



Iowa Rural Health and Primary Care

Health Professional Underserved Areas
and Rural Health Program Opportunities

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Center for Rural Health and Primary Care

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Who We Are

The Center for Rural Health and Primary Care is housed in the Bureau of Policy and Workforce Services in the Deputy Director's Office at the Iowa Department of Public Health (IDPH) and seeks to address health care issues that affect Iowa's rural and local communities. This work includes health care infrastructure planning and development, systems building and addressing barriers that impact access to quality health care.

The Center for Rural Health and Primary Care oversees:

- Primary Care Office
- State Office of Rural Health
- PRIMECARRE
- Iowa Prescription Drug Donation Repository Program
- Iowa Flex Program
- Iowa SHIP Program
- Volunteer Health Care Provider Program

The **Primary Care Office** works to improve access to services for underserved populations, especially those who remain at increased risk of illness and premature death. The Primary Care Office supports and enhances health systems programming to optimize effectiveness and eliminate health disparities.

The **State Office of Rural Health** is a federal-state partnership to help rural communities and organizations identify and resolve issues and build rural health infrastructure. The office provides rural health advocacy and outreach, coordination of rural health resources, and consultation to communities and health care providers in rural Iowa communities.

This report provides data on the various types of healthcare professional shortage designations and summarizes current rural health program opportunities.

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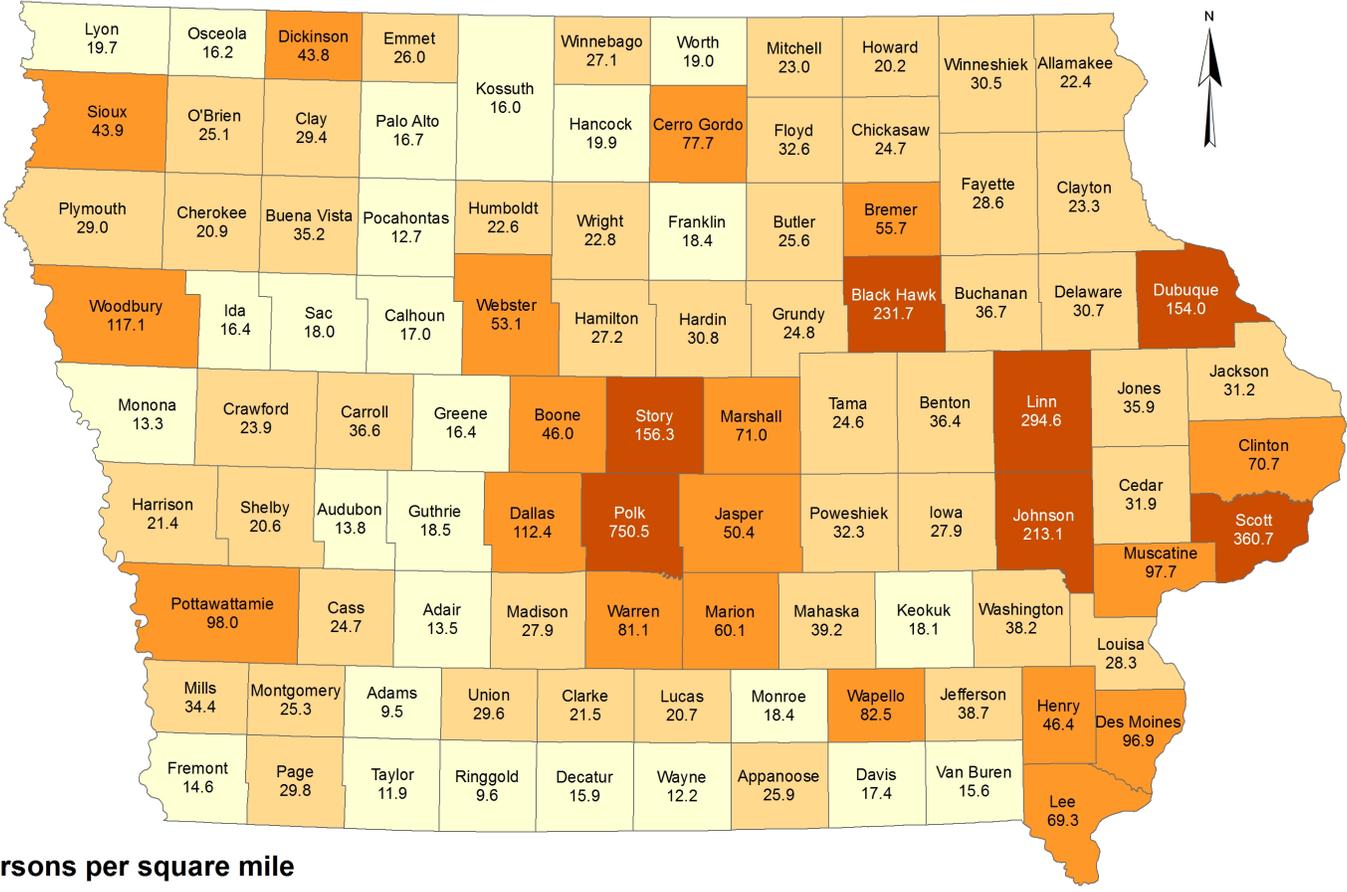
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Rural Health in Iowa

In the United States, an estimated 57 million people, nearly 1 in 5 Americans, call rural communities their homes. As reported in 2016, 35.7% of Iowa's population is rural ¹. Rural communities are great places to work, live and raise families. These communities are known for their friendly neighbors, sense of community, willingness to help, and sincere care for others. However, rural communities have unique health care needs and face challenges, including accessibility issues, health care shortages, a greater elderly population with unique needs and a greater number of chronic conditions, and larger un- and underinsured percentages.

Rural Areas of Iowa by Population Density



Persons per square mile



Created by: Iowa Department of Public Health; Bureau of Policy and Workforce Services
 Source: U.S. Census Bureau; 2010 Decennial Census; 2010 Census Summary File 1

Health Professional Shortage Designations







What are Shortage Designations?

Shortage designations, including Health Professional Shortage Areas (HPSAs) and Medically Underserved Areas and Populations (MUAs and MUPs), are used to designate areas, populations or facilities with a shortage of primary care, dental, or mental health care providers and services.

