of "designated" at the time the NHSC verifies the information contained in the continuation contract application. Any status other than "designated" will result in the site being deemed ineligible.

The NHSC will use current HPSA data when determining site eligibility for a S2S LRP Contract.

Given the implications of a site losing its HPSA designation, participants are encouraged to monitor the status of an NHSC-approved service site's HPSA designation and encourage site administration to provide any data requested to continue the designation. Interested parties can utilize the [HRSA Data Warehouse](#) to find information on and the status of HPSAs.

Transferring Sites

The NHSC expects that participants will fulfill their obligation at the NHSC-approved service site(s) identified in the [BHW Customer Service Portal](#) and in the S2S LRP Contract Application. However, the NHSC does understand that circumstances may arise that require a participant to leave the initial service site and complete service at another NHSC-approved service site. If a participant needs to transfer to another location to complete their S2S LRP obligation, the participant should:

(1) first notify the NHSC through the [BHW Customer Service Portal](#), and then (2) locate a new site by visiting the [Health Workforce Connector](#).

If a participant requests to transfer to another NHSC-approved site, the transfer must be approved prior to the submission of the continuation contract application. Approval of all transfer requests are at the NHSC's discretion, and may depend on the circumstances of the participant's resignation or termination from the current service site.

Transfers must be approved and processed by the NHSC prior to the participant beginning to work at the new site. If the participant leaves their NHSC-approved service site(s) without prior approval of the NHSC, they **will not** receive service credit for the time period between their last day providing patient care at the initial service site and resumption of service at the transfer site following NHSC approval and/or they may be placed in default as of the date they left the initial NHSC-approved service site and become liable for the monetary damages specified in the participant's S2S LRP contract.

Alternatively, if a participant wishes to transfer to a site that currently does not have NHSC approval, the site will need to: (1) submit a Site Application, and then (2) have the Site Application approved before the clinician is eligible to apply for the S2S LRP Contract. The NHSC New Site Application cycle will be announced through the [NHSC website](#). There will be no exceptions to this policy; if the participant intends to continue their service with the NHSC and wishes to work at another site that is not currently approved, the site must submit an application by the deadline and be approved by the NHSC before the participant completes service under the current contract or the applicant's S2S LRP Contract application will be deemed ineligible.

Unemployment

Participants who resign or are terminated from their NHSC-approved site(s) must contact the NHSC immediately through the [BHW Customer Service Portal](#). If the NHSC deems the participant eligible for a transfer, the NHSC will give the participant a specific time frame in which to obtain and accept an employment offer at an NHSC-approved service site identified by the NHSC or at another suitable NHSC-approved site identified by the participant. Although the NHSC may assist unemployed participants with identifying suitable positions at NHSC-approved sites (referred to as "site assistance"), it is the participant's responsibility to obtain employment at an NHSC-approved site. The NHSC S2S LRP contract is not limited to service in a particular geographic area, and there may not be transfer opportunities in the participant's preferred area. Unemployed participants may be expected to relocate in order to fulfill their NHSC S2S LRP obligation.

Participants who voluntarily resign from their sites without prior approval from the NHSC or are deemed ineligible for site assistance may be placed in default and become liable for the monetary damages specified in the participant's NHSC S2S LRP contract.

Working at Unapproved Sites

Participants who are asked to work at a clinic that is not listed in the provider’s profile on the [BHW Customer Service Portal](#) must immediately notify the NHSC through the [BHW Customer Service Portal](#). Time spent at unapproved clinics will not count towards the service commitment.

Practice Types

If an applicant is...	and their salary and malpractice/tail coverage are...	they will serve under a:
A federal Civil Service employee or an active member of the U.S. Public Health Service Commissioned Corps	provided by a federal government entity	Federal Assignment (FA)
NOT a federal employee but an employee of an NHSC-approved site	<i>at least equal to</i> what they would earn as a civilian employee of the U.S. government	Private Practice Assignment (PPA)
NOT a federal employee but an employee of an NHSC-approved site	<i>less than</i> what they would earn as a civilian employee of the U.S. government	Private Practice Option (PPO)
NOT a Federal employee but a contractor to an eligible NHSC-approved site, or a member or co-owner of a group practice in an NHSC-approved site, or a solo practitioner in an eligible NHSC-approved site	whatever income they earn or generate; whatever malpractice coverage they purchase or receive	PPO

Generally, S2S LRP participants will serve in the NHSC as either federal employees (Public Health Service Commissioned Officers or Civil Servants) or as Private Practice Assignees who are employees of a public or private entity, receiving an income at least equal to what he or she would have received as a civilian employee of the U.S. government, including malpractice insurance with tail coverage (either commercial or through the Federal Tort Claims Act).

In some circumstances, an NHSC participant is not subject to the personnel system of the site to which they are assigned, does not receive a salary equivalent to a civilian employee of the U.S. government, and/or is not provided malpractice coverage by their site. In these cases, the clinician can request to fulfill their obligation through the Private Practice Option (PPO). Under the PPO, an NHSC LRP participant may be (a) self-employed – i.e., a solo practitioner or co-owner; (b) part of a group practice; (c) an independent contractor; or (d) a salaried employee of an eligible NHSC-approved service site who is not receiving salary and malpractice coverage at least

equal to what they would receive as a federal Civil Servant. The PPO service option is open only to full-time participants, and service under the PPO must be at an NHSC-approved site. In order to serve under the PPO, the applicant must make such a request by submitting a PPO Request form. Completed PPO Request forms should be uploaded as an additional document when completing the application. If, during the NHSC's application review process, it is determined that a PPO Request form is necessary, the NHSC will send an email request to the email address associated with the application and provide a timeline for submission. In addition, if the NHSC approves such request, the participant must enter into a PPO Agreement that stipulates the special provisions that apply to those serving under the PPO.

