

641—110.16(135) Purpose. A primary care provider loan repayment program is established to increase the number of health professionals practicing primary care in federally designated health professional shortage areas of the state. If sufficient state funds are available, applications will be considered for loan repayment for primary care providers practicing in communities not located in federally designated shortage areas. Under the program, loan repayment may be made to a recipient for educational loans incurred while completing an accredited health education program directly related to obtaining credentials necessary to practice the recipient's health profession. Notice of the availability of these public funds shall be published in the Iowa Administrative Bulletin in accordance with 641—Chapter 176.

110.16(1) Health care professional eligibility. The following requirements must be met by health care professionals in order to be eligible for the program:

a. The status of the health care professional's citizenship must meet requirements of the National Health Service Corps loan repayment program.

b. The health care professional must be licensed or certified to practice in the state of Iowa as a primary care health professional as defined in 641—110.2(135) and approved by the state for purposes of program priorities and requirements. Physicians must have completed a primary care residency and be board-eligible or board-certified.

c. The health care provider must possess evidence of a contractual agreement to practice full time at a site in a designated shortage area within the state and approved by the state for the minimum number of years required by federal programs providing support for the program.

d. The health care provider shall provide one year of obligated service in exchange for each year of loan repayment, unless federal requirements otherwise require.

e. The health care provider must agree to comply with all contract provisions and the rules and regulations as promulgated by the department.

f. The health care provider must possess a license that is not restricted by a medical regulatory authority of any jurisdiction of the United States, other nations, or territories.

g. The health care professional must be eligible under Section 338B of the Public Health Service Act as amended November 16, 1990, by Public Law 101-597.

h. The health care provider must agree to provide full-time primary health care services at a clinical site in a designated health professional shortage area.

i. The health care provider must agree not to discriminate on the basis of the ability of the individual to pay for such care or on the basis that payment for such care will be made pursuant to the program established in Title XVIII (Medicare) of the Social Security Act, or pursuant to the program established in Title XIX (Medicaid) of such Act.

j. The health care provider must agree to accept assignment under Section 1842(b)(3)(B)(ii) of the Social Security Act for all services for which payment may be made under Part B of Title XVIII and to enter into an appropriate agreement with the state agency that administers the state plan for medical assistance under Title XIX of such Act to provide service to individuals entitled to medical assistance under the plan.

k. The health care provider must complete an application form provided by the Iowa department of public health.

110.16(2) Site eligibility. The following requirements must be met in order to be eligible for placement of a health professional qualified under the PRIMECARRE loan repayment program:

a. The site must be located in a designated health professional shortage area in the state.

b. The site must agree to accept Medicare/Medicaid assignment.

c. The site must have a sliding fee schedule in place that is based upon the ability to pay.

d. The site must have completed a community health services assessment and adopted a long-term developmental plan.

e. The site must be part of a system of care. For the purpose of receiving federal assistance, a system of care is defined as a service continuum that includes comprehensive primary care for all regardless of ability to pay, and appropriate arrangements for secondary and tertiary care, including a referral system and arrangements for call coverage.

f. The site must complete an application form provided by the department.

g. The site must agree to report to the department those individuals unable to fulfill the contract.

110.16(3) *Federal grant requirements.* Use of federal grant dollars for loan repayment contracts requires that eligibility be determined as authorized by federal grant requirements.

110.16(4) *Funding limitations.* Loan repayment contracts provided under this program shall be determined annually, based upon the legislative appropriation for the PRIMECARRE initiative and other sources of funds.

110.16(5) *Other sources of funds.* The department of public health shall seek participation in federal programs supporting repayment of loans of health care providers and acceptance of gifts, grants, and other aid or amounts from any person, association, foundation, trust, corporation, governmental agency, or other entity for the purposes of the program.

110.16(6) *Review process.* The department of public health shall establish a review committee which will review all applications and make recommendations for loan repayment contracts. The department shall provide the review committee with a methodology for prioritization of federal shortage areas and eligible nonfederal shortage areas to be utilized in the application review process. The department shall provide the review committee with the criteria and scoring methodology to be used in reviewing the applications, in accordance with 641—Chapter 176. Evaluation criteria will include the applicant's outstanding educational loans and professional credentials.

110.16(7) *Contract oversight and administration.* The department of public health shall establish and enforce the terms of the contract, including implementation of any methods, e.g., legal action, that may be necessary to recoup loan repayment funds in the event of failure on the part of a program recipient to fulfill the terms and conditions of the contract. The department shall take into consideration mitigating circumstances which may prohibit a recipient from fulfilling the recipient's contractual obligation or for whom fulfilling the obligation would cause undue hardship. The department of public health shall also provide for cancellation of contracts for reasonable cause to be determined by the department, unless federal requirements otherwise require.

110.16(8) *Appeals.* Applicants with a denied request for loan repayment funding may appeal the decision of loan repayment awards. The appeal shall be made in writing to the director, Iowa department of public health, within 10 days of the notification date of the loan repayment awards decision. The appeal shall be mailed by certified mail, return receipt requested, or delivered by personal service. The decision of the director of public health becomes the department's final action and shall be sent by certified mail, return receipt requested, or delivered by personal service within 14 days of the receipt of the appeal.

[ARC 4076C, IAB 10/10/18, effective 11/14/18]