Shortage designations are used to distribute resources to areas of greater need. A few of the programs that utilize HPSA designations include:

- National Health Service Corps (NHSC)
 - NHSC Sites
 - Scholarships
 - Student 2 Student
 - Loan Repayment Program (NHSC LRP)
- Nurse Corps
- Iowa State Loan Repayment Program (SLRP)
- Conrad 30 J-1 Visa Waiver Program
- Centers for Medicare and Medicaid Services (CMS) Incentive Payment
- CMS Rural Health Clinic Program
- Medicare incentive payments for physicians
- Higher “customary charges” for new physicians
- Special consideration and funding priority for Area Health Education Centers (AHEC)

National Shortage Designation Update

In late 2017, all existing geographic and population HPSA designations nationwide were updated at a single point in time. This is known as the first phase of the National Update, part of the Health Resources and Services Administration’s (HRSA’s) Shortage Designation Modernization Project (SDMP). The SDMP aims to modernize the HPSA designation process by giving greater transparency, accountability and parity to the process.

The second phase of the project was initiated in August 2019 and updated all existing Auto-HPSA facility designations (Auto-HPSAs). In the months leading up to the update, HRSA provided stakeholders with a series of reports previewing their projected Auto HPSA scores and the data used to generate them. The preview scores were for informational purposes only. Score updates may be made through the HRSA Bureau of Health Workforce’s Online Portal.

Health Professional Shortage Areas (HPSAs)

A HPSA is a group of counties, a single or partial county, or facility designation that indicates an area that lacks sufficient health care professionals in primary, dental or mental health care to meet the health care needs of the population. There are different options for HPSA determinations, as described below.

Geographic HPSAs

Primary Care Geographic HPSA designations in Iowa are calculated using the county population and the number of full-time equivalent (FTE) professionals providing direct patient care services in that county. Each professional's direct patient care hours are compiled to calculate the FTE; 40 direct patient care hours per week equals one FTE. The minimum population-to-professional ratio for a Primary Care Geographic HPSA is 3,500:1. Geographic HPSAs allow health care professionals to participate in Medicare incentive payments for physicians, which pays a 10% bonus for outpatient services for Medicare beneficiaries.

Population HPSAs

Population HPSAs reflect the health care needs of specific populations to determine if the area qualifies as a Low-Income Population HPSA or Medicaid Eligible Population HPSA. More than 30% of the area population must be under 200% of the federal poverty level (FPL) to qualify for a Low-Income Population HPSA or Medicaid Eligible Population HPSA.

Facility HPSAs

Facility HPSAs reflect the specific health care needs of certain facilities. The following are considered Facility HPSAs:

- Other Facility (OFAC): Public or non-profit private medical facilities serving a population or geographic area designated as a HPSA with a shortage of health providers.
- Correctional Facility: Medium to maximum security federal and state correctional institutions and youth detention facilities with a shortage of health providers.
- State Mental Hospitals: State or county hospitals with a shortage of psychiatric professionals (mental health designations only).

Automatic Facility HPSAs (Auto-HPSAs)

Auto HPSAs are automatically designated as a HPSA by statute or through regulation without having to apply for a designation. These include:

- Federally Qualified Health Centers (FQHCs): Health centers that provide primary care to an underserved area or population, offer a sliding fee scale, provide comprehensive services, have an ongoing quality assurance program, and have a governing board of directors. All organizations receiving grants under the Health Center Program Section 330 of the Public Health Service Act are FQHCs.
- FQHC Look-A-Likes (LALs): Community-based health care providers that meet the requirements of the HRSA Health Center Program, but do not receive Health Center Program funding.
- Indian Health Facilities: Federal Indian Health Service (IHS), tribally-run, and urban Indian health clinics that provide medical services to members of federally recognized tribes and Alaska Natives.
- IHS and Tribal Hospitals: IHS, tribally-run hospitals that provide inpatient and outpatient medical services to members of federally recognized tribes and Alaska Natives.
- Dual-Funded Community Health Centers/Tribal Clinics: Health centers that receive funding from tribal entities and HRSA to provide medical services to members of federally recognized tribes and Alaska Natives.
- CMS-Certified Rural Health Clinics that meet National Health Service Corps site requirements: Outpatient clinics located in non-urbanized areas that are certified as RHCs by CMS and meet NHSC Site requirements including accepting Medicaid, CHIP and providing services on a sliding fee scale.



HPSA Provider Process

The Iowa Primary Care Office is responsible for the collection of professional FTE information. The process of surveying and collecting the health care professionals is accomplished through the University of Iowa, Office of Statewide Clinical Education Program (UI-OSCEP). All other data used in HPSA scoring is obtained through United States census data and other national sources. Using this information, the Iowa Primary Care Office determines population-to-provider ratios and conducts a needs assessment to determine what areas are eligible for designations. When a need is determined, the Iowa Primary Care Office submits a designation application to HRSA.



Primary Care

Includes Doctors of Medicine (MD) and Doctors of Osteopathy (DO) who provide general services in the following specialties:

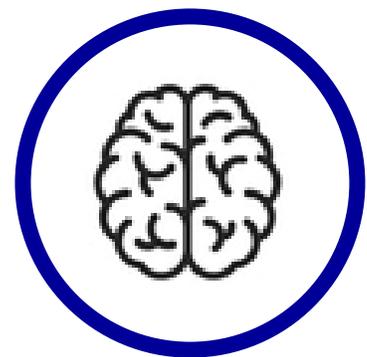
- Family Medicine
- Internal Medicine
- Obstetrics and Gynecology
- Pediatrics



Dental Health

Includes:

- Dentists (general and pediatric)
- Dental Auxiliaries (defined as non dentist staff employed by the dentist to assist in the operation of the practice)



Mental Health

Includes:

- Psychiatrists

HPSA Scoring Criteria

HPSA scores are based on population-to-provider ratios, percent of population below 100% of the FPL, travel time to the nearest source of care (NSC) outside the HPSA designation, and other components specific to primary care, dental health and mental health. Below are summaries of the components used for HPSA scoring.

