NORTH DAKOTA HEALTH PROFESSIONALS ASSISTANCE PROGRAMS

A STUDY FOR THE NORTH DAKOTA STATE LEGISLATURE
HOUSE BILL NO. 1036
MARCH 12, 2015

PREPARED BY
KAROL K RIEDMAN CPA, CIA
CHIEF AUDIT EXECUTIVE
FEBRUARY 16, 2016

600 E BOULEVARD AVE.
DEPT 301
BISMARCK, ND 58505-0200
# Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive Summary</td>
<td>3</td>
</tr>
<tr>
<td>Introduction to the Study</td>
<td>6</td>
</tr>
<tr>
<td>Identification of State Programs</td>
<td>13</td>
</tr>
<tr>
<td>Consideration of Standardizing Elements</td>
<td>13</td>
</tr>
<tr>
<td>Evaluation of Funding and Usage</td>
<td>16</td>
</tr>
<tr>
<td>Evaluation of Effectiveness</td>
<td>18</td>
</tr>
<tr>
<td>Consideration of Possible Gaps or Duplications</td>
<td>23</td>
</tr>
<tr>
<td>Alternative Assistance Programs</td>
<td>25</td>
</tr>
<tr>
<td>Summary and Conclusions</td>
<td>29</td>
</tr>
<tr>
<td>Appendix A: NDCC Chapter 43-12.3</td>
<td>30</td>
</tr>
<tr>
<td>Appendix B: NDCC Chapter 43-28.1</td>
<td>33</td>
</tr>
</tbody>
</table>
EXECUTIVE SUMMARY

On March 12, 2015, the North Dakota State Legislature approved House Bill No. 1036, which provides for the State Department of Health to study health professional assistance programs and report back to legislative management the following information:

1. Identification of state programs to assist health professionals:
   a. State loan repayment programs include: Dentists Loan Repayment Program, Health Care Professional Student Loan Repayment Program and Department of Human Services Non-Profit Clinic Dental Access Project.
   b. Other state programs which provide assistance to health care professionals include Department of Commerce Workforce Development Program, Bank of North Dakota Addiction Counselor Internship Loan Program and Professional Student Exchange Program (WICHE)

2. Consideration of whether elements of the identified state programs could be standardized:
   a. Several attributes of the Dentists Loan Repayment Program and the Health Care Professional Student Loan Repayment Program differ, and would need to be reconciled before standardization, including amount and timing of award payments, description of priority and preference in applicant criteria, community match requirement, required years of service obligation, and penalty for failing to fulfill this requirement (see Table 2).
   b. Simplifying and combining these programs into a single State Loan Repayment Program would save administrative time and costs, and provide continuity between assistance programs for various healthcare professions.

3. Evaluation of funding and usage of the identified state programs:
   a. During the last three biennia, funding budgeted for these programs has increased to the current level of $720,000 for dentists and $698,800 for health care professionals. The funding is well utilized each biennium, but never totally expended due to timing differences and unique circumstances. (see Table 3).
   b. Both programs are well-utilized with all positions being filled nearly all years. See Table 4 for details of applications and awards per year.

4. Evaluation of the effectiveness of these identified programs and how these programs could be revised to be more effective.
The goal of the health care professional assistance programs is to provide health care services in rural and underserved communities in North Dakota. For this study, “effectiveness” is defined by three questions:

a. Have we provided health care/dental professionals in underserved communities? Effective. (See Table 4)

b. Have those health care/dental professionals fulfilled their contracts, and stayed in the community for the required years of service? Effective (See Table 5)

c. Have the health care/dental professionals remained in the community after their commitment was fulfilled? Moderately effective; 61.63% (See Table 6)

5. Consideration of whether there are gaps or duplication in programs designed to assist health professionals.

a. Possible gaps in these programs’ coverage would include the consideration of other types of health care professions which could be eligible.

b. There do not appear to be any duplicative state programs, with the possible exception of the Department of Human Services Non-Profit Dental Access Project, which also provides student loan repayment for dentists. However, this project is structured as a grant to the non-profit clinic, who then selects candidates for the loan repayment program, so continuing this program as it is currently structured would require it remain separate from the programs in question.

Possible legislation which could be proposed may include simplifying the programs by removing inconsistent terms, and combining them into a single loan repayment program, as well as considering the addition of more eligible health care professions.
On March 12, 2015, the North Dakota State Legislature approved House Bill No. 1036: AN ACT to provide for the state department of health to study health professional assistance programs and report to the legislative management.

BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

Section 1. State Department of Health Study – Health Professional Assistance Programs – Report to Legislative Management.

1. During the 2015-16 interim, the state department of health shall evaluate the state programs to assist health professionals, including behavioral health professionals, with a focus on state loan repayment programs for health professionals. The study must include:
   a. Identification of state programs to assist health professionals;
   b. Consideration of whether elements of the identified state programs could be standardized;
   c. Evaluation of funding and usage of the identified state programs;
   d. Evaluation of the effectiveness of these identified programs and how these programs could be revised to be more effective; and
   e. Consideration of whether there are gaps or duplication in programs designed to assist health professionals.

2. During the 2015-16 interim the state department of health shall make periodic reports to the legislative management on the status of the study. Before July 1, 2016, the state department of health shall report to the legislative management on the outcome of the study, including presentation of recommended legislation. The legislative management may introduce legislation recommended by the state department of health as part of the department’s study report.

Senator Judy Lee further clarified the intent of the committee was to study state assistance programs for health professionals that treat human patients, to distinguish from programs assisting veterinarians and other types of health care professionals.

The department of health, with the authorization of the audit committee of the State Health Council, requested the study be performed by Karol Riedman, CPA. Riedman is the chief audit executive of the Office of Internal Audit at the Department of Health, so is independent of the Primary Care Office which oversees the programs that will be addressed in the study.
IDENTIFICATION OF STATE PROGRAMS

State Loan Repayment Programs

The 64th Legislative Assembly passed two bills that changed the laws regarding loan repayment programs for medical health professionals and dentists, replacing the programs that had been in effect for the prior six to 14 years. This study includes the prior loan repayment programs’ historical data, as there is no data yet available on the 2015 programs. The current programs are described below, along with the prior programs that were replaced.

Dentists Loan Repayment Program—current

The 64th Legislative Assembly passed Senate Bill 2205, which revised the Dentists Loan Repayment Program, NDCC Chapter 43-28.1. The current program includes the following criteria and terms:

1. Dentists selected for this program must practice in an area the state health council designates as an underserved area, or an underserved population. Priority is given to sites or clinics in the following categories:
   a. A public health clinic, a practice with a focus on an underserved population, or a nonprofit dental clinic;
   b. Dentists trained in general or pediatric dentistry or in a dental specialty where such services are needed in the identified city or area; and
   c. Clinics located in a federally designated Health Professional Shortage Area (HPSA) or a state-defined critical shortage area.

