A User’s Guide to Federal Health Professional Shortage Area and Medically Underserved Area/Population Designations in Oregon

and Frequently Asked Questions Regarding the Impact of Designations on Communities’ Efforts to Support People Being Healthy

Updated—July 2013

Oregon Primary Medical Care Health Professional Shortage Area (HPSA) Designations as of 1/22/2013

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**Introduction**

Many rural communities and specific population groups in Oregon do not have an adequate number of health care providers to serve their needs. This not only affects access to routine care, but substantially impacts the health of many in our state. As a result of national shortages of primary medical, dental and mental health providers, Congress and state legislators created many programs, some of which include financial incentives, to increase access to care. A Health Professional Shortage Area (HPSA) and Medically Underserved Area or Population (MUA/P) designation is used by many federal programs to qualify for resources to assist the situation.

In Oregon, the Oregon Primary Care Office (PCO) is charged with reviewing applications for HPSA Designations and reviewing these existing designations every three years. We work with local partners and health jurisdictions to obtain data needed to submit requests for HPSA Designations to the federal government. We also offer education on shortage areas and other programs that increase access to care in underserved and rural areas.

**Health Professional Shortage Areas**

HPSAs may be designated as having a shortage of primary medical care, dental or mental health providers. They may be urban or rural areas, population groups or medical or other public facilities.

The shortage area requirements can be complex. An area can have a county or partial-county designation. Qualifications are typically met if the population-to-provider ratio exceeds a required threshold (for example: 3,500 people for every Full-Time Equivalent primary care physician for Primary Medical Care), and if care is not available or are beyond capacity in the surrounding areas. The rules clearly outline which data to use, how to draw boundaries and how to verify if nearby resources are beyond capacity. Additionally, certain types of facilities are eligible for designation and population groups within a geographic area can receive a Designation.

**Health Professional Shortage Areas are available for the following disciplines:**

- Primary medical care;
- Primary dental care; or
- Mental health care (psychiatrists only).

**Five distinct types of designations are available:**

- **Geographic**: the entire population in the designated area is identified as underserved and resources are considered over-utilized.
- **Population**: an underserved population identified within a specific area. Eligible populations include:
  - Low-income: there must be at least 30% of the population at or below 200% of the Federal Poverty Level.
  - Migrant farmworkers: migrant farmworkers and their non-farm working family members.
  - Native Americans: American Indians or Alaska natives that are not part of a group that is already automatically designated.
  - Other populations that face access barriers due to language, cultural or disability barriers.
- **Facility**: a facility that may or may not be in a designated area, but that serves residents located from a shortage area.
- **Federal and state correctional facilities** that are considered either a maximum- or medium-security facility.
- **Federally recognized tribes**.

**Medically Underserved Area or Population (MUA/P)**

Medically Underserved Areas (MUAs) may be a whole county or a group of contiguous counties, a group of county or civil divisions or a group of urban census tracts in which residents have a shortage of personal health services. Medically Underserved Populations (MUPs) may include groups of persons who face economic, cultural or linguistic barriers to health care. An underserved area or population is only available for primary medical care. Unlike HPSAs, which expire after three years unless re-approved, these do not expire. Qualifications are determined on a somewhat complex index value that includes the infant mortality rate, the poverty rate, the percentage of elderly and the primary care physician-to-population ratios. (See [http://bhpr.hrsa.gov/shortage/muaps/index.html](http://bhpr.hrsa.gov/shortage/muaps/index.html) for specific calculations of the indexes that are required.)

**Shortage Area and Underserved Area/Population Benefits**

There are over 30 federal and state programs that use HPSA designations to establish initial eligibility. The following table summarizes requirements for some of the major programs used in our state. Each of the programs has additional requirements. Follow the links under the program title or review the Appendix at the end of this document to learn more.
### Table 1: Programs that use Designations to Establish Eligibility

<table>
<thead>
<tr>
<th>Program</th>
<th>Designation Type Required or Helpful</th>
<th>Health Professional Shortage Area</th>
<th>Medically Underserved Area/Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Federally Qualified Health Center</td>
<td>Any are helpful</td>
<td>Required</td>
<td></td>
</tr>
<tr>
<td>New Rural Health Clinic</td>
<td>Primary Care</td>
<td>Any</td>
<td></td>
</tr>
<tr>
<td>J-1 Visa Waiver Program</td>
<td>Primary Care*</td>
<td>Whole County</td>
<td></td>
</tr>
<tr>
<td>HPSA Medicare Bonus Payments</td>
<td>Geographic Primary or Mental Health Care**</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>National Health Service Corps</td>
<td>Provider specific*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>State Loan Repayment and Scholarship</td>
<td>Helpful</td>
<td>Helpful</td>
<td></td>
</tr>
</tbody>
</table>