Federal Assignments and Private Practice Assignments require the NHSC-approved service site to accept Medicare assignment, enter into the appropriate agreements under Medicaid and the Children's Health Insurance Program, and utilize a schedule of discounts (including, as appropriate, waivers) of fees based on a patient's ability to pay) (see definition of "NHSC-approved service site" in the "[Definitions](#)" section). The Private Practice Option requires the individual to comply with the aforementioned billing requirements.

Breaching the NHSC S2S LRP Contract

Participants should immediately contact the NHSC through the [BHW Customer Service Portal](#) if a situation arises that may result in the participant being unable to begin or complete their NHSC S2S LRP service obligation. The NHSC will work with participants to assist them, to the extent possible, to fulfill their service obligations.

- Participants who (1) are dismissed from school for academic or disciplinary reasons, (2) voluntarily terminate their academic training before graduation, or (3) in the case of physicians, enroll in, but fail to complete, a required postgraduate training program (including withdrawals from such programs) will be liable to the U.S. Government for the repayment of all NHSC S2S LRP funds paid to them. The amount owed must be paid in full within one year of the date of default. No interest will be charged on any part of this debt during the one-year repayment period. However, if payment in full is not made within the one-year period, interest will be assessed thereafter.

Note: Dentists, nurse practitioners, physician assistants, and certified nurse midwives who enroll in, but fail to complete an approved dental or nursing residency or fellowship, will not be placed in default but are, instead, expected to commence service.

- Participants who (1) fail to enroll in a required postgraduate training program, (2) fail to comply with the terms and conditions of deferment, or (3) fail to begin or complete their obligation to serve in a **full-time** clinical practice, will be liable to the U.S. Government for an amount equal to the sum of the following:
 - (1) The amount of the loan repayments paid to the participant representing any period of obligated service **not** completed;
 - (2) \$7,500 multiplied by the number of months of obligated service **not** completed; and

- (3) Interest on the above amounts at the maximum legal prevailing rate, as determined by the U.S. Treasurer, from the date of breach.

Failure to comply with the terms and conditions of deferment includes:

- (1) Pursuing training that is not approved by the NHSC – e.g., non-primary health care programs such as emergency medicine, radiology, neurology, anesthesiology, ophthalmology, pathology, oral and maxillofacial surgery, prosthodontics, palliative care, and other programs that the NHSC S2S LRP determines are not consistent with the needs of the NHSC to provide primary health services in HPSAs;
 - (2) Enrolling in postgraduate health professions education conducted by a branch of the U.S. Armed Forces. Participants in such program incur military service obligations that conflict with the service commitment required under the NHSC S2S LRP; and
 - (3) Participating in an unaccredited postgraduate training program.
- Participants who fail to begin or complete their obligation to serve in a **half-time** clinical practice, will become liable to the U.S. Government for an amount equal to the sum of the following:
 - (1) The amount of the loan repayments paid to the participant representing any period of obligated service **not** completed;
 - (2) \$3,750 multiplied by the number of months of obligated service **not** completed; and
 - (3) Interest on the above amounts at the maximum legal prevailing rate, as determined by the U.S. Treasurer, from the date of breach.

Note: The minimum amount the U.S. Government is entitled to recover from participants who fail to begin or complete their obligation to serve full-time or half-time is \$31,000.

Any amounts the U.S. Government is entitled to recover, as set forth above, must be paid within one year from the date of default. Failure to pay the debt by the due date has the following consequences:

- (1) **The debt will be reported to credit reporting agencies.** During the one-year repayment period, the debt will be reported to credit reporting agencies as “current.” If the debt becomes past due (i.e., remains unpaid at the end of the one-year repayment period), it will be reported as “delinquent.”
- (2) **The debt may be referred to a debt collection agency and the U.S. Department of Justice.**
Any NHSC S2S LRP debt past due for 90 days will be referred to a debt collection agency. If the debt collection agency is unsuccessful in collecting payment, the debt will be referred to the U.S. Department of Justice for filing of a lawsuit against the defaulter.
- (3) **Administrative offset.** Federal or state payments due to the participant (e.g., an IRS or state income tax refund) may be offset by the U.S. Department of the Treasury to pay a delinquent NHSC S2S LRP debt. Also, defaulters who are federal employees may have their salary garnished to pay a delinquent NHSC S2S LRP debt.

- (4) **Licensure sanctions.** In some states, health professions licensing boards are allowed to impose sanctions, including suspension or revocation of a defaulter’s professional license, if the defaulter fails to satisfactorily address repayment of their NHSC S2S LRP debt.

Bankruptcy. A financial obligation under the NHSC S2S LRP may be discharged in bankruptcy only if the discharge is granted more than seven years after the debt becomes due and only if a bankruptcy court determines that the non-discharge of the debt would be unconscionable.

Suspensions and Waivers

The Secretary of HHS or their designee may suspend or waive, in whole or in part, an NHSC S2S LRP service or payment obligation, if certain criteria are met.

- (1) **Suspension.** A suspension of the NHSC S2S LRP commitment may be granted if compliance with the commitment by the participant: (i) is temporarily impossible or (ii) would involve a temporary extreme hardship such that enforcement of the commitment would be unconscionable. Periods of approved suspension of service will extend the participant’s service commitment end date. The participant does not receive service credit during the suspension; credit resumes when service resumes. The major categories of suspension are set forth below.