2. Applicants selected for the program must meet the following eligibility requirements:

   The applicant must:
   a. Accept Medicare and Medicaid patients;
   b. Be fully licensed to practice in North Dakota; and
   c. Be employed full-time (defined as 40 hours per week) providing direct patient care in the appropriate settings, administrative duties (not to exceed 8 hours per week) and/or serving as a clinical preceptor during the contract period.
Priority is given to applicants that provide dental services in a public health clinic, or practice with a focus on an underserved population, or a non-profit dental clinic.

Preference is given to applicants in the following categories:

a. Residents of the State of North Dakota;

b. Dentists practicing within a federally designated Health Professional Shortage Area or a state-defined critical shortage area; and

c. Dentists who are available beginning July 1 of the contract year.

Dentists selected for loan repayment who practices within fifteen miles of the city limits of one of the three largest cities in the state must:

a. Receive dental medical payments of at least $20,000 in the form of medical assistance reimbursement, or

b. Practice at least two full workdays per week at a public health clinic or a nonprofit dental clinic that uses a sliding fee schedule for patient billing.

3. The maximum loan repayment is the total of outstanding student loans, up to $100,000 per applicant. Loan repayment funds for each year of service must be paid no later than the end of the fiscal year during which the dentist completes the year of obligated service. The dentist must complete at least six months of obligated service before any payment can be made.

4. The dentist is required to perform five years of obligated service under this contract. If the dentist breaches the contract (by leaving the program or designated underserved area before the five years are served), he is required to repay 100% of any loan repayment funds received.

**Dentists Loan Repayment Program-prior**

Before the 2015 revision, there were three loan repayment programs available to dentists. Terms and requirements that are materially different from the current program are as follows:

1. Dentists Loan Repayment Program (2001)

   a. Maximum loan repayment is the total of outstanding student loans, up to $80,000 per applicant.

   b. Time of obligated service is four years.

   c. Specific priority criteria were set for communities by population.
d. Since 2001, 37 applicants have received loan repayment funds under this program.

   a. The purpose of this program was to assist dentists who are setting up a new practice in an underserved area.
   b. Maximum loan repayment is the total of outstanding student loans, up to $25,000 per applicant, paid evenly over the five year service requirement.
   c. The community provides a 50% match.
   d. Eligible communities must have a population of 7,500 or less.
   e. The law did not address the penalty for breaching the contract or leaving before the obligated years of service are completed.
   f. Since 2007, one applicant has received loan repayment funds under this program.

3. Dentists Public Health/Nonprofit Clinic (2009)
   a. The purpose of this program was to assist dentists who are practicing solely in a public health or nonprofit clinic using a sliding fee scale.
   b. Maximum loan repayment is the total of outstanding student loans, up to $60,000 per applicant, which must be paid during the first two years of service.
   c. There is no restriction on the community, if the clinic meets its requirements.
   d. Since 2009, four applicants have received loan repayment under this program.

Health Care Professional Student Loan Repayment Program-current

The 64th Legislative Assembly passed House Bill 1396, which established the Health Care Professional Student Loan Repayment Program, NDCC Chapter 43-12, and repealed chapters 43-12.2 and 43-17.2. Health care professions included in this program are physicians, clinical psychologists, advanced practice registered nurses and physician assistants (Mid-Level Practitioners), and behavioral health professionals, including licensed addition counselors, licensed professional counselors, licensed social workers,
registered nurses, and specialty practice registered nurses. The current program includes the following criteria and terms:

1. Health care professionals selected for this program must practice in an area the state health council designates as an underserved area, or an underserved population. Eligible sites must provide a community match, assigned by discipline, and priority is given to sites or clinics with the following attributes:

   a. Are located in a federally designated Health Professional Shortage Area or a state defined critical area;

   b. Are located at least 20 miles outside the boundary of a city having more than forty thousand residents; and

5. Applicants selected for the program must meet the following eligibility requirements:

The applicant must:

   a. Accept Medicare and Medicaid assignments

   b. Have earned the appropriate degree required by the discipline (see below), and be fully certified and licensed to practice in North Dakota;

   c. Be employed full-time (defined as 40 hours per week) providing direct patient care in the appropriate settings, including administrative duties (not to exceed 8 hours per week) and/or serving as a clinical preceptor, as applicable, during the contract period; or

   d. Telehealth providers must provide services on at least a half-time basis, live in North Dakota, be physically present at an entity that meets the site requirements and provide telehealth services to a second entity meeting the site requirements, which combined meet the full-time requirement defined above.

Priority is given to applicants that practice within a federally designated Health Professional Shortage Area (HPSA) or a state defined critical shortage area.

Preference is given to applicants in the following categories:

   a. Length of residency in the State of North Dakota;

   b. Applicants with ties to North Dakota;

   c. Applicants attending/graduating from an in-state institution of higher education; and
d. Applicants who are available beginning July 1 of the contract year

6. The maximum loan repayment is the lesser of the total of outstanding student loans, or a maximum amount determined by profession. (see below). Loan repayment funds for each year of service must be paid to the student loan lender, only at the conclusion of each twelve month period of service. Payments terminate upon the earlier of five years, or full repayment of the applicant’s student loan balance.

Table 1, highlights the specific education requirements, funding and community match requirements for each discipline.
Table 1: Education and Funding for Current State Loan Repayment Programs

<table>
<thead>
<tr>
<th>Profession</th>
<th>Required education</th>
<th>State Funds</th>
<th>Community Match</th>
<th>Maximum Total Award</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physician</td>
<td>Graduated from an accredited medical school</td>
<td>$20,000 per year, up to $100,000 over five years</td>
<td>50% of state funds, up to $50,000</td>
<td>$150,000</td>
</tr>
<tr>
<td>Mid-Level practitioner</td>
<td>Graduated from an accredited training program</td>
<td>$4,000 per year, up to $20,000 over five years</td>
<td>10% of state funds, up to $2,000</td>
<td>$22,000</td>
</tr>
<tr>
<td>Clinical Psychologist</td>
<td>Doctoral degree in clinical or counseling psychology from an accredited program</td>
<td>$12,000 per year, up to $60,000 over five years</td>
<td>25% of state funds, up to $15,000</td>
<td>$75,000</td>
</tr>
<tr>
<td>Licensed addiction counselor</td>
<td>Bachelor’s degree or higher with a minimum of 32 credits in addiction studies</td>
<td>$4,000 per year, up to $20,000 over five years</td>
<td>10% of state funds, up to $2,000</td>
<td>$22,000</td>
</tr>
<tr>
<td>Licensed professional counselors</td>
<td>Master’s degree or higher with major study in counseling from an accredited school</td>
<td>$4,000 per year, up to $20,000 over five years</td>
<td>10% of state funds, up to $2,000</td>
<td>$22,000</td>
</tr>
<tr>
<td>Licensed social workers</td>
<td>Bachelor’s degree from an accredited school</td>
<td>$4,000 per year, up to $20,000 over five years</td>
<td>10% of state funds, up to $2,000</td>
<td>$22,000</td>
</tr>
<tr>
<td>Behavioral Health Registered Nurse</td>
<td>Baccalaureate degree in nursing</td>
<td>$4,000 per year, up to $20,000 over five years</td>
<td>10% of state funds, up to $2,000</td>
<td>$22,000</td>
</tr>
<tr>
<td>Psychiatric Nurse Specialist</td>
<td>Master’s degree in nursing from an accredited program</td>
<td>$4,000 per year, up to $20,000 over five years</td>
<td>10% of state funds, up to $2,000</td>
<td>$22,000</td>
</tr>
</tbody>
</table>
Physician and Mid-Level Practitioner Student Loan Repayment Program—prior