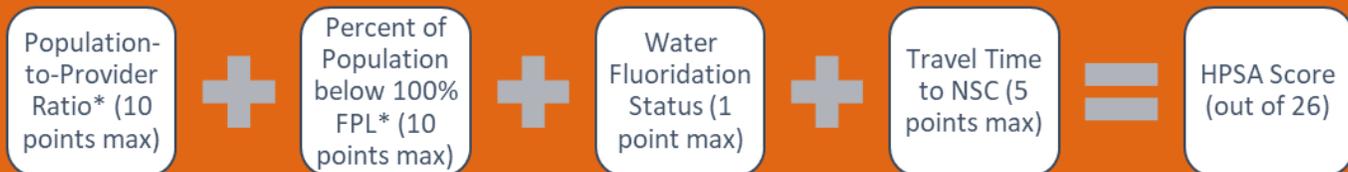
Primary Care HPSA Scoring

Primary Care HPSAs can receive a score between 0 and 25, based on the following components.



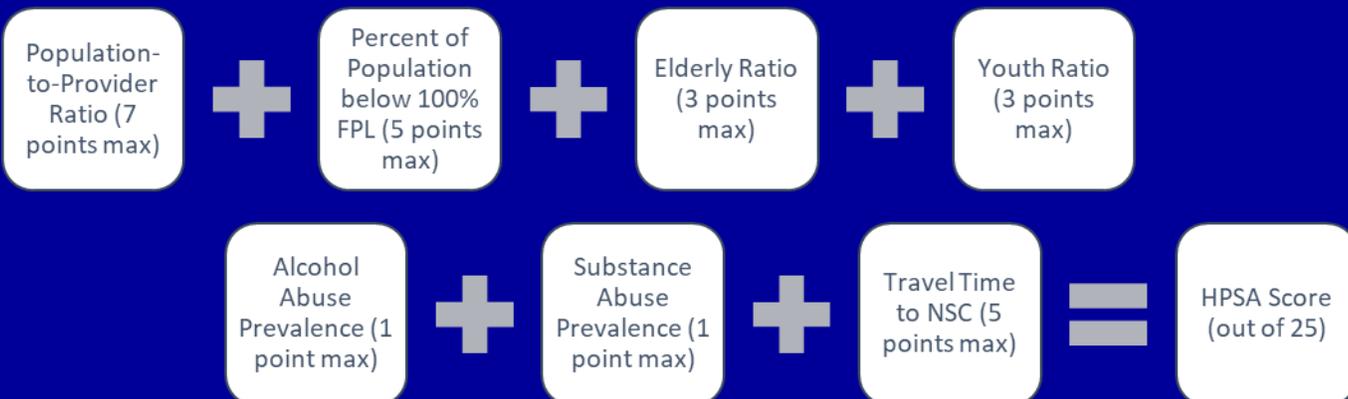
Dental Health HPSA Scoring

Dental Health HPSAs can receive a score between 0 and 26, based on the following components.



Mental Health HPSA Scoring

Mental Health HPSAs can receive a score between 0 and 25, based on the following components.



* Denotes components that are double-weighted.

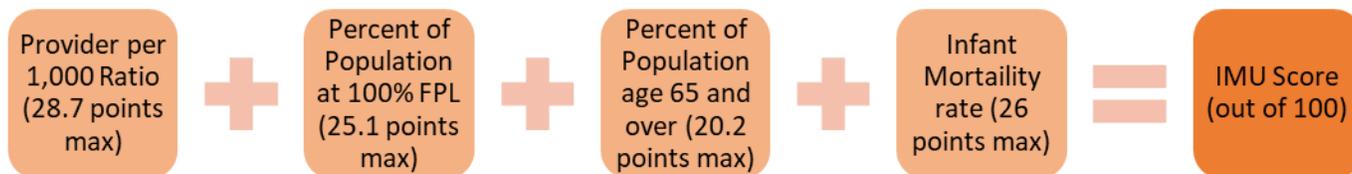
Medically Underserved Areas (MUAs) and Medically Underserved Populations (MUPs)

MUAs and MUPs are areas and populations with a lack of access to primary care services.

- **MUAs** have a shortage of primary care health services for residents within a geographic area such as a whole county; a group of neighboring counties; a group of urban census tracts; or a group of county or civil divisions.
- **MUPs** have a shortage of primary care health services for a specific population subset within an established geographic area. These groups may face economic, cultural or linguistic barriers to health care. Examples include people experiencing homelessness, low-income, Medicaid-eligible, Native American and migrant farmworkers.

MUA and MUP Scoring Criteria

The MUA/P score is dependent on the Index of Medical Underservice (IMU) for the area or population proposed for designation, and an IMU of 62.0 or below qualifies for designation as an MUA/P. The IMU is based on the following components.



Governor-Designated State Program for Rural Health Clinic (RHC) Eligibility

The governor's designation of MUA is used only for RHC eligibility. The criteria used for this designation was approved in 1998 by the Department of Health and Human Services, Health Resources Services and Administration, Shortage Designation Branch. County criteria includes:

- Population-to-provider ratio \geq 2,500:1
- Population-to-provider ratio \geq 2,000: 1 and have one of the following:
 - Poverty level above the state average
 - Elderly population above the state average

Federal Programs Using Shortage Designations

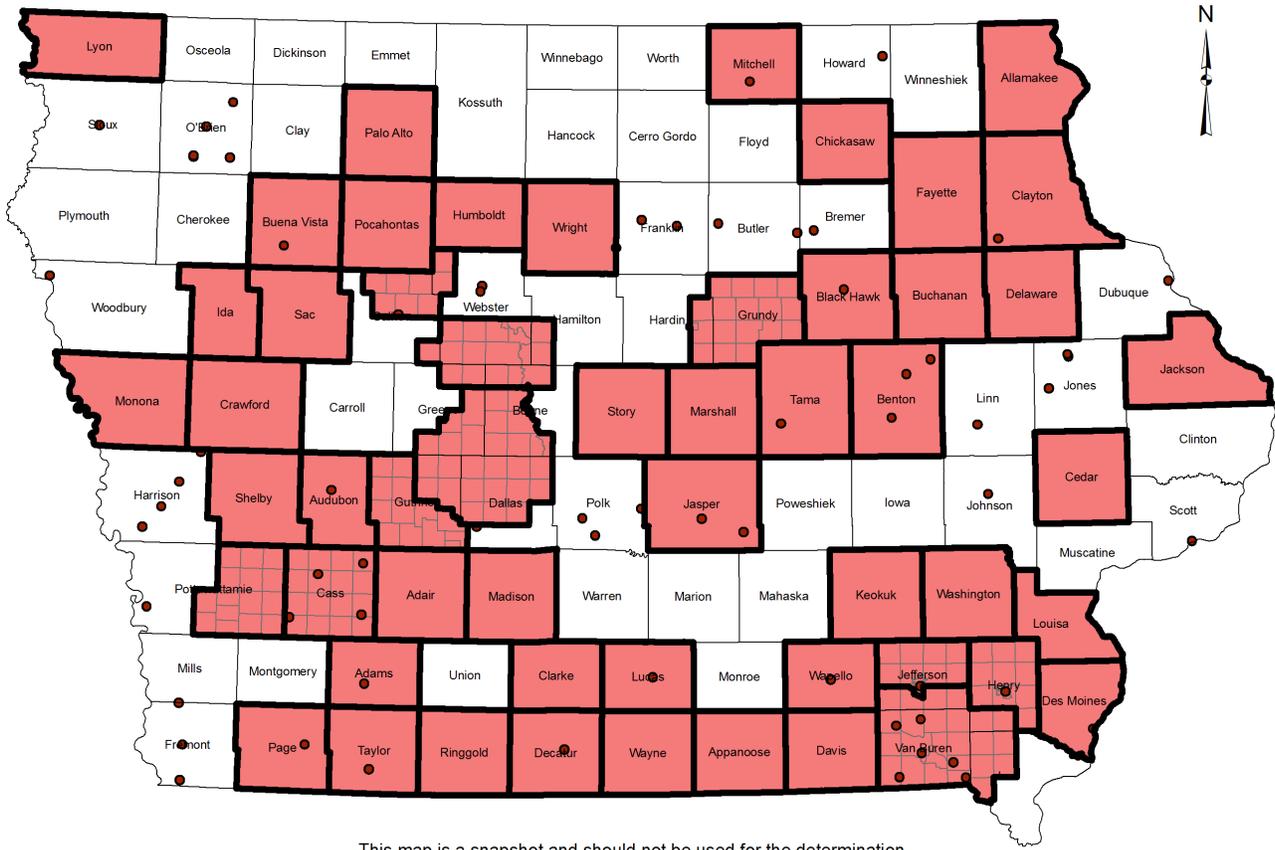
Shortage Type	Shortage Designation Option	National Health Service Corps (NHSC)	Nurse Corps	Health Center Program	IHS Loan Repayment Program	CMS HPSA Bonus Payment Program	CMS Rural Health Clinic Program	J-1 Visa Waiver
Primary Care	Geographic HPSA	X	X		X	X	X	X
	Population HPSA	X	X		X		X	X
	Facility HPSA	X	X		X			X
Dental Care	Geographic HPSA	X			X			
	Population HPSA	X			X			
	Facility HPSA	X			X			
Mental Health	Geographic HPSA	X	X		X	X		X
	Population HPSA	X	X		X			X
	Facility HPSA	X	X		X			X
Medically Underserved Areas/ Populations	Exceptional MUP			X				X
	MUA			X			X	X
	MUP			X				X



Iowa Health Professional Shortage Area Maps

The following maps include health professional shortage areas and facility health professional shortage areas in Iowa.

Iowa Primary Care HPSA Map



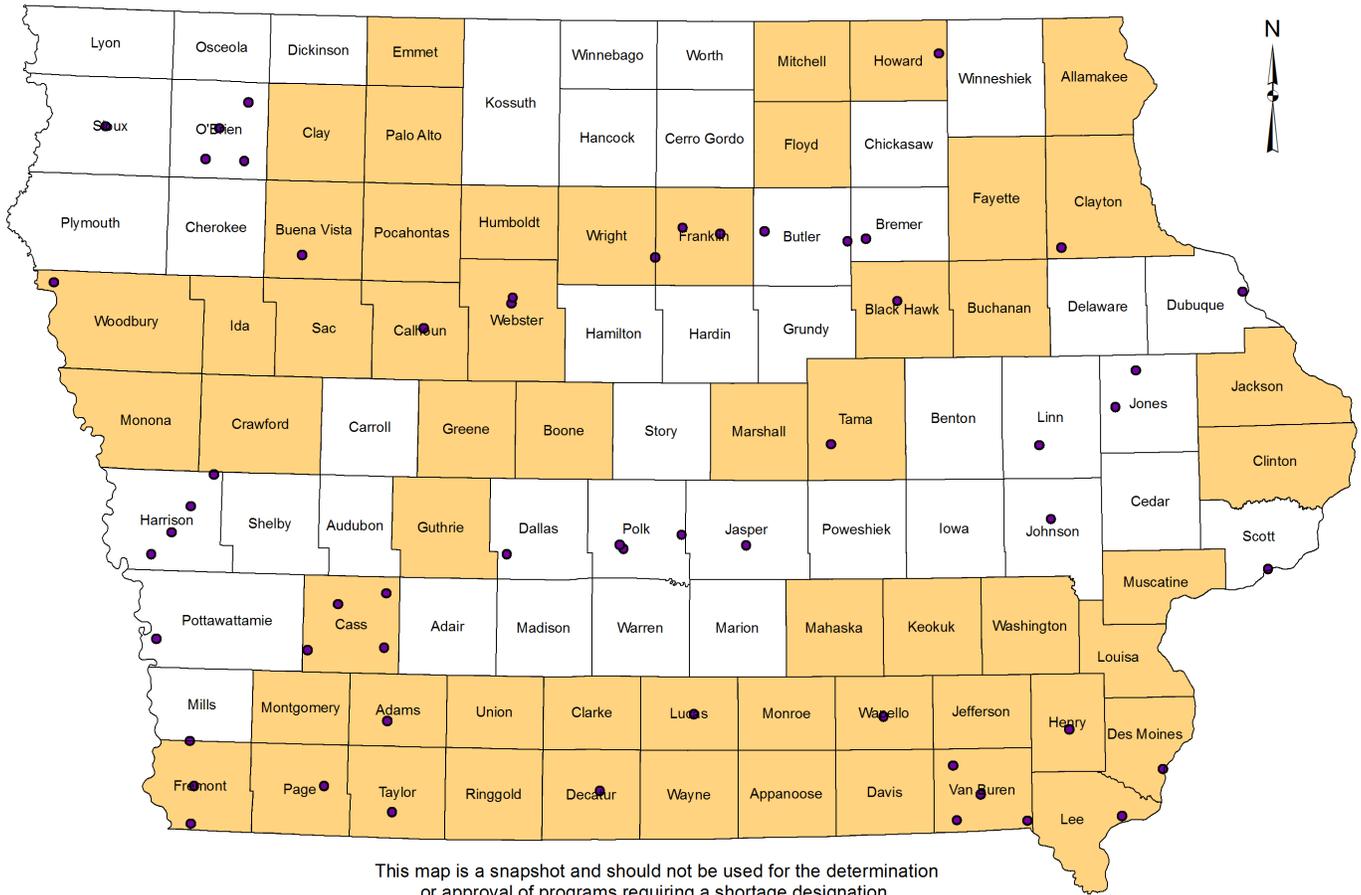
This map is a snapshot and should not be used for the determination or approval of programs requiring a shortage designation. The official site for determination of shortages is: <https://data.hrsa.gov/tools/shortage-area>.

HPSA Designation

- Facility HPSA
- Primary Care HPSA

Created by: Iowa Department of Public Health Bureau of Oral and Health Delivery System
Source: Health Resources and Services Administration Data Warehouse
Created: April 9, 2019

Iowa Dental Health HPSA Map



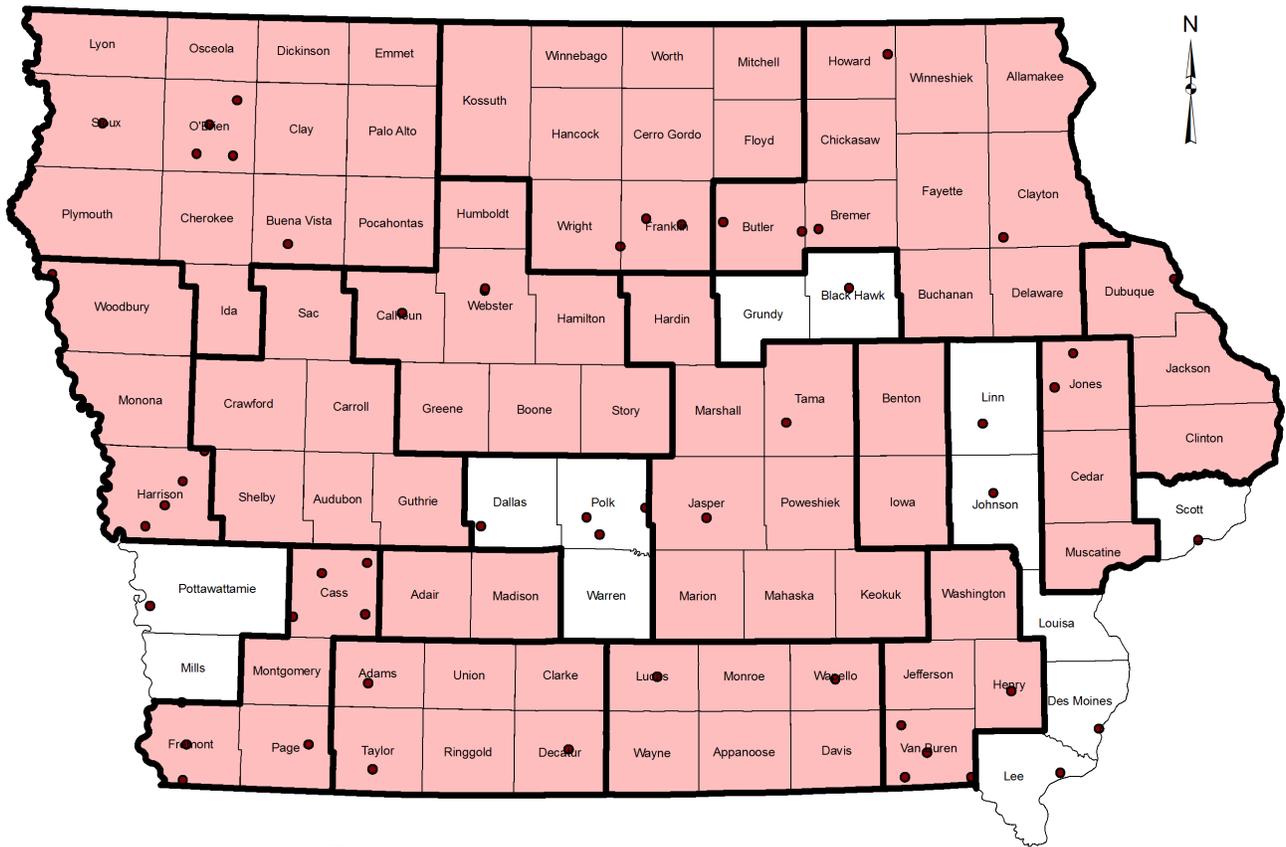
This map is a snapshot and should not be used for the determination or approval of programs requiring a shortage designation. The official site for determination of shortages is: <https://data.hrsa.gov/tools/shortage-area>.

HPSA Designation

- Facility HPSA
- Dental Health HPSA

Created by: Iowa Department of Public Health Bureau of Oral and Health Delivery System
Source: Health Resources and Services Administration Data Warehouse
Created: April 9, 2019

Iowa Mental Health HPSA Map



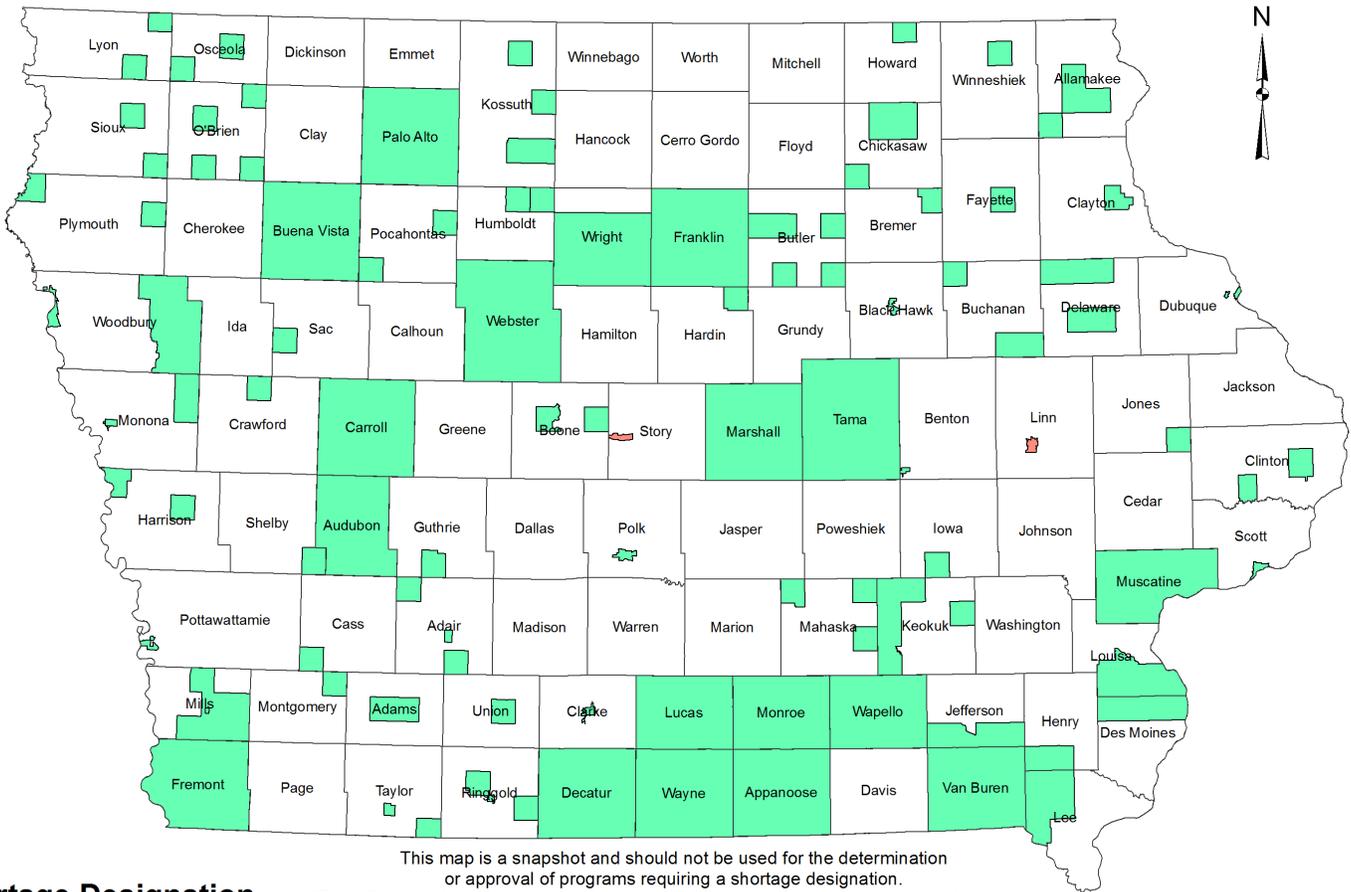
This map is a snapshot and should not be used for the determination or approval of programs requiring a shortage designation. The official site for determination of shortages is: <https://data.hrsa.gov/tools/shortage-area>.

HPSA Designation

- Facility HPSA
- Mental Health HPSA

Created by: Iowa Department of Public Health Bureau of Oral and Health Delivery System
Source: Health Resources and Services Administration Data Warehouse
Created: April 9, 2019

Federal Underserved Areas and Populations (MUAs and MUPs)

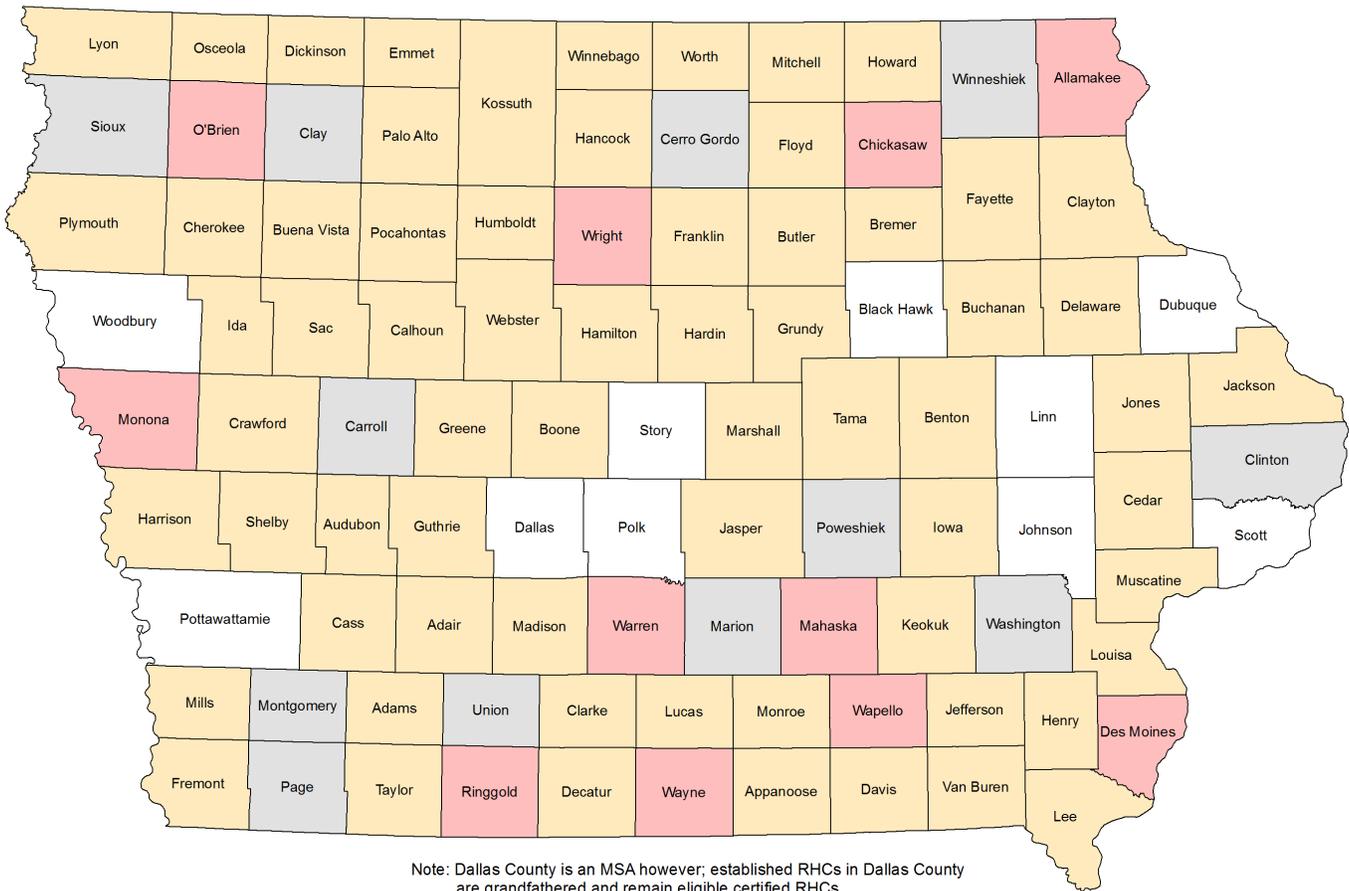


Shortage Designation

-  Medically Underserved Population
-  Medically Underserved Area

Created by: Iowa Department of Public Health Bureau of Oral and Health Delivery System
Source: Health Resources and Services Administration Data Warehouse
Created: April 9, 2019

Iowa Governor's Designation County Eligibility for Rural Health Clinic Status Map



County Eligibility for Rural Health Clinic Status

- Designated
- Metropolitan Statistical Area
- Grandfathered
- Not Designated

Created by: Iowa Department of Public Health; Bureau of Oral and Health Delivery Systems
Date: 2017/12/20



Rural Health Program Opportunities



Hospital and Patient Opportunities



Medicare Rural Hospital Flexibility (Flex) Program

The Flex Program allows small hospitals to be certified as critical access hospitals (CAHs) and seeks to help implement initiatives to strengthen rural health infrastructure. In addition to certifying hospitals as CAHs, eligible CAHs may participate in Flex-funded activities and opportunities to support them in quality improvement, financial and operational improvement, and population health.

Eligibility:

To be eligible to participate in Flex-funded activities, CAHs must:

- Have a signed MOU to submit and share Medicare Beneficiary Quality Improvement Project (MBQIP) data
- Meet MBQIP reporting requirements as defined by the Federal Office of Rural Health Policy (FORHP)

Small Rural Hospital Improvement Program (SHIP)

SHIP provides funding to support hospital activities in key focus areas that include:

- Value-based purchasing
- Accountable care organizations or shared savings
- Prospective payment system or payment bundling

Through the SHIP, eligible hospitals may choose to participate in consortium activities, implement their own projects, or utilize group purchasing options related to the key focus areas.

Eligibility:

To be eligible to participate in the SHIP, hospitals must:

- Have 49 beds or less
- Be rural, which is defined as either: located outside of a Metropolitan Statistical Area (MSA); located within a rural census tract of a MSA, as determined under the Goldsmith Modification or the Rural Urban Commuting Areas (RUCAs); or is being treated as if located in a rural area pursuant to 42 U.S.C. 1395(d)(8)(E)
- Be a non-federal, short-term, general acute care facility

SafeNetRx Program

SafeNetRx was established in 2001 to provide affordable medication access to lowans in need of assistance. SafeNetRx created the Drug Donation Repository in 2007. Iowa's Drug Donation Repository has emerged as the largest prescription and over-the-counter drug repository program in the country. Through this program, lowans in need of assistance may receive medications and medical supplies for little or no cost. Donations are received from long-term care dispensing pharmacies, medical facilities and individuals. The medications and supplies are inspected by a pharmacist, distributed to medical facilities and dispensed to lowans in need. Over \$39 million in unused medicines have been recovered through the SafeNetRx Drug Donation Repository, providing nearly 100,000 lowans with needed medicines and supplies.

Patient Eligibility:

lowans at or below 200% of the federal poverty level and individuals who are under- or uninsured are eligible to receive donated medications and supplies.

Provider Eligibility:

Any organization or individual in the country can donate medications in their original sealed container or in tamper-evident packaging. Any pharmacy or medical facility with authorization to dispense per Iowa administrative rules may re-dispense donated medications and supplies.

Workforce Recruitment and Retention Opportunities

National Health Service Corps Loan Repayment Program

The National Health Service Corps (NHSC) Loan Repayment Program (LRP) offers primary care medical, dental, and mental and behavioral health care providers the opportunity to have their student loans repaid, while earning a competitive salary, in exchange for providing health care in urban, rural or tribal communities with limited access to care. The NHSC LRP offers two levels of funding, based upon a HPSA score. The following is a summary of the initial award amounts. With continued service, NHSC providers may be able to pay off all their student loans.

Site Type	Two Years Full-Time	Two Years Half-Time
Sites with HPSA Score of 14-26	Up to \$50,000	Up to \$25,000
Sites with HPSA Score of 0-13	Up to \$30,000	Up to \$15,000

Eligibility:

To be eligible to apply for the NHSC LRP, applicants must:

- Be a United States citizen (U.S. born or naturalized) or United States national
- Be a provider (or be eligible to participate as a provider) in the Medicare, Medicaid and the State Children's Health Insurance Program, as appropriate
- Be fully trained and licensed to practice in the NHSC-eligible primary care medical, dental or mental/behavioral health discipline and state for which the applicant is applying to serve
- Have a service commitment of at least two years full-time (at least 40 hours per week) or at least two years half time (at least 20 hours per week) at an NHSC-approved site
- Be a health professional in an eligible discipline with qualified student loan debt for education that led to the degree



Eligible Disciplines

Eligible disciplines for the NHSC LRP include the following:

- Physician (MD/DO)
 - Family Medicine
 - Obstetrics/Gynecology
 - General Internal Medicine
 - Geriatrics
 - General
 - Pediatrics
 - General Psychiatry
- Physician Assistant (primary care)
- Nurse Practitioner (NP)
 - Nurse Practitioner (adult, family, pediatric)
 - Psychiatric/mental health
 - Geriatrics
 - Women's Health
 - Certified Midwife
 - Psychiatric Nurse Specialist
- Dentistry (DDS/DMD)
 - Dental Hygienist
- Mental and Behavioral Health
 - Health Service Psychologist
 - Licensed Clinical Social Worker
 - Licensed Professional Counselor
 - Marriage and Family Therapist
 - Physician Assistant

Iowa State Loan Repayment Program (SLRP)

The Primary Care Recruitment and Retention Endeavor (PRIMECARRE) was authorized by the Iowa Legislature in 1994 to strengthen the primary health care infrastructure in Iowa. PRIMECARRE allocations currently support the Iowa Loan Repayment Program, with matching federal and state funds. The Iowa Loan Repayment Program offers two-year grants to primary care medical, dental and mental/behavioral health care professionals in a federally designated HPSA. Applicants may receive awards for a two-year full-time commitment or for a four-year half-time commitment. The program provides \$30,000 to \$50,000, and award amounts are tiered based on professions and amounts may vary based on available federal allocations, state matching funds and applicant scores.

Eligibility:

To be eligible for the Iowa Loan Repayment Program, applicants must have a two year full-time, or four year half-time, practice commitment in a public or non-profit site located in a HPSA. Eligible disciplines are summarized in the table below with maximum award amounts.

Discipline	Maximum Amount
<ul style="list-style-type: none"> • Primary Care Physician (MD/DO) <ul style="list-style-type: none"> • Family Medicine (and osteopathic general practice) • Internal Medicine • Pediatrics • Obstetrics/Gynecology • Geriatrics • Psychiatry General Practitioners • General and Pediatric Dentistry (DDS/DMD) • Pharmacist (Pharm) 	\$50,000
<ul style="list-style-type: none"> • Nurse Practitioners (NP) and Physician Assistants (PA) <ul style="list-style-type: none"> • Adult • Family • Pediatrics • Psychiatry/Mental Health • Geriatrics • Women’s Health • Psychiatric Nurse Specialist (PNS) • Registered Nurse (RN) • Certified Nurse Midwife (CNM) • Health Service Psychologist (Clinical and Counseling) (HSP) 	\$40,000
<ul style="list-style-type: none"> • Licensed Clinical Social Worker (LCSW/LISW) • Licensed Professional Counselor (LPC) • Marriage and Family Therapist (MFT) • Registered Clinical Dental Hygienist (RDH) • Alcohol and Substance Abuse Counselors (certified) 	\$30,000



Iowa State Conrad 30 J-1 Visa Waiver Program

Iowa participates in the Conrad 30 J-1 Visa Waiver Program, which assists in the recruitment of physicians to practice in communities that lack adequate access to physicians. Section 214-(1) of the Federal Immigration and Nationality Act [8 USC Section 1184(l)] allows each state to annually recommend up to 30 J-1 exchange visitors to be granted a waiver for the J-1 Visa two-year home-country residency requirement in return for practicing medicine full-time for a minimum of three years in a shortage area.

States are able to offer up to 10 FLEX waiver spots (not designated as underserved) for physicians who agree to work in non-shortage-designated areas and serve individuals residing in neighboring underserved communities.

Eligibility:

The J-1 medical doctor must

- Agree to be employed full-time (40 hours per week) in H-1B nonimmigrant status at a health care facility located in an area designated by the United States Department of Health and Human Services (HHS) as a HPSA, MUA, or MUP
- Obtain a contract from the health care facility located in an area designated by HHS as a HPSA, MUA, or MUP
- Obtain a “no objection” letter from his or her home country if the home government funded his or her exchange program
- Agree to begin employment at the health care facility within 90 days of receipt of the waiver, not the date his or her J-1 Visa expires

Volunteer Health Care Provider Program (VHCPP)

The VHCPP supports volunteerism of competent health care professionals by offering protection to eligible volunteer health care providers and eligible clinics providing free health care services. An individual volunteer health care provider holding a current active license and VHCPP agreement shall be afforded protection as an employee of the state, and a protected clinic holding a current protection agreement with the VHCPP shall be afforded protection as an agency of the state.

VHCPP Free Clinics

The individual volunteer health care provider must have a signed agreement with the identified clinic, location and hours in which they will be working. Free health care sites for individuals otherwise unable to pay for services include:

Clinic Name	Location	Website
Free Clinics of Iowa (FCI)	Various locations in Iowa	http://www.freeclinicsofiowa.org/find-clinic
Iowa City Free Medical Clinic (ICFMC)	Iowa City, IA	http://freemedicalclinic.org/pages/our-services.php
Community Health Free Clinic (CHFC)	Cedar Rapids, IA	http://www.communityhfc.org/
His Hands Ministries	Cedar Rapids, IA	http://www.hishandsclinic.org/
Healthy Kids Community Care School Based Health Clinics	Iowa City, IA (Iowa City High School, Iowa City South East Junior High School, and Iowa City Northwest Junior High School)	https://www.iowacityschools.org/Page/1164

Sponsor Entity or Sponsor Entity Clinic

A sponsor entity or sponsor entity clinic is a hospital, clinic, free clinic, health care facility, health care referral program, charitable organization or field dental clinic with a fully executed Sponsor Entity Agreement for the Volunteer Health Care Provider Program. The Sponsor Entity or Sponsor Entity Clinic enables an Individual Volunteer Health Care Provider to deliver health care services at the Sponsor Entity or Sponsor Entity Clinic to uninsured and underinsured persons. To apply as a Sponsor Entity Clinic for the VHCPP, the following must be submitted:

- Volunteer Health Care Provider Program application/agreement
- Proof of current licensure to the extent required by law for the facility
- Proof of 501(c)(3) status (Internal Revenue Code), if applicable
- Proof of current general liability insurance

Protected Clinic

A Protected Clinic is a field dental clinic, free clinic or specialty health care provider office providing free care to the uninsured and underinsured as an agent of the state. Each Protected Clinic location must have a signed Protection Agreement to receive defense and indemnification as a Protected Clinic. To apply as a Protected Clinic for the VHCPP, the following must be submitted:

- Volunteer Health Care Provider Program Protected Clinic application/agreement
- Proof of current licensure to the extent required by law for the facility
- Proof of 501(c)(3) status (Internal Revenue Code), if applicable
- Proof of current general liability insurance
- Documentation for all health care providers at the Protected Clinic, who provide the free health care services, including:
 - A current Protection Agreement with the Volunteer Health Care Provider Program; or
 - Proof of current professional liability insurance and proof of an active unrestricted license to practice in Iowa.
- A list of the current clinic board of directors contact information

Individual Health Care Provider

To be eligible as an Individual Volunteer Health Care Provider, a volunteer must:

- Submit an application and required information.
- Provide free health care services to uninsured and underinsured persons through a Sponsor Entity/ Sponsor Entity Clinic or