- a. **Medical and Personal Reasons.** A suspension may be granted for up to one year if the participant provides independent medical documentation of a physical or mental health disability, or personal circumstances, including a terminal illness of an immediate family member (e.g., child or spouse, including a same-sex spouse regardless of where the couple lives), which results in the participant’s temporary inability to perform the NHSC S2S LRP commitment.
- b. **Maternity/Paternity/Adoption.** A participant must notify the NHSC of pending maternity/paternity/adoption leave and provide documentation from the attending physician or the adoption agency through the [BHW Customer Service Portal](#). The NHSC S2S LRP will allow participants to be away from their site for maternity, paternity or adoption leave within the timeframes established by either the Family Medical Leave Act (up to 12 weeks) or the participant’s state of residence; however, the participant must also adhere to the leave policies of their NHSC-approved site. Suspensions for maternity/paternity/adoption leave of 12 weeks or less will be automatically granted if a participant submits appropriate documentation through the [BHW Customer Service Portal](#) (see “[Suspensions and Waivers](#)” section). If the participant’s maternity/paternity/adoption leave will exceed 12 weeks during the service year, the participant must submit an additional suspension request, which may or may not be approved by the NHSC S2S LRP. Remember that a participant is required to serve a minimum of 45 weeks per service year and is allowed to be away from the NHSC-approved site for no more than 35 workdays per service year. Therefore, if a participant takes maternity/paternity/adoption leave in

excess of 35 workdays per service year, the participant's obligation end date will be extended for each day of absence over the allowable 35 workdays.

- c. **Call to Active Duty in the Armed Forces.** A participant who is also a military reservist and is called to active duty will be granted a suspension for up to one year beginning on the activation date described in the reservist's call to active-duty order. The suspension will be extended if the applicable Armed Forces entity continues the period of active duty. The period of active military duty will not be credited toward the NHSC S2S LRP service commitment.
- d. **Failure to Obtain a License.** A participant unable to pass all parts of the licensing examinations and obtain a license by the time the service is scheduled to begin should immediately contact the NHSC S2S LRP through the [BHW Customer Service Portal](#) to request a suspension.

(2) **Waiver.** A waiver permanently relieves the participant of all or part of the NHSC S2S LRP commitment. A waiver may be granted only if the participant demonstrates by adequate medical and/or financial documentation that compliance with their commitment is permanently impossible or would involve an extreme hardship such that enforcement of the commitment would be unconscionable. A waiver request must be submitted by uploading a signed request letter, including the reason(s) the waiver is being sought, as an inquiry through the [BHW Customer Service Portal](#). The participant will be contacted by the Bureau of Health Workforce Division of Participant Support and Compliance/ Legal and Compliance Branch regarding the medical and financial documentation necessary to complete the waiver request. All documents can be submitted through the [BHW Customer Service Portal](#). Note that waivers are not routinely granted, and require a showing of compelling circumstances.

Cancellation of NHSC S2S LRP Obligation

A participant's NHSC S2S LRP obligation will be cancelled in its entirety in the event of the participant's death. No liability will be transferred to the participant's heirs.

APPLICATION INFORMATION

APPLICATION DEADLINE

A complete online application must be submitted by Thursday, November 4, 2021 at 7:30 p.m. ET. All supporting documentation for the application must be uploaded before an individual can submit a complete application package. Applicants must upload all documents; the NHSC will not accept documentation by fax, email, or mail. Application packages will be initially reviewed to determine their completeness. Application packages deemed incomplete as of the application deadline will not be considered for funding.

The Associate Administrator of BHW, or their designee, may authorize an extension of published deadlines when justified by circumstances such as acts of nature (e.g., floods or hurricanes),

widespread disruptions of Internet service, or other widespread disruptions, such as a prolonged blackout. BHW will determine the affected geographical area(s) and the length of the extension granted.

COMPLETING AN APPLICATION

Application Information

The NHSC S2S LRP application consists of:

- (1) Online Application;
- (2) Required Supplemental Documentation; and
- (3) Additional Supporting Documentation (if applicable).

Applicants should keep a copy of the application package for their records. Applicants are responsible for submitting a complete online application. **Information in the online application must match the submitted supplemental/supporting documents.** Application packages deemed incomplete (e.g., missing, illegible, or incomplete application materials) as of the application deadline will not be considered for funding.

The NHSC S2S LRP will not accept requests to update a submitted application or permit the submission/resubmission of incomplete, rejected, or otherwise delayed application materials after the deadline. In addition, NHSC S2S LRP staff will not fill in any missing information or contact applicants regarding missing information.

Online Application

Applicants are required to complete each of the sections below to be able to submit an online application.

- (1) **Eligibility Screening.** If an individual does not pass the initial screening portion of the online application, they will not be able to continue with the application. Refer to the [“Eligibility Requirements”](#) section of the Guidance for further details.
- (2) **General Information.** Answers to this section pertain to the applicant’s name, Social Security number, mailing and email addresses, and other contact information. Answers also pertain to individual and family background. Existing applicant information will be pre-populated if it is available.
- (3) **Education Information.** Answers to this section pertain only to the degree program that the applicant is currently pursuing. A curriculum vitae (CV) or resume is required; it should outline relevant work/volunteer experience and should be no more than five pages in length.
- (4) **Loan Information.** Answers in this section pertain to each qualifying educational loan for which an applicant is seeking repayment. All loans submitted will be verified to determine whether they are eligible for repayment under the NHSC S2S LRP through a review of the supporting documents, by contacting lenders/holders, and by checking the applicant’s credit report. Applicants are strongly encouraged to view the link provided in the application for detailed instructions on the types of documents that

need to be provided to help the NHSC verify loan information. The following information must be entered about each of the loans an applicant wishes to submit for repayment, and the *Required Supplemental Documentation* (see below) must be uploaded separately:

- a. Name and contact information for the lender/holder.
 - b. Loan account number.
 - c. Original amount disbursed.
 - d. Original date of the loan.
 - e. Current outstanding balance (no more than 30 days from the date of the NHSC S2S LRP application submission).
 - f. Current interest rate.
 - g. Type of loan. If a consolidated loan, additional questions will be asked:
 - i. Original date of consolidation.
 - ii. Original balance of consolidation.
 - iii. Account number.
 - h. Purpose of loan.
- (5) **Essay.** Applicants are required to respond to the following essay topic. The response to the essay is limited to 500 words or less. Applicants should create a response in a document (.doc, .pdf, or .txt) and upload it in the appropriate section of the application.

ESSAY TOPIC

Describe your experience that demonstrates leadership in addressing emerging health trends and creating innovative ideas to promote improved health outcomes in underserved communities.

Required Supplemental Documentation

It is the applicant's responsibility to upload supplemental documents into the online application by Thursday, November 4, 2021 at 7:30 p.m. ET. Failure to submit a complete application package by the deadline will deem the applicant ineligible, and they will not be considered for an NHSC S2S LRP award. An application will not be considered complete and an applicant may not submit an application, unless it contains each of the following required supplemental documents at the time of the online application submission:

- (1) **Proof of Status as a U.S. Citizen or U.S. National.** Proof of U.S. citizenship or U.S. national status may include a copy of a birth certificate issued by a city, county, or state agency in the U.S., the ID page of a U.S. passport, or a certificate of citizenship or naturalization. **A permanent resident card, driver's license, marriage certificate, or social security card are not acceptable forms of documentation.**
- (2) **Authorization to Release Information.** This form authorizes entities identified in the form to disclose information regarding applicants who have been selected and accept the NHSC

- S2S LRP award. The form must include the last four digits of the applicant's Social Security number, be dated and have the applicant's handwritten signature.
- (3) **Resume/CV.** Should outline relevant work/volunteer experience and be no more than five pages in length.
 - (4) **Proof of Passage of Required Licensing Examinations.**
 - a. Medical students will be required to submit documentation verifying that they have passed Step 1/Level 1 of the USMLE or the COMLEX.
 - b. Dental students will be required to submit documentation verifying that they have passed Part I of the National Board Dental Examination.
 - (5) **Verification of Good Standing.** Applicants must be enrolled in their last year of school as a full-time student in an accredited program during the 2021-2022 school year to receive an award. An applicant is required to submit to the NHSC, no later than **May 1, 2022**, a report from the school verifying that they are enrolled and in good standing, that the:
 - a. Last day of classes will be no later than May 31, 2022, for Physicians/Dentists, and August 30, 2022, for Nurse Practitioners/Certified Nurse Midwives/Physician Assistants, and
 - b. Applicant will be graduating before July 1, 2022, for Physicians/Dentists, and August 31, 2022, for Nurse Practitioners /Certified Nurse Midwives/Physician Assistants.

This form must be completed and signed by a school official. Note all information will be verified for accuracy.

- (6) **Letters of Recommendation.** Applicants are required to submit two letters of recommendation, one preceptor letter of recommendation, and one additional letter of recommendation. All recommendations must be uploaded through the BHW Customer Service Portal. Recommendations should include a description of the recommender's relationship to the applicant, and a discussion of the applicant's interest in and commitment to a career in primary care and service to underserved populations and communities. **The letters must include a signature and/or be on letterhead. The applicant will not be selected if these requirements are not met.**
 - a. **Preceptor Letter of Recommendation.** This letter may be from a primary care preceptor or another individual who can discuss the applicant's interest in and commitment to a career in primary care and service to underserved populations and communities.
 - b. **Additional Letter of Recommendation.** This letter should be from an individual who is familiar with the applicant and who is aware of the applicant's academic, professional, community, and/or civic activities, especially those related to primary care and underserved communities. A recommender can be a current or former employer, community leader, colleague, or anyone who has knowledge of the applicant's interest and motivation in providing primary care in underserved communities.
- (7) **Transcript.** Applicants must include a transcript from their current educational institution showing at least two semesters of grades. An unofficial transcript is acceptable as long as the applicant's name, school name, and grade point average (GPA) are also provided (may be pass/fail).

- (8) **Loan Information Verification.** Applicants will be required to provide two types of documentation for each loan that is being submitted for consideration: an account statement and a disbursement report.
- a. **Account Statement.** This document is used to provide current information on the qualifying educational loans. Often borrowers receive monthly statements indicating the status of the loan balance. This document should:
 - i. be on official letterhead or other clear verification that it comes from the lender/holder;
 - ii. include the name of the borrower (i.e., the NHSC S2S LRP applicant);
 - iii. contain the account number;
 - iv. include the date of the statement (cannot be more than 30 days from the date of S2S LRP application submission);
 - v. include the current outstanding balance (principal and interest) or the current payoff balance; and
 - vi. include the current interest rate.
 - b. **Disbursement Report.** This report is used to verify the originating loan information and should:
 - i. be on official letterhead or other clear verification that it comes from the lender/holder;
 - ii. include the name of the borrower (i.e., the NHSC S2S LRP applicant);
 - iii. contain the account number;
 - iv. include the type of loan;
 - v. include the original loan date (must be prior to the date of the NHSC S2S LRP application submission);
 - vi. include the original loan amount; and
 - vii. include the purpose of the loan.

For *federal* loans, the disbursement report is satisfied through a [National Student Loan Data System \(NSLDS\)](#) Aid Summary Report. Applicants will need a Federal Student Aid ID to log in to your secured area; if you do not have an FSA ID, visit the [Federal Student Aid ID page](#) to create one. If you have multiple federal loans, you will only need to upload one NSLDS Aid Summary Report. The NSLDS report will generally contain information on all your federal loans.

For all other loans including private loans, the disbursement report can be satisfied through various types of documents including a promissory note, a disclosure statement, and letters directly from the lender containing the required information (as indicated in (b) above). Applicants may be able to obtain this disbursement information on their lender's web site; however, all documentation must be on official letterhead from the lender.

Awardees who received less than \$120,000 in award funding and received loan disbursements after the NHSC S2S LRP application submission deadline will be invited to submit disbursement reports to be considered for additional award funding, up to \$120,000.

Additional Supporting Documentation (if applicable)

Based on the applicant's responses to the online application, the following additional documents may be required. Only applicants who have these documents listed on their "Supporting Documents" page of the online application should submit them. These documents will be added to their Supporting Documents list once the online application has been submitted.

- (1) **Verification of Disadvantaged Background.** This document certifies that the applicant comes from a disadvantaged background and either participated in, or would have been eligible to participate in, federal programs such as "Scholarships for Disadvantaged Students" or "Loans for Disadvantaged Students." This document must be completed and hand signed by a school official.
- (2) **Verification of Existing Service Obligation.** If the applicant has an existing service obligation, they must submit verification that the existing service obligation will be completed prior to commencing service under the NHSC S2S LRP.

Application Review and Award Process

Applicants will receive a receipt of submission once the application has been successfully submitted online. Applicants can verify that sections of the application are complete when there is a checkmark by each on the status page. Applicants will be able to edit or withdraw their applications before the deadline to submit applications. Allow at least 30 business days from submission for the NHSC S2S LRP to review your documentation and update the status of documents.

Once the online application has been submitted and each supporting document has a status of "received," the application packages are ready for review. The application review process occurs over several months through independent, objective review. The NHSC S2S LRP will provide email updates, as applicable, as well as updates on the "Status" page of the online application. It is the applicant's responsibility to ensure their contact information is correct and current.

NOTIFICATION OF AWARD

If you are selected as a finalist, you will receive a Confirmation of Interest email. An applicant must respond by the deadline in the Confirmation of Interest email and electronically sign a copy of the contract and provide the NHSC S2S LRP with their banking information. The electronic signature has the effect of a handwritten signature, and once countersigned by the Secretary of HHS or their designee, obligates the participant to an NHSC S2S LRP service commitment. If the applicant does not respond to the NHSC S2S LRP by the deadline, the offer of award expires and the award will be offered to an alternate applicant.

If an individual selected for an award decides not to accept the award **prior to signing the contract**, they may decline the award by selecting the “decline” option on the Confirmation of Interest document. This process is without penalty and permits the award to be offered to an alternate applicant. Once an applicant declines the offer of award, there will not be any opportunities to reclaim the award. A decision to decline the award is final and cannot be changed under any circumstances.

If an individual selected for an award decides they do not want it **after signing the contract**, the individual should notify the NHSC immediately through the [BHW Customer Service Portal](#) that they no longer want the award.

- **If the Secretary of HHS’s designee has not yet countersigned the contract**, the individual will not incur a service obligation or any penalty for withdrawing.
- **If the Secretary of HHS’s designee has already signed the contract**, the individual can request termination of the contract only under certain conditions, as explained in the “[Contract Termination](#)” section.

Individuals not selected for an award will be notified via email no later than April 15, 2022.

ADDITIONAL INFORMATION

RESOURCES FOR APPLICANTS

BHW Customer Service Portal

Once an applicant has been selected for an award, they will be provided with instructions for establishing an account on the [BHW Customer Service Portal](#). This web-based system will allow NHSC S2S LRP awardees and participants to communicate with the NHSC, upload required documentation prior to the beginning of their postgraduate training (e.g., proof of passage of Step 2/Level 2 of the USMLE/COMLEX, National Board Dental Examination Part I and II, proof of residency match, etc.), make service requests (e.g., transfers, suspensions, waivers, etc.), and access the PGTV and 6-month In-Service Verification forms.

Customer Care Center

Any individual with questions about the NHSC S2S LRP may contact the Customer Care Center at 1-800-221-9393 (TTY – 1-877-897-9910) Monday through Friday (except federal holidays) from 8:00 a.m. to 8:00 p.m. ET.

Health Workforce Connector

The [Health Workforce Connector](#) is a searchable database of open job opportunities and information on NHSC-approved sites.

HPSA Find

All NHSC S2S LRP participants must serve in a federally designated HPSA. The [HPSA Find](#) website and [Find Shortage Areas by Address](#) provide an understanding of where HPSAs are currently located.

NHSC Connections

[Sign-up to be notified](#) of NHSC program updates, application cycles and other information.

Follow the NHSC on social media:

[NHSC Facebook Page](#)

[NHSC Twitter Page](#)

[NHSC LinkedIn Page](#)

Provider's Clinical Support System for Medication-Assisted Treatment (PCSS-MAT)

The [Substance Abuse and Mental Health Service Administration](#) (SAMHSA) is the agency within HHS whose primary aim is to improve the behavioral health of the nation while reducing the impact of mental illness and substance abuse in communities.

PCSS-MAT is a national training and clinical mentoring project developed in response to the prescription opioid misuse epidemic and the availability of pharmacotherapies to treat opioid use disorder. PCSS-MAT trains health professionals to provide effective, evidence-based, medication-assisted treatments to patients with opioid use disorder in primary care, psychiatric care, substance use disorder treatment, and pain management settings. For MAT training information, visit the [PCSS-MAT website](#).

DEFINITIONS

Approved Alternative Setting – Alternative settings include any setting in a HPSA at which the clinician is directed to provide care by the NHSC-approved site (e.g., hospitals, nursing homes, and shelters). The alternative sites must provide services to a HPSA that is appropriate for the discipline and specialty of the clinician and the services provided. Services at alternative sites must be an extension of the comprehensive primary care provided at the NHSC-approved site.

Automatically-Approved NHSC Site – Eligible auto-approved NHSC sites are those sites that may be recognized by the NHSC as meeting all NHSC site requirements, and have reviewed and signed the NHSC Site Agreement, while remaining in compliance with their respective program requirements. The following may be eligible Auto-Approved NHSC sites: 1) FQHCs, 2) FQHC Look-Alikes, 3) Indian Health Service (IHS) Facilities, 4) Tribally-Operated 638 Health Programs, 5) Urban Indian Health Programs, 6) Federal Prisons, and 7) Immigration and Customs Enforcement (ICE) Health Service Corps sites.

Bureau of Health Workforce (BHW) – The bureau within the Health Resources and Services Administration (HRSA) that administers the National Health Service Corps (NHSC) and Nurse Corps scholarship and loan repayment programs, the Faculty Loan Repayment Program (FLRP), Native

Hawaiian Health Scholarship Program (NHSP), and grants for State Loan Repayment Programs (SLRP).

Clinical-related Administrative, Management or Other Activities – May include charting, care coordination activities, training, laboratory follow-up, patient correspondence, attending staff meetings, activities related to maintaining professional licensure and other non-treatment related activities pertaining to the participant’s approved NHSC practice. Any time spent in a management role is also considered to be an administrative activity. The duties of a medical director are considered primarily administrative, and NHSC S2S LRP participants serving in such a capacity should keep in mind that they cannot count more than 8 hours per week of administrative and/or management time (4 hours in the case of half-time) toward the total required 40 hours per week (or 20 hours in the case of half-time).

Commercial or Private Student Loans – Also known as a college loan, an educational loan or an alternative student loan – is a non-government loan made by a private lender specifically for graduate or undergraduate education expenses, such as tuition, room, board, books, and other associated costs. This includes, loans made by banks, credit unions, savings and loan associations, insurance companies, schools, and other financial or credit institutions that are subject to examination and supervision in their capacity as lenders by an agency of the United States or of the state in which the lender has its principal place of business. These are unsecured loans with various options for repayment and may offer forbearance and deferral options. Loans obtained to cover residency and relocation expenses do not qualify for repayment under the NHSC S2S LRP.

Community-Based Settings – Facilities open to the public that may or may not be located in a HPSA, but expand the accessibility of health services by fostering a health promoting environment and may provide comprehensive primary behavioral and mental health care services. These facilities may function as part of a system of care to ensure continuity of patient-centered, comprehensive, and coordinated care. NHSC service completed in community-based settings are only applicable to behavioral and mental health providers as directed by the NHSC-approved site, and must be an extension of the comprehensive primary care provided at the NHSC-approved site.

Comprehensive Primary Behavioral and Mental Health Care Services – Services that include, but are not limited to: screening and assessment, diagnosis, treatment plans, therapeutic services including access to medication prescribing and management, crisis care including 24-hour call access, consultative services, and care coordination. Sites must function as part of a system of care to ensure continuity of patient-centered, comprehensive, and coordinated care. The site must also offer or ensure access to ancillary, inpatient, and specialty referrals.

Continuation Contract – An optional 1-year extension of an NHSC S2S LRP contract. The award level is dependent on the service status (i.e., half- or full-time clinical practice) and the particular year of additional support. NHSC S2S LRP participants must meet all program eligibility criteria in effect at the time they are being considered for a continuation contract, which includes providing documentation that all previously received NHSC S2S LRP payments were applied to reduce their

qualifying educational loans. A continuation contract will not take effect until the current contract is completed and the continuation contract has been countersigned by the Secretary of Health and Human Services' designee. An S2S LRP participant cannot be guaranteed a continuation contract.

Critical Access Hospital (CAH) – A facility certified by the Centers for Medicare and Medicaid Services (CMS) under section 1820 of the Social Security Act. A CAH must be located in a rural area in a state that has a Rural Hospital Flexibility Program, have no more than 25 inpatient beds, an average annual length of stay of 96 hours or less, and be located either more than a 35-mile drive from the nearest hospital or CAH, or more than a 15-mile drive in areas with mountainous terrain or only secondary roads. For more information, view the [Critical Access Hospital Booklet](#).

Default of Payment Obligation – Being more than 120 days past due on the payment of a financial obligation.

Default of Service Obligation – Failure for any reason to begin or complete a contractual service commitment.

Disadvantaged Background – As defined by the Scholarships for Disadvantaged Students program (Sec. 737 of the Public Health Service Act), this refers to individuals who have been identified by their schools as having come from a “disadvantaged background” based on environmental and/or economic factors. “Environmental factors” means that the individual comes from an environment that has inhibited the individual from obtaining the knowledge, skill, and abilities required to enroll in and graduate from a school. “Economic factors” means that the individual comes from a family with an annual income below a level based on low-income thresholds according to family size published by the U.S. Bureau of the Census, adjusted annually for changes in the Consumer Price Index, and adjusted by the Secretary of Health and Human Services (HHS) for adaptation to this program.

Family Member – As used in the guidance and for the purposes of the NHSC “family member” includes spouses, as well as unmarried partners (both same-sex and opposite-sex).

Federal Direct Student Loans – A student loan offered by the federal government that has a low-interest rate for students and parents and is used to pay for the costs of any form of education after high school. The lender for the federal Direct Student Loan is the U.S. Department of Education, rather than an institution such as a bank.

Federal Judgment Lien – A lien that is placed against an individual’s home or property when a court-ordered judgment is entered against the individual for an unpaid federal debt (e.g., a federal student loan or federally insured home mortgage). An IRS tax lien that is not created pursuant to a court-ordered judgment is not a federal judgment lien.