Before the 2015 revision, there were two loan repayment programs available to health care professionals. Terms and requirements that are materially different from the current program are as follows:

1. Physician (MD) Student Loan Repayment program (1991)
   a. Maximum award of $45,000 per applicant.
   b. Two years of service required; if the physician leaves the program before the contract is fulfilled, the penalty is twice the amount of uncredited funds, prorated on a monthly basis.
   c. Required a 50% community match.
   d. Priority given to primary care or psychiatry in a city of 15,000 or less population.

2. Mid-Level Practitioner Student Loan Repayment Program (1993)
   a. Disciplines included Nurse Practitioners, Physician Assistants, and Certified Nurse Midwives
   b. Maximum award of $15,000 per applicant
   c. Two years of service required; if the applicant leaves the program before the contract is fulfilled, the penalty is twice the amount of uncredited funds, prorated on a monthly basis
   d. Required a 50% community match
   e. Priority given to primary care in a city of 15,000 or less population

Other State-funded Health Professional Assistance Programs

Department of Human Services Non-Profit Clinic Dental Access Project

The Non-Profit Clinic Dental Access Project is aimed at increasing access to dental services for Medicaid and CHIP recipients by awarding funds to support the recruitment of additional dentists to serve in non-profit dental clinics with Medicaid and CHIP access and outreach plans. A non-profit dental clinic can qualify for funding to assist a dentist with school loan repayment. The program can fund one fulltime or two halftime positions per year; a part-time dentist may receive $10,000 per year for a maximum of $30,000 over three years, and a full-time dentist may receive up to $20,000 per year for a maximum of
$60,000 over three years. The funding is sent directly to the financial institution servicing the student loan. Bridging the Dental Gap, Bismarck, was awarded this funding and had a new dentist start July 1, 2013, and is now in her third year of the program. Because of this, the clinic was able to extend their service area from a 50-mile radius to a 100-mile radius.

**Department of Commerce: Workforce Development Program**

House Bill 1282 (2015) appropriated $200,000 from the general fund to the department of commerce for the 2015-17 biennium for the purpose of matching funds to an organization assisting in the recruitment, distribution, supply, quality, and efficiency of personnel providing health services in rural areas of the state. Funding in the amount of $400,000 was appropriated for the 2013-15 biennium.

These funds are awarded in the form of a grant to Area Health Education Center (AHEC), an organization whose mission is to improve access to healthcare in rural and medically underserved areas. This is accomplished by forming academic and community partnerships that link the resources to address the healthcare work force needs of rural communities. A key AHEC goal is to interest North Dakota’s youth in health care occupations. This grant is used to fund youth educational activities including Health Scrubs Camps and Academies, Marketplace for Kids, HOSA-Future Health Professionals, and other related career enrichment activities.

**North Dakota Addiction Counselor Internship Loan Program**

The Bank of North Dakota has developed a loan program (per N.D.C.C. 43-45-05.4) for qualified individuals participating in a paid or unpaid internship in addiction counseling located in North Dakota. The applicant limit is $7,500, with a minimum loan of $500. The interest rate must accrue at the Bank’s current base rate, but may not exceed 6.00%.

**Professional Student Exchange Program (PSEP)**

The UND School of Medicine & Health Services participates in the Professional Student Exchange Program administered by the Western Interstate Commission for Higher Education (WICHE), under which legal residents of ten western states without a medical school may receive preference in admission. Certified PSEP students pay resident tuition rates at public institutions or reduced standard tuition at private schools if they are supported by their home state. The home state pays a fee to the admitting institutions to help cover the cost of students’ education.

North Dakota supports PSEP program students to attend out-of-state dentistry, optometry and veterinary schools; programs that are not available within the state. There is no requirement to return to North Dakota after graduation. According to Brenda Zastoupil, NDUS Director of Financial Aid, the program has been successful, and all the available positions are filled virtually every year.
CONSIDERATION OF STANDARDIZING ELEMENTS

The two current State Student Loan Repayment programs are much more standardized than the prior programs had been, but there are still major differences:

1. **Penalty if contract not fulfilled** - The Health Care Professional Student Loan Repayment Program is structured to make the loan payment after each twelve month period. While there is a five year maximum service commitment, there is no penalty for leaving the program. The Dentists Loan Repayment Program requires five years of service, and the penalty for leaving the program before the five years is served, is to repay 100% of the funding that has already been received.

2. **Community Match** - The Health Care Professional program requires a community match of the percentage of funds awarded. State dollars cannot be used to match this state program. The match percentage varies among the various discipline, from 10% to 50%. However, a community match is not required if a provider is starting up a sole practice in a community with less than 15,000 population. Concerns have also been communicated regarding state agencies, such as the State Hospital, who have no source of non-state funds to use for the match. There is no community match requirement for the Dentist program, presumably because dentists more typically start or buy into a private practice, instead of a community hospital or clinic system.

3. **Applicant Priority** – While the applicant requirements are similar between the two programs, each program has a list of priority and preference attributes which differ slightly. The Health Professional program’s priority relates to the area of the practice -- to practice within a HPSA or state-defined critical shortage area, while the Dentist program’s priority is for the applicant to provide services in a public health clinic, a practice with a focus on an underserved population, or a non-profit dental clinic.

4. **Amount of award** – The maximum award for both Physicians and Dentists is $100,000, however, the Physician’s program specifies $20,000 per year over five years, with a maximum of $100,000, The Dentist program does not specify an annual payment, but typically awards up to $20,000 per year. The award amounts in the Health Professionals program differ by discipline, however, this reflects the relative costs of the professional education. The current program reduced the maximum award amount for mid-level practitioners from $30,000 to $20,000.

The following table illustrates the attributes of each program.
Table 2: Comparison of Current State Loan Repayment Programs

<table>
<thead>
<tr>
<th>Program</th>
<th>Health Care Professional Student Loan Repayment Program N.D.C.C. 43-12.3</th>
<th>Dentist Loan Repayment Program N.D.C.C. 43-28.1</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Award amount per year (Maximum)</strong></td>
<td>Physician $20,000 ($100,000)Clinical Psych $12,000 ($60,000)Mid-Level $4,000 ($20,000)Behavioral health $4,000 ($20,000)</td>
<td>Maximum of $100,000 per applicant, paid over five years.</td>
</tr>
<tr>
<td><strong>Years of Service Required</strong></td>
<td>Five year service obligation</td>
<td>Five year service obligation</td>
</tr>
<tr>
<td><strong>Repayment period</strong></td>
<td>Shorter of 5 years or when loan repaid</td>
<td>Shorter of 5 years or when loan repaid</td>
</tr>
<tr>
<td><strong>State payment schedule</strong></td>
<td>Pay annual amount after each 12 months of service</td>
<td>After 6 months of qualifying service, funds are payable over 5 years</td>
</tr>
<tr>
<td><strong>Penalty if contract not fulfilled</strong></td>
<td>No penalty</td>
<td>Repay the entire amount received</td>
</tr>
<tr>
<td><strong>Community Match</strong></td>
<td></td>
<td>No Community Match</td>
</tr>
<tr>
<td>Physician 50%</td>
<td>Clinical Psych 25%</td>
<td></td>
</tr>
<tr>
<td>Mid-Level 10%</td>
<td>Behavioral health 10%</td>
<td></td>
</tr>
<tr>
<td>(Note-If a provider opens a new solo practice in a city &lt;15,000 population, match is $0.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Number of positions</strong></td>
<td>2016-17: Physicians 5, Psychologist 3, Mid-Level 4, Behavioral Health 5</td>
<td>2016-17 : 9 positions</td>
</tr>
<tr>
<td><strong>Community requirements</strong></td>
<td>Designated by State Health Council as an underserved area, geared to an underserved population, or located in a HPSA</td>
<td>Designated by State Health Council as an underserved area, or geared to an underserved population</td>
</tr>
<tr>
<td><strong>Candidate Requirements</strong></td>
<td>Appropriate degree and fully licensed Accept Medicare/Medicaid Employed full-time at a qualifying site</td>
<td>Fully licensed Accept Medicare/Medicaid Employed full-time at a qualifying site</td>
</tr>
<tr>
<td><strong>Applicant priority</strong></td>
<td>Applicants that practice within a federally designated HPSA or a state-defined critical shortage area</td>
<td>Applicants that provide dental services in a public health clinic, a practice with a focus on an underserved population, or a non-profit dental clinic</td>
</tr>
<tr>
<td><strong>Applicant preference</strong></td>
<td>ND Residents Applicants with ties to ND Applicants attending/graduating from a ND institution Available July 1 of the contract year</td>
<td>ND Residents Practicing in a HPSA or state-defined critical shortage area Available July 1 of the contract year</td>
</tr>
<tr>
<td><strong>Budget 2015-17</strong></td>
<td>$698,800 – General Fund</td>
<td>$720,000 total; $360,000 – General Fund $360,000 – Student Loan Trust Fund</td>
</tr>
</tbody>
</table>
EVALUATION OF FUNDING AND USAGE

Funding

The state loan repayment programs are funded at different levels each biennium, through the General Fund and Student Loan Trust fund for 2015-17, previously funded through the Community Health Fund. Table 3 displays details for the last three biennia.

Table 3: Funding for Loan Repayment Programs by Discipline

<table>
<thead>
<tr>
<th>Biennium</th>
<th>Dentists</th>
<th>Physicians/Health Care Professionals</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011-13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Budgeted</td>
<td>$470,000</td>
<td>$420,000</td>
</tr>
<tr>
<td>Expended</td>
<td>$390,000</td>
<td>$291,789</td>
</tr>
<tr>
<td>2013-15</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Budgeted</td>
<td>$725,000</td>
<td>$576,788</td>
</tr>
<tr>
<td>Expended</td>
<td>$602,077</td>
<td>$488,088</td>
</tr>
<tr>
<td>2015-17</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Budgeted</td>
<td>$720,000</td>
<td>$698,800</td>
</tr>
<tr>
<td>Awarded</td>
<td>$120,000</td>
<td>$255,000</td>
</tr>
<tr>
<td>Expended to</td>
<td>$60,000</td>
<td>$0</td>
</tr>
<tr>
<td>date</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Usage

Both the Dental and Health Care Professionals Loan Repayment programs have been successful in receiving applications and filling positions. The programs prior to 2015 had a set number of positions per program, or “as many as funding would allow.” Occasionally, the State Health Council approves filling additional positions if there are additional funds available. The current programs do not have the number of positions set by statute; the number of positions is determined each biennium by the funding available. The first year of the 2015-17 biennium was governed by the prior statute, which allocated positions for three dentists, six physicians and five Mid-Level Practitioners. For 2016-17, the department of health has allotted nine positions for dentists, five for physicians, three for clinical psychologists, four for mid-level practitioners and five for behavioral health professionals.
Applications for positions beginning July 1, 2016 are due March 15, 2016. Data on the current applications is not available, but according to Mary Amundson, UND Primary Care Office, as of February 10, 2016, applications had been received for all qualified disciplines, including behavioral health professionals. Table 4 illustrates the number of applications received and positions filled in each discipline from 2010-2014.

Table 4: History of Loan Repayment Applications Received vs Awarded

<table>
<thead>
<tr>
<th>Year</th>
<th>Dentists</th>
<th>Physicians</th>
<th>Mid-Level Practitioners</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Applications</td>
<td>8</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>Awards</td>
<td>3</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>2011</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Applications</td>
<td>8</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Awards</td>
<td>3</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>2012</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Applications</td>
<td>8</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Awards</td>
<td>3</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>2013</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Applications</td>
<td>8</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Awards</td>
<td>3</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>2014</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Applications</td>
<td>5*</td>
<td>12</td>
<td>4</td>
</tr>
<tr>
<td>Awards</td>
<td>3</td>
<td>7</td>
<td>4</td>
</tr>
</tbody>
</table>

* - One of the initial awardees declined the contract. The contract offered to the next dental applicant, who also declined the contract.
When considering the effectiveness of the State Loan Repayment Programs, one must refer back to the intent and purpose of the program. N.D.C.C. 43-12.3-01 states: “The health council shall administer student loan repayment programs, as established by this chapter, for health care professionals willing to provide services in areas of this state that have a defined need for such services.” Similarly, N.D.C.C. 43-28.1-01 reads: “Each year the state health council shall select, from a pool of applicants, dentists who shall provide dental services in cities or surrounding areas, or both, in this state, which the state health council identifies as having a defined need for dental services.” (Emphases added)

The purpose of these programs is to create an incentive for health care professionals to provide services in underserved areas of North Dakota, where there is a need for the services but a shortage or lack of providers.

Effectiveness could be defined by the following three questions:

1. Have we provided health care/dental professionals in underserved communities?
2. Have those health care/dental professionals fulfilled their contract, and stayed in the community for the required years of service?
3. Have the health care/dental professionals remained in the community after their contract was fulfilled, and their years of service agreement was completed?

Table 4, illustrates the answer to the first question by detailing the history of loan repayment applicants and awards. This data shows that there are applicants for these positions, and a majority of positions are filled.

Having a year-of-service requirement as part of the contract for program participants benefits both the community and the provider. Dental and primary health care providers typically develop more of a trusting relationship with their patients than other specialties, and it takes time to develop those relationships. The community needs providers, but the patients also prefer stability in order to develop a healthy trusting doctor/patient relationship. The provider benefits from a service requirement because spending a number of years in the same practice allows them to become comfortable in a community, develop friendships, and to feel a part of the community.

In prior programs, there have been penalties for leaving the program early. Currently the dental program requires a dentist who breaches the contract and leaves the community before the service requirement is fulfilled to repay 100% of the funds already received.

The physician and mid-level practitioner programs in prior years had required a repayment of funds received but not yet earned. The current health care professional program still requires five years of service, but because the payments are made at the end
of each twelve month period, there is no “unearned” balance, so in a practical sense, there is no real monetary penalty.

Overall, there have been few instances of providers leaving the community before the contract is fulfilled. Table 5 provides this data from 1993 to 2015.

Table 5: Number of Providers Who Did Not Fulfill Their Contract

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Physicians</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>Mid-Level Practitioners</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Dentists</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>Total</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>6</td>
<td>9</td>
</tr>
</tbody>
</table>
Perhaps the most impactful measure of effectiveness is whether the providers remain in the community, or another underserved area, after the contract is fulfilled. In order to quantify this attribute, we surveyed providers fulfilling their contracts 0-5 years ago, and those whose contracts ended more than five years ago. Data was collected to show, by discipline, where each subset of providers were practicing. The first five years could be considered a transitional time, while remaining in a community more than five years may indicate a more permanent situation. Table 6 displays this data.

**Table 6: Providers’ Location Following Contract Fulfillment**

<table>
<thead>
<tr>
<th></th>
<th>Physicians</th>
<th>Mid-Level Practitioners</th>
<th>Dentists</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Years since completing the program</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rural or underserved area</td>
<td>13</td>
<td>9</td>
<td>3</td>
<td>12</td>
</tr>
<tr>
<td>Larger ND community</td>
<td>1</td>
<td>9</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Out of State</td>
<td>3</td>
<td>2</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>17</td>
<td>20</td>
<td>5</td>
<td>13</td>
</tr>
<tr>
<td><strong>Percent remaining in underserved areas</strong></td>
<td>76.47%</td>
<td>45.00%</td>
<td>60.00%</td>
<td>92.31%</td>
</tr>
</tbody>
</table>
Of the 37 physicians who have completed their contract, 22 remained in an underserved area of North Dakota (59.46%). Those in the first five years post-contract were more likely to stay in their community, 76.47%, while only 45% of those who fulfilled their contract more than five years ago remained in an underserved community.

More than 92% of the mid-level practitioners who completed their contract five or more years ago remained in an underserved community. The results show that two of the five completing their contract within the last five years have left the state. In total, 15 of 18 (83.33%) mid-level practitioners continued to practice in an underserved community after their contracts were fulfilled.

Results for dentists were more evenly divided; sixteen of thirty-one total dentists remained in the underserved area (51.61%). 58.33% of those who completed their contracts within the last 5 years continued to practice in an underserved area, while 47.37% of the dentists who completed their contracts more than five years ago remained.

The information on practice location is not a scientific study. While the results can be used to compare the disciplines, due to the small sample size, the conclusions cannot be applied to any future expectations. In addition, other variables present in making the decision to stay in the rural or underserved community, were not accounted for or controlled. These may include family or economic preferences, which have no correlation to the success of the program.

In addition, some participants would continue to practice in an underserved community for reasons unrelated to the State Loan Repayment Program. For example, a professional with family ties to the community may have always intended to practice there, independent of the program.

When considering how much the State Loan Repayment Program influences the dentists’ and health care professionals’ decision whether or not to continue practicing in a rural or underserved area, it would be useful to have data that reflects the loan recipients’ opinion about the programs, and the extent to which the loan repayment program experience influenced their practice location decisions. Such a survey exists; participants are requested to complete a survey that collects information on various topics, including their opinion of the state loan repayment program. According to Amundson, the survey is to be completed annually, as well as at the beginning and end of the program. The latest survey, conducted by PracticeSights, Clinician Recruitment and Retention Management System, included the reporting period 01/01/2012 to 01/13/2016. The response was disappointing; only nine physicians and two mid-level practitioners completed the surveys, so there is no usable data regarding their experience with the state loan repayment program. The dentists were not surveyed.
In summary, the State Loan Repayment programs can be considered to be effective during the contract period and up to five years following the contract conclusion, but only partly effective more than five years after the contract is fulfilled.

- The program is popular with professionals, as it receives applicants consistently, and usually fills all positions.

- On average, the professionals fulfill their contracts and complete the service obligation, so this provides stable health care providers to the community for the required time (under current programs, five years).

- Most of the professionals remain in their contract area, or another underserved community for the first five years. After five years, however, less than half of the physicians and dentists stay in these communities (46.15%).

- The Mid-Level practitioners (nurse practitioners and physician assistants) are the exception to this average; in total, 15 of 18 have remained in their original community, 83.33%. In contrast, 22 of 37 physicians (59.46%) and 16 of 31 dentists (51.61%) have remained in an underserved area.
Possible Gaps

When the first State Loan Repayment Programs began, the only disciplines included were dentists and physicians. Over time, Mid-Level Practitioners (Physician Assistants, Nurse Practitioners and Nurse Midwives) were added to the program. During the 2015 Legislative Session, additional health care professions were added to the program. The current list of disciplines are:

- Dentists
- Physicians
- Mid-Level Practitioners
- Clinical Psychologists
- Behavioral Health Professionals, namely
  - Licensed addiction counselors
  - Licensed professional counselors
  - Licensed social workers
  - Behavioral health registered nurses
  - Psychiatric nurse specialist

Over the years, other health care disciplines have been considered for inclusion into the State Loan Repayment program. Professional associations are greatly interested in the availability of this assistance to encourage new members to work in rural and underserved communities.

**Optometrists** — Optometry students must go out of state for training, and approximately six per year are chosen for the Professional Student Exchange Program through WICHE. Nonetheless, optometrists often have significant student loan debt upon graduation. According to Nancy Kopp, in the past there have not been severe shortages of optometry providers, even in rural areas of North Dakota, often due to the use of satellite clinics which bring providers to the more rural areas. However, the trend is changing, and recent retirements have left three rural ND communities without optometry services.

**Pharmacists** — Another health care profession suffering from shortages of providers in rural North Dakota, pharmacists often accumulate significant student loan balances. According to Mike Schwab, Executive Vice President, ND Pharmacists Association, pharmacists would benefit greatly from the State Loan Repayment Program. Schwab notes that, in past discussions, it was seen that pharmacists are eligible for the Federal State Loan Repayment Program, however,
very few actually qualify for that program because they must serve a site located in a HPSA, and because of difficulty in securing the required funding match.

Registered Nurses- According to Carmen Bryhn, Director of State Affairs, ND Nurses Association, the need for registered nurses continues state-wide, but especially in the rural areas. Bryhn and Patricia Moulton, Executive Director, ND Center for Nursing emphasize the concerns about nursing shortages, and are interested in the possibility of adding student loan repayments to their recruiting efforts.

Other professions – In other states, assistance programs include the above professions, along with nursing instructors, dental hygienists, marriage and family therapists, radiologic technicians, dietitians, occupational therapists, respiratory therapists, laboratory technologists, physical therapists, paramedics, medical technologists, speech therapists and healthcare social workers.

Numerous other health care disciplines could be considered to participate in the State Loan Repayment Program, however, additional study is needed to determine the need and priority of any additions to the program, as well as funding availability.

Duplications

After reviewing all State programs that assist health care professionals, the only possible duplication is the Department of Human Services Non-Profit Clinic Dental Access Project. This program offers a lower amount of repayment funds, and is targeted at assisting non-profit dental clinics to recruit a dentist. Because the applicant is the non-profit clinic, instead of the individual dentist, it is not entirely a duplication of the State Loan Repayment Program. Further study may be needed to determine the effectiveness of the DHS program, and whether there is a practical way to address this need in a different program.
This section describes other health care professional assistance programs, both federal programs and those in other Midwestern states.

**Federal State Loan Repayment Program**

This program provides up to $50,000 per year for a two-year service commitment, and requires a 1:1 match from the sponsoring organization or community. Only sites that are located in a Health Professional Shortage Area (HPSA) are eligible to participate in the program. Eligible professionals include physicians (family medicine, internal medicine, obstetrics/gynecology, and pediatrics), general and pediatric dentists, registered dental hygienists, nurse practitioners, physician assistants, certified nurse midwives, health service psychologists, licensed clinical social workers, psychiatric nurse specialists, licensed professional counselors, marriage and family therapists, registered nurses and pharmacists.

Although this program includes more eligible professions, according to Amundson, the requirement to practice in a HPSA, and the 1:1 match requirement makes it difficult to recruit and retain applicants.

**Indian Health Services Loan Repayment Program (Federal)**

This program provides up to $40,000 for a 2-year service commitment to practice in an approved Indian health facility. Eligible professions include advanced practice nurses, behavioral health professionals, dentists, dental assistants, dental hygienists, environmental engineers, medical imaging, medical technology, medicine, podiatry, nursing, optometry, pharmacy and physical rehabilitation (physical therapy, occupational therapy and speech-language pathology and audiology at the MS and DPT level).

This program includes more eligible professions, but the limited sites available make it difficult to recruit and retain applicants.

**Indians Into Medicine Program (Federal)**

The University of North Dakota participates in this program, whereby Indian students who are preparing for health careers receive support services, including personal and academic counseling, financial aid assistance and summer enrichment classes. American Indian students at the junior high, high school and medical preparatory level are eligible to participate. UND reserves placements for seven students in the freshman medical school class, two physical therapy students, two occupational therapy students, and two masters of public health students.
This program encourages and enables students to pursue a medical career, but does not provide assistance after graduation for practicing health professionals.

In addition to the Federal State Loan Repayment Program (SLRP), the following health professional assistance programs are provided by other states in the region:

Minnesota Loan Forgiveness Program

The state of Minnesota maintains a student loan forgiveness program in the amounts of $9,000 to $30,000 (depending on profession), and requires a 3-4 year service commitment in a rural area or an urban HPSA. Eligible health professionals include dentists and dental therapists, mental health professionals, midlevel practitioners, nurses (RN or LPN), pharmacists, and physicians. Practice sites have additional requirements for eligibility.

Montana Rural Physician Incentive Program (MRPIP)

This program provides up to $100,000 in loan repayment for primary care physicians who practice in medically underserved areas of rural Montana. There is a five-year service commitment, and payments are made every six months according to a schedule of increasing amounts, to encourage retention.

Montana Institutional Nursing Incentive Program (MINIP)

Full-time, Registered Professional Nurses employed by the Montana State Hospital or the Montana State Prison are eligible for up to 50% of a nursing education loan balance between $1,000 and $30,000. A maximum of $3,750 is provided per year over a maximum of four years, with an equivalent service requirement.

Nebraska Rural Health Opportunities Program (RHOP)

This program encourages rural residents to pursue a health care career with the goal of returning to rural Nebraska to practice. Eligible applicants must be from certain targeted counties and cities, and the students must be committed to return to that rural community. Students accepted receive a tuition waiver from one of three state colleges, and guaranteed admission to the University of Nebraska Medical Center professional training programs. Eligible degree programs include Bachelor of Science in Clinical Laboratory Studies, Bachelor of Science in Dental Hygiene, Doctor of Dental Surgery, Doctor of Medicine, Bachelor of Science in Nursing, Doctor of Pharmacy, Doctor of Physical Therapy, Master of Physician Assistant Studies and Bachelor of Science in Radiation Science Technology. Assistance does not continue past UNMC graduation.

South Dakota Recruitment Assistance Program (RAP)

This program provides incentive payments to health care professionals after they complete three consecutive years of service in a community with population of 10,000 or less, in a qualified facility which accepts medical assistance. Eligible professions include
physicians, dentists, physician assistants, nurse practitioners and nurse midwives. At any time, no more than 15 physicians, 5 dentists, and any combination of 15 physician assistants, nurse practitioners and nurse midwives can occupy these positions, for a total of 35 professionals. The amount of assistance for physicians and dentists is two times the University of South Dakota School of Medicine resident tuition for the most recent four academic years. Currently that amount is $186,750. Assistance for the other listed professions is two times the University of South Dakota resident tuition for physician assistant studies for the three most recent academic years, currently $42,838. This is an incentive payment, not a loan repayment, and the payment is not made until the service commitment is fulfilled.

South Dakota Rural Healthcare Facility Recruitment Assistance Program (RHFRAP)

The state of South Dakota and selected medical facilities cooperate to place health care professionals in communities of 10,000 population or less, by providing an incentive payment of $10,000 after a three-year service commitment. The facility must accept medical assistance, and contribute 25% of the incentive payment if in a community of 2,500 residents or fewer, and 50% if the population is 2,501-10,000. The provider is employed by the medical facility, which may be any of the following qualifying entities: Hospitals, nursing homes, home health agencies, chemical dependency treatment facilities, intermediate care facilities for individuals with intellectual disabilities, community support providers, community mental health centers, end stage renal disease (ESRD) facilities and ambulance services.

Eligible professions include dietician, nutritionist, nurse (RN or LPN), occupational therapist, respiratory therapist, laboratory technologist, pharmacist, physical therapist, paramedic, medical technologist, radiological technologist, speech therapist and healthcare social worker. Note that physicians, midlevel practitioners and dentists are not eligible for this program. The program is limited to three providers per facility, with a state limit of 60 providers in the program at any time.

Wyoming Healthcare Professional Loan Repayment Program

The intent of this program is to enhance the ability of medically underserved Wyoming communities to recruit and retain healthcare professionals. Physicians and dentists may receive up to $30,000 each year for a three years. All other licensed healthcare professionals may receive up to $20,000 each year for three years. The providers must work full-time in an underserved Wyoming community, treat medical assistance patients and use 100% of the funds to repay student loans. Eligible candidates are health care providers licensed or certified to provide health care services in the state of Wyoming including but not limited to hospital, medical, surgical, dental, vision, nursing, radiology, mental health, speech language pathology and pharmaceutical services. The service obligation is three years.
Wyoming Provider Recruitment Grant Program

The Wyoming Department of Health provides grants for provider recruitment, of which only ten percent (10%) may be used to advertise the provider recruitment program. The grant amount is a reimbursement of actual recruitment costs, up to $10,000 per recruited provider. Hospitals and other health care facilities are eligible to apply for these grants, and are prioritized by need based on geographic area, then by medical need within the geographic area. The recruited provider must agree to serve not less than two years, or the recruiting entity must repay all monies granted under this program, plus interest at ten percent.
SUMMARY AND CONCLUSION

The Dentists Loan Repayment Program and the Health Care Professionals Student Loan Repayment Program are the main forms of assistance offered by the State of North Dakota to encourage these professionals to practice in rural or underserved communities. Both programs are well-utilized, with adequate funding to support from three to nine applicants in each discipline. The goal of retaining these professionals in the rural and underserved communities is effectively achieved in the short run; during the contract period and continuing through the first five years after the contract is fulfilled. The long-term effectiveness is not as successful, however. Less than half of the physicians and dentists remain in these communities more than five years post-contract. In contrast, the Mid-Level Practitioners have an extremely high retention rate even more than five years post-contract.

Even though the two state loan repayment programs are similar, there are several inconsistencies when compared. The inconsistent terms include the timing and amount of payments, penalties for leaving the program prematurely, community match requirements and the list of priority and preference attributes. Resolving these differences would make it possible to offer a single State Loan Repayment Program that would cover both dentists and health care professionals.

Possible gaps in these programs’ coverage would be the consideration of other types of health care professions which could be eligible. A wide variety of health care professions are included in health care assistance programs in other Midwestern states; adding any of those to the current programs would require additional study and consideration.

There do not appear to be any duplicative state programs, with the possible exception of the Department of Human Services Non-Profit Dental Access Project, which also provides student loan repayment for dentists. However, this project is structured as a grant to the non-profit clinic, who then selects candidates for the loan repayment program, so continuing this program as it is currently structured would require it remain separate from the programs in question.

Possible legislation which could be proposed may include simplifying the programs by removing inconsistent terms, as discussed above, and combining them into a single loan repayment program, as well as considering the addition of more eligible health care professions.
CHAPTER 43-12.3
HEALTH CARE PROFESSIONAL STUDENT LOAN REPAYMENT PROGRAM

43-12.3-01. Student loan repayment programs - Health care professionals.
The health council shall administer student loan repayment programs, as established by this chapter, for health care professionals willing to provide services in areas of this state that have a defined need for such services.

43-12.3-02. Application process.
The health council shall develop an application process for public and private entities seeking to fill health care needs and for health care professionals willing to provide necessary services in exchange for benefits under a student loan repayment program.

43-12.3-03. Public and private entities - Selection criteria - Matching funds.
1. The health council shall establish criteria to be used in selecting public and private entities for participation in a program. The criteria must include:
   a. The number of health care professionals, by specified field, already providing services in the area;
   b. Access to health care services in the area; and
   c. The level of support from the area.
2. The health council may consult with health care and social service providers, advocacy groups, governmental entities, and others in establishing criteria and evaluating needs based on the criteria.
3. An entity may not be selected for participation unless it contractually commits to provide matching funds equal to the amount required for a loan repayment program in accordance with section 43-12.3-06.

43-12.3-04. Public and private entities - Eligibility for participation - Priority.
In selecting public and private entities for participation in a program the health council shall give priority to an entity that:
1. Meets the selection criteria;
2. Is located in an area that is statistically underserved; and
3. Is located at least twenty miles [32.18 kilometers] outside the boundary of a city having more than forty thousand residents.

43-12.3-05. Health care professionals - Selection criteria.
1. The health council shall establish criteria to be used in selecting health care professionals for participation in a student loan repayment program. The criteria must include:
   a. The health care professional's specialty;
   b. The need for the health care professional's specialty within an area;
   c. The health care professional's education and experience;
d. The health care professional's date of availability and anticipated term of availability; and

e. The health care professional's willingness to accept medicare and medicaid assignments, if applicable.

3. In selecting health care professionals for participation in the program the health council shall require that the individual:

a. Is physically present at and provides services on a full-time basis to an entity that meets the requirements of section 43-12.3-04; or

   (1) Is physically present at and provides services on at least a half-time basis to an entity that meets the requirements of section 43-12.3-04;

   (2) Provides telehealth services to a second entity that meets the requirements of section 43-12.3-04; and

   (3) Verifies that the services provided under paragraphs 1 and 2 are equal to the full-time requirement of subdivision a.

b. In selecting health care professionals for participation in a program, the health council may consider an individual's:

   a. Length of residency in this state; and

   b. Attendance at an in-state or an out-of-state institution of higher education.

43-12.3-06. Student loan repayment program - Contract.

1. The health council shall enter into a contract with a selected health care professional. The health council shall agree to provide student loan repayments on behalf of the selected health care professional subject to the requirements and limitations of this section.

   a. For a physician:

      (1) The loan repayment must be equal to twenty thousand dollars per year; and

      (2) The matching funds must equal fifty percent of the amount required in paragraph 1.

b. For a clinical psychologist:

   (1) The loan repayment must be equal to twelve thousand dollars per year; and

   (2) The matching funds must equal twenty-five percent of the amount required in paragraph 1.

c. For an advanced practice registered nurse or a physician assistant:

   (1) The loan repayment must be equal to four thousand dollars per year; and

   (2) The matching funds must equal ten percent of the amount required in paragraph 1.

d. (1) For a behavioral health professional:

      (a) The loan repayment must be equal to four thousand dollars per year; and

      (b) The matching funds must equal ten percent of the amount required in subparagraph a.

      (2) For purposes of this subdivision, a behavioral health professional means an individual who practices in the behavioral health field and is:

          (a) A licensed addiction counselor;
(b) A licensed professional counselor;
(c) A licensed social worker;
(d) A registered nurse; or
(e) A specialty practice registered nurse.

2. a. Payments under this section must be made on behalf of the health care professional directly to the Bank of North Dakota or to another participating lending institution.
b. Except as otherwise provided, payments under this section may be made only at the conclusion of each twelve month period of service.
c. Prorated payments may be made only if:
   (1) The repayment of the loan requires less than a full annual payment;
   (2) The health care professional is terminated or resigns from his or her position; or
   (3) The health care professional is unable to complete a twelve-month period of service due to the individual's death, a certifiable medical condition or disability, or a call to military service.

3. Payments under this section terminate upon the earlier of:
   a. The full repayment of the health care professional's student loan; or
   b. The completion of five years as a participant in the student loan repayment program.

4. The health council shall waive the requirements of this section that pertain to matching funds if the health care professional opens a new practice as a solo practitioner in a city that has fewer than fifteen thousand residents.

43-12.3-07. Powers of the health council - Continuing appropriation.

1. The health council may:
   a. Receive and expend any gifts, grants, and other funds for the purposes of this program;
   b. Participate in any federal programs providing for the repayment of student loans on behalf of health care professionals; and
   c. Do all things necessary and proper for the administration of this chapter.

2. All moneys received by the health council under this section are appropriated to the health council on a continuing basis, to be used exclusively for the purposes of this chapter.
APPENDIX B: NDCC CHAPTER 43-28.1

CHAPTER 43-28.1
DENTISTS' LOAN REPAYMENT PROGRAM

   Each year the state health council shall select, from a pool of applicants, dentists who shall provide dental services in cities or surrounding areas, or both, in this state which the state health council identifies as having a defined need for dental services. The dentists selected from this pool of applicants may include dentists who will provide dental services in a public health clinic, a practice with a focus on an underserved population, or a nonprofit dental clinic. The dentists are eligible to receive funds for the repayment of their education loans. The funds, which are payable over a five-year period, may not exceed one hundred thousand dollars per applicant. If the state health council accepts any gifts, grants, or donations under this chapter, the council may select additional dentists for participation in the loan repayment program under this chapter.


1. The health council shall establish criteria to be used in selecting qualified dentists and in identifying cities or surrounding areas, or both, that have a defined need for dental services. The criteria must include consideration of:
   a. The number of dentists already providing dental services in the city or surrounding areas, or both;
   b. Access to dental services in the city and the surrounding areas;
   c. How the dentist will provide dental services in a public health clinic, a practice with a focus on an underserved population, or a nonprofit dental clinic; and
   d. The dentist's training in general dentistry or in a dental specialty and the extent to which such services are needed in the identified city or surrounding areas, or both.
2. For purposes of a dentist selected for loan payment under this chapter who practices within fifteen miles [24.14 kilometers] of the city limits of one of the three largest cities in the state, to qualify to receive a yearly disbursement under this chapter during that year of obligated service, the dentist must have:
   a. Received dental medical payments of at least twenty thousand dollars in the form of medical assistance reimbursement; or
   b. Practiced at least two full workdays per week at a public health clinic or at a nonprofit dental clinic that uses a sliding fee schedule to bill the nonprofit dental clinic's patients.
3. The health council may consult with public and private sector entities in establishing criteria and evaluating needs based on the criteria.

   The state health council may provide for loan repayment funds to a dentist who has received an education loan. The council may not provide funds for the repayment of any loan that is in default at the time of the application. The amount of repayment must be related to the dentist's outstanding education loans. A dentist is eligible to receive loan repayment funds in an amount equal to the outstanding balance of the dentist's education loans with applicable interest, or one hundred thousand dollars, whichever is less. Loan repayment funds may not be used to satisfy other service obligations under similar programs.

   If a dentist who receives loan repayment funds under this chapter breaches the loan repayment program contract by failing to begin or failing to complete the obligated service, the dentist is liable for the total amount of any loan repayment funds received. Any damages the state is entitled to recover under this chapter must be paid to the state health council, within one year from the date of the breach. Any amounts not paid within one year from the date of the breach are subject to the collection process and may be recovered through deductions in medicaid payments. Damages recoverable for a breach of the contract include all interest, costs, and expenses incurred in collection, including attorney's fees. Damages collected under this section by the state health council must be deposited in the state general fund. The state health council may agree to accept a lesser measure of damages for breach of a loan repayment program contract if compelling reasons are demonstrated.

   1. The state health council shall release a dentist from the dentist's loan repayment contract, without penalty, if:
      a. The dentist has completed the service requirements of the contract;
      b. The dentist is unable to complete the service requirement of the contract because of a permanent physical disability;
      c. The dentist demonstrates to the state health council extreme hardship or shows other good cause justifying the release; or
      d. The dentist dies.
   2. A decision by the state health council not to release a dentist from the dentist's loan repayment contract without penalty is reviewable by district court.

43-28.1-08. Payment.
   The state health council may not provide any loan repayment funds to a dentist under this chapter until the dentist has practiced at least six months on a full-time basis in the city or surrounding areas, or both, the state health council has identified as having a defined need for dental services. Loan repayment funds for a year of obligated service are payable by the state health council no later than the end of the fiscal year in which the dentist completes the year of obligated service.

The state health council may accept any conditional or unconditional gift, grant, or donation for the purpose of providing funds for the repayment of dentists' educational loans. If any entity desires to provide funds to the council to allow an expansion of the program beyond the dentists contemplated by this chapter, the entity shall commit to fund fully the expansion for a period of five years. The council may contract with any public or private entity and may expend any moneys available to the council to obtain matching funds for the purposes of this chapter. All money received as gifts, grants, or donations under this section is appropriated as a continuing appropriation to the state health council for the purpose of providing funds for the repayment of additional dentists' educational loans.