* There are some requirements to serve the designated population
**Must be listed on the CMS HPSA/PSA website [http://www.cms.hhs.gov/hpsapsaphysicianbonuses/](http://www.cms.hhs.gov/hpsapsaphysicianbonuses/)

### How do I get my area Designated?

1. Identify the area that you want designated
2. Determine the provider Full-Time Equivalents (FTEs) in direct patient care and the population-to-provider ratio for your area.
3. Verify that your area is at least 20 miles or 30 minutes from another source of care that is accessible to the population.
4. Make sure to have determined your nearest source of Undesignated care
5. Contact the Oregon Primary Care Office to review and submit a HPSA designation application.

### Technical Assistance from the Primary Care Office

You may contact the Primary Care Office at any stage of this process while you are gathering data. We can:

- provide technical assistance and other tools to help collect data.
- conduct assessments on what options are available.
- work with communities to determine the best designation strategy.
- prepare requests and updates for review.
- follow up on the application submission.
- notify those affected by any changes in the designation status.
- educate health care providers and the public on any changes in the federal rules or state programs and services to determine their impact on rural communities.
Please contact Meadow Martell at (541) 287-0098 or email meadowm@frontiernet.net for more information.

The Federal Designation Branch (Office of Shortage Designation) administers the programs around Designations. Their role includes setting the rules and procedures, and review and approval of all requests. They do not rule on whether or how a specific program uses the shortage area designation to establish eligibility. Eligibility requirements for federal programs are established by Congress and administered by federal agencies.

You can contact the Federal Designation Branch at:
Office of Shortage Designation
Health Resources and Services Administration
5600 Fishers Lane
Parklawn Building, Room 9A-18
Rockville, Maryland 20857
301-594-0816 (Office number)
1-888-275-4772 (General information.)
301-443-4370 FAX
http://bhpr.hrsa.gov/shortage/

How long will it take to complete the review?
The length of time it will take to complete the review can vary. First, there is the review by the Primary Care Office. The speed of the process is impacted by local interest, provider participation and available staff resources within our office. The renewal process should begin 8 to 12 months before the HPSA designation expires to ensure it is completed by the deadline. It generally takes our office 2 to 6 weeks after all of the data is received to complete the designation requests.

The federal review process can take 3 to 5 months to complete once the request has been submitted by the Oregon PCO. An approval letter is sent to our office once the designation is approved. All designations are also posted on their website, but there is a lag time between the letter and the posting online. We notify affected organizations of any changes in status as soon as the information becomes available. Please be sure to check eligibility requirements when applying for any programs. Some programs do require that the information be posted online.

When will my facility be eligible for the benefits that come from Designation?
Designations bring in more than $50 million in federal dollars to Oregon communities, clinics and providers to help address the health care workforce shortages experienced by people in Oregon. Here are some of the benefits available:
Medicare Bonus Payments for Providers in Geographic HPSAs
These bonus payments begin January 1 of the year following the HPSA Designation being published in the Federal Register. The Medicare Bonus Payment program requires that the designation is listed on the CMS HPSA/PSA website http://www.cms.hhs.gov/hpsapsaphysicianbonuses/. Payment will be made automatically for whole county Geographic designations. Areas with partial-county designations may need to bill using the appropriate billing code.

Bureau of Clinician Recruitment and Service (BCRS) Programs (including NHSC)
The benefit of having Loan Repayment for approved Clinicians is effective from the date of the approval letter. Important to note: NHSC uses the HPSA score as a primary factor when determining awards. Scores of 14 or above are generally required for an award in the Loan Repayment Program (this varies from year to year, along with funding availability), while 16 and above is currently required for placement of an NHSC Scholar.

Rural Health Clinic Certification
The benefits begin as soon as the clinic is certified. Designations are automatically withdrawn if an update is not submitted by October of the fourth year from the approval date. Areas will continue to be eligible for these programs while renewal requests are under federal review.

Is my facility located in a Designated HPSA?
There are several ways you can easily determine this. The most simple is to go to HRSA’s website at http://hpsafind.hrsa.gov/ and search by the facility address. You can also check the CMS HPSA/PSA website at http://www.cms.hhs.gov/hpsapsaphysicianbonuses or contact our office if the approval date of the Designated HPSA or MUA/P is within three years, or if there is a notation in the column headed “Application to HRSA” to verify there is a current designation.