Federally-Qualified Health Centers (FQHC) – FQHCs include: (1) nonprofit entities that receive a grant (or funding from a grant) under section 330 of the Public Health Service (PHS) Act (i.e.,

health centers); (2) FQHC “Look-Alikes” which are nonprofit entities that are certified by the Secretary of HHS as meeting the requirements for receiving a grant under section 330 of the PHS Act but are not grantees; and (3) outpatient health programs or facilities operated by a tribe or tribal organization under the Indian Self-Determination and Education Assistance Act or by an urban Indian organization receiving funds under title V of the Indian Health Care Improvement Act.

Fiscal Year (FY) – The federal FY is defined as October 1 through September 30.

Full-Time Clinical Practice – Working a minimum of 40 hours per week in a clinical practice, for a minimum of 45 weeks per service year, in an NHSC-approved service site. For a more detailed explanation of the full-time clinical practice requirement, see “[Service Requirements](#)” section.

Government Loans – Government loans are loans made by federal, state, and county or city agencies authorized by law to make such loans.

Half-Time Clinical Practice – Working a minimum of 20 hours per week in a clinical practice, not to exceed 39 hours per week, for a minimum of 45 weeks per service year, in an NHSC-approved service site. For a more detailed explanation of the half-time clinical practice requirement, see “[Service Requirements](#)” section.

Health Professional Shortage Area (HPSA) – A HPSA is a geographic area, population group, public or nonprofit private medical facility or other public facility determined by the Secretary of HHS to have a shortage of primary medical care, dental, or mental health professionals based on criteria defined in regulation. Information considered when designating a primary care HPSA includes health provider to population ratios, rates of poverty, and access to available primary health services. HPSAs are designated by the Shortage Designation Branch, within HRSA’s Bureau of Health Workforce, pursuant to Section 332 of the PHS Act (Title 42, U.S. Code, Section 254e), and implementing regulations (Title 42, Code of Federal Regulations, Part 5).

Health Resources and Services Administration (HRSA) – An operating agency of the U.S. Department of Health and Human Services.

Health Workforce Connector – A searchable database of open job opportunities and information on NHSC-approved sites. The [Health Workforce Connector](#) can be used to create clinician profiles and find current vacancies.

Holder – The commercial or Government institution that currently holds the promissory note for the qualifying educational loan (e.g., Sallie Mae, PHEAA, etc.).

Indian Health Service (IHS) Hospitals – A collective term that includes hospitals that are both IHS-owned and IHS-operated, or IHS-owned and tribally-operated (i.e., a federal facility operated by a tribe or tribal organization contracting with the IHS pursuant to the Indian Self-Determination and Education Assistance Act), which provide both inpatient and outpatient clinical treatment services

to eligible American Indians and Alaska Natives. This term does not include hospitals that are both tribally-owned and tribally-operated.

Indian Health Service, Tribal or Urban Indian Health Clinic (ITU) – A health care facility (whether operated directly by the Indian Health Service; or by a tribe or tribal organization contracting with the Indian health Service pursuant to the Indian Self-Determination and Education Assistance Act, codified at 25 U.S.C. 450 et seq.; or by an urban Indian organization receiving funds under Subchapter IV of the Indian Health Care Improvement Act, codified at 25 U.S.C. 1651 et seq.) which provides clinical treatment services to eligible American Indians and Alaska Natives on an outpatient basis. For more information, view the:

- [Urban Indian Health Program fact sheet](#)
- [Indian Health Service Profile](#)

Lender – The commercial or Government institution that initially made the qualifying loan (e.g., Department of Education).

Located In A State – NHSC S2S LRP applicants must be enrolled full-time in the final year of study at an accredited medical or dental school located in a state. See definition of "state" below. Students attending schools outside of a state are not eligible for an NHSCS2S LRP award, even though they may be citizens or nationals of the U.S.

National Health Service Corps (NHSC) – “The Emergency Health Personnel Act of 1970,” Public Law 91-623, established the NHSC on December 31, 1970. The NHSC Program, within the Department of Health and Human Services, was created to eliminate the health professional shortages in HPSAs through the assignment of trained health professionals to provide primary health services in HPSAs. The NHSC seeks to improve the health of underserved Americans by bringing together communities in need and quality primary health care professionals.

National Health Service Corps (NHSC)-Approved Site – Each healthcare site must submit an NHSC Site Application to become an NHSC-approved site. In order for a site to be eligible for NHSC approval, it must: be located in and providing service to a federally designated HPSA; provide comprehensive primary medical care, mental and behavioral health and/or dental services; provide ambulatory care services (no inpatient sites, except Critical Access Hospitals and IHS hospitals); ensure access to ancillary, inpatient and specialty referrals; charge fees for services consistent with prevailing rates in the area; discount or waive fees for individuals at or below 200 percent of the federal poverty level; accept assignment for Medicare beneficiaries; enter into agreements with Medicaid and the Children’s Health Insurance Program (CHIP), as applicable; not discriminate in the provision of services based on an individual’s inability to pay for services or the source of payment (Medicare/Medicaid/CHIP); prominently post signage that no one will be denied access to services due to inability to pay; agree not to reduce clinician’s salary due to NHSC support; provide sound fiscal management; and maintain a recruitment and retention plan, as well as a credentialing process, for clinicians. If the Site Application is approved, the

community site becomes an NHSC-approved site. All NHSC-approved sites must continuously meet the above requirements.

Postgraduate Training – Refers to additional training that an S2S physicians, physician assistants, dentists, and nurse practitioners or certified nurse midwives may participate in after they graduate from medical, dental or advanced nursing school (e.g., primary care residencies, chief residency, and fellowships). The postgraduate training programs that are currently approved for S2S LRP participants graduating from medical school in 2022 are: family medicine, general internal medicine, general pediatrics, obstetrics-gynecology, general psychiatry, internal medicine/family practice, internal medicine/pediatrics, family medicine/psychiatry, and internal medicine/psychiatry.

For physicians, the NHSC S2S LRP may approve, consistent with the needs of NHSC, additional postgraduate training following residency for a child psychiatry fellowship, fellowship in Substance Use Disorder or Addiction Medicine, fellowship in Obstetrics-Gynecology or geriatrics fellowship. Dentists have the option to complete an accredited residency in general practice dentistry, advanced education in general dentistry, pediatric dentistry, or public health dentistry, or a geriatric dentistry fellowship. Physician Assistants, nurse practitioners, and certified nurse midwives have the option to complete a primary care residency in a community-based setting.

Primary Health Services – Means health services regarding family medicine, internal medicine, pediatrics, obstetrics and gynecology, dentistry, or mental health, that are provided by physicians or other health professionals.

Qualifying Educational Loans – Government and private student loan loans for actual costs paid for tuition and reasonable educational and living expenses related to the undergraduate or graduate education of the participant that were obtained by the clinician prior to their submission of an application to participate in the NHSC S2S LRP. Such loans must be contemporaneous with the education received. Participants will receive funds for repayment of qualifying educational loans that are still owed. If the applicant has a consolidated/refinanced loan that is made up entirely of qualifying educational loans of the applicant, the consolidated/refinanced loan is eligible for repayment. If the applicant has consolidated otherwise qualifying educational loans with any non-qualifying debt, no portion of the consolidated/refinanced loan will be eligible.

Reasonable Educational Expenses – The costs of education, exclusive of tuition, such as fees, books, supplies, clinical travel, educational equipment and materials, and board, certification/licensing exams, which do not exceed the school's estimated standard student budget for educational expenses for the participant's degree program and for the year(s) of that participant's enrollment. **Debt associated with residency programs or relocation is not considered "reasonable educational expenses" under the NHSC S2S LRP.**

Reasonable Living Expenses – The costs of room and board, transportation and commuting costs which do not exceed the school's estimated standard student budget for living expenses at that school for the participant's degree program and for the year(s) of that participant's enrollment.

Debt associated with residency programs or relocation is not considered “reasonable living expenses” under the NHSC S2S LRP.

Rural Health Clinic (RHC) – A facility certified by the Centers for Medicare and Medicaid Services under section 1861(aa)(2) of the Social Security Act that receives special Medicare and Medicaid reimbursement. RHCs are located in a non-urbanized area with an insufficient number of health care practitioners and provide routine diagnostic and clinical laboratory services. RHCs have a nurse practitioner, a physician assistant, or a certified nurse midwife available to furnish patient care services not less than 50 percent of the time the clinic operates. For more information, view the [Rural Health Clinic Fact Sheet](#).

School – A public or private institution (including home schools), providing instruction to children of compulsory school age in kindergarten, grades 1-12, or their equivalent. The operation and administration of the school must meet applicable federal, state and local laws, and services provided by NHSC participants in a school must be an extension of the comprehensive primary care provided at the NHSC-approved site.

School-Based Clinics – A part of a system of care located in or near a school facility of a school district or board or of an Indian tribe or tribal organization; organized through school, community, and health provider relationships. This facility provides - through health professionals - primary health services to school aged children and adolescents in accordance with state and local law, including laws relating to licensure and certification. In addition, this site satisfies such other requirements as a state may establish for the operation of such a clinic.

Solo or Group Private Practice – A clinical practice that is made up of either one or many providers in which the providers have ownership or an invested interest in the practice. Private practices can be arranged to provide primary medical, dental and/or mental health services and can be organized as entities on the following basis: fee-for-service; capitation; a combination of the two; family practice group; primary care group; or multi-specialty group.

Spouse and Marriage – As used in this *Guidance* and for the purposes of the National Health Service Corps, “spouse” includes same-sex married couples as well as opposite-sex married couples. In accordance with the Supreme Court decisions in *United States v. Windsor* and in *Obergefell v. Hodges*, the Department of Health and Human Services will treat as valid marriages of same-sex couples. The term “spouse” does not include individuals in registered domestic partnerships, civil unions or similar formal relationships recognized under state law as something other than a marriage.

State – As used in this *Guidance*, state includes the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, Territory of American Samoa, Territory of Guam, Republic of Palau, Republic of the Marshall Islands, and Federated States of Micronesia.

Teaching – As used in this *Guidance*, teaching is providing clinical education to students or residents in their area of expertise at the NHSC-approved site. The clinical education may: (1) be conducted as part of an accredited clinical training program; (2) include the clinical supervision of a student/clinician that is required in order for that student/clinician to receive a license under state law; or (3) include mentoring through a structured program, such as the Centers of Excellence program or the Health Careers Opportunity Program. Teaching must be conducted at the NHSC-approved practice site specified in the [BHW Customer Service Portal](#) Profile. If the NHSC participant is actually providing the clinical service while a student/clinician observes, the activity should be treated as patient care.

Teaching Health Center – A Teaching Health Center (THC) is an entity that (1) is a community based, ambulatory patient care center and (2) operates a primary care postgraduate training program (i.e., an approved graduate medical residency program in family medicine, internal medicine, pediatrics, internal medicine-pediatrics, obstetrics and gynecology, psychiatry, general dentistry, pediatric dentistry, or geriatrics). Currently funded THCs are listed on the data.HRSA.gov website.

Tribal Health Program – An Indian tribe or tribal organization that operates any health program, service, function, activity, or facility funded, in whole or part, by the Indian Health Service (IHS) through, or provided for in, a contract or compact with the IHS under the Indian Self-Determination and Education Assistance Act (25 U.S.C. 450 et seq.).

Unencumbered License – An unencumbered license means a license that is not revoked, suspended, or made probationary or conditional by the state licensing authority as the result of disciplinary action.