

Readoption Review

Health Care Professional Recruitment and Retention Program 410 IAC 23-2

IC 4-22-2.5-3.1(c) requires an agency to conduct a review to consider whether there are alternative methods of achieving the purpose of the rule that are less costly or less intrusive, or that would minimize the economic impact of the proposed rule on small business.

Description of Rule:

The Health Care Professional Recruitment and Retention Program rule establishes a fund, its administration and criteria for eligibility for payment of primary care provider medical student loans for those practitioners who commit to practicing in health professional shortage areas for three years.

Readoption Analysis:

1) Is there a continued need for this rule? Please explain.

Yes, there is a continued need for the rule in order for the Indiana State Department of Health (ISDH) to fund and carry out a loan repayment program for primary care physicians for the following reasons:

- Indiana currently ranks 38th out of 50 states for primary care physicians per 100,000 (<https://www.aamc.org/download/152124/data/indiana.pdf>), therefore we are in great need of programs that will attract this over-extended workforce category.
- 410 IAC 23-2 allows ISDH to administer a 50/50 state/federally funded program that stipulates only primary care physicians practicing in underserved areas are eligible for loans repayment. Health Care Professional Recruitment and Retention Program serves to recruit as well as retain physicians who have *completed* their training and will be willing to *locate* OR stay in Indiana. Further, the Recruitment and Retention Program stipulates its grantees practice in *underserved* urban and rural areas which most physicians bypass when choosing a practice site.
- The Affordable Care Act has increased patient loads country-wide and is threatening to over-burden Indiana Community Health Centers (CHCs) located in medically underserved and health professional shortage areas. Most of the CHCs that ISDH supports have increased their patient populations by 30% over the last 2 years. As you know, CHCs are located in underserved areas and have continuous staffing challenges for the physicians they employ. One way the state can help is by offering the State Loan Repayment Program as a recruitment tool.

2) What is the nature of any complaints or comments received from the public, including small business, concerning the rule or the implementation of the rule by the agency?

No complaints have been received.

3) Examine the complexity of the rule, including difficulties encountered by the agency in administering the rule and small businesses in complying with the rule.

- The agency, ISDH will be required to assess applicants and the medical sites in which they are or are proposing to practice to ensure they qualify for assistance. Difficulties may arise when applicants decline assistance in favor of the federal National Health Service Corps Loan Repayment Program (NHSC). In order for the State Loan Repayment Program to receive matching federal funds, it must not provide greater benefits than the NHSC provides. This sometimes leads to applicants dropping applications if they also qualify for the NHSC program. This could result in wasted state time processing applications.
- Small business will not have to comply with the rule, rather people they may employ will have to comply with grant agreement requirements if they qualify and receive assistance from the State Loan Repayment Program.

4) To what extent does the rule overlap, duplicate, or conflict with other federal, state, or local laws, rules, regulations, or ordinances?

The proposed rule allows for concurrence with federal guidelines that allow for eligible part-time providers to receive assistance, and for providers to receive assistance immediately upon locating in a shortage area. The rule does not duplicate but complements IC 21-13-9 the Primary Care Shortage Area Scholarship Program administered by the Commission on Higher Education for Marian University College of Osteopathic Medicine medical students only.

5) When was the last time the rule was reviewed under this section or otherwise evaluated by the agency, and the degree to which technology, economic conditions, or other factors have changed in the area affected by this rule since that time?

In February 2013, 410 IAC 23-2-10 was amended by adding 410 IAC 23-2-14 to update the requirements for the Health Care Professional Recruitment and Retention Program, to clarify part-time services under the rule, and to comply with IC 16-46-5-9 and federal laws and regulations as set forth in Section 338B of the Public Health Service Act (42 U.S.C. 2541-1), as amended, and Section 331(i) of the Public Health Service Act (42 U.S.C. 254d(i)), as amended.

Since the last review, the Affordable Care Act has increased the demand for primary care physicians, thereby increasing the need for the Health Care Professional Recruitment and Retention Program.