The designation tables on the CMS site include the Federal ID number for the HPSA and the score as well as the location information. The Federal ID number needs to be provided when grants or programs ask for a designation or an ID number.
Appendix 1

PROGRAMS USING FEDERAL HEALTH PROFESSIONAL SHORTAGE AREA (HPSA) DESIGNATION TO QUALIFY

Over 30 federal programs consider federal shortage designations in qualifying criteria. This appendix lists key programs.

National Health Service Corps (NHSC): provides for assignments of federally employed and/or service-obligated physicians, dentists, and other health professionals. The program also provides scholarship and loan repayments to health professionals who agree to serve in the NHSC in HPSAs. Practice sites for NHSC must meet other conditions including offering a sliding-fee-scale. For more information on site requirements contact the Meadow Martell at (541) 287-0098. For general information, call National Health Service Corps hotline (1-800-221-9393) or check their website at [http://nhsc.hrsa.gov](http://nhsc.hrsa.gov).

Area Health Education Center Program: gives special consideration to centers that would serve HPSAs with higher percentages of underserved minorities; gives funding priority to centers providing substantial training experience in HPSAs. For further information, call (503) 494-3986.

Rural Health Clinics Program: provides enhanced Medicare and Medicaid reimbursement for services provided by physician assistants and nurse practitioners in clinics in rural HPSA's, MUA's. For information on applying for Rural Health Clinic status contact the Office of Rural Health, (503) 494-4450, or visit the [Oregon Office of Rural Health website](http://www.ohr.org).

Medicare Incentive Payment For Physician's Services Furnished In HPSA's: (Public Law 100-203, Section 4043, as amended): Centers for Medicare & Medicaid Services (CMS) gives a 10% bonus payment to physicians providing Medicare-reimbursable services within geographic HPSA's. This payment does not apply to population group HPSA's. For more information, call Medicare Provider Enrollment at (515) 974-6890 or the Noridian HPSA Bonus Payment Website. [http://www.cms.gov/hpsas/physicianbonuses/](http://www.cms.gov/hpsas/physicianbonuses/).

Medicare Reimbursement for Teleconsultations: Teleconsultations originating in non-metropolitan counties or in primary care geographic HPSA's in a metropolitan county. To learn how to participate, call the Medicare Provider Call Center at (701) 277-6782 and choose Option 2.

Public Health Service Grant Programs: HRSA's Bureau of Health Professions offers several programs designed to encourage health professional training. Funding preference is given to efforts in HPSA's and MUA/MUP's. For more information check out their website at [http://www.hrsa.gov/grants/index.html](http://www.hrsa.gov/grants/index.html) or call the HRSA Seattle Field Office at (206) 615-2636.

Federally Qualified Health Centers: (FQHC) grant funds are legislatively required to serve areas or populations designated by the Secretary of Health and Human Services as medically underserved. Grants for the planning, development, or operation of community health centers under section 330 of the Public Health Service Act are available only to centers that serve designated MUA's or MUP's. For more information contact the Primary Care Office at (503-373-1779) or visit our website.

Federally Qualified Health Centers Look-Alikes: Systems of care which meet the definition of a Federally Qualified Health Center contained in Section 330 of the Public Health Service Act, but are not funded under that section, and are serving a designated MUA or MUP, are eligible for certification as a Federally Qualified Health Center (FQHC). This allows for cost based reimbursement of services to Medicaid eligible. For more information contact the Primary Care Office at (503-373-1779) or visit our website.
Appendix 2

Primary Care HPSAs

Oregon Primary Medical Care Health Professional Shortage Area (HPSA) Designations as of 1/22/2013

Created by Sata Hackenbruck, Oregon Health Policy and Research, 1/22/2013
Appendix 3

Dental Care HPSAs

Oregon Dental Care Health Professional Shortage Area (HPSA) Designations as of 1/22/2013

Created by Sara Hackenbruck, Oregon Health Policy and Research, 1/22/2013
Appendix 4

Dental Care HPSAs

Oregon Mental Care Health Professional Shortage Area (HPSA) Designations as of 1/22/2013

- Geographical HPSA
- Low Income - Homeless
- Low Income - Migrant and Seasonal Farmworkers
- Not Designated
- Migrant and Seasonal Farmworkers
- Low Income - Migrant and Seasonal Farmworkers - Homeless

Created by Sata Hackenbruck, Oregon Health Policy and Research, 1/22/2013
Appendix 5

Map of Medically Underserved Areas/Populations

Oregon Medically Underserved Areas & Populations (MUA/MUP), as of 11/29/2011

Data Source: Health Resources & Services Administration (HRSA), Bureau of Health Professionist
Prepared By: Oregon Health Policy and Research 11/29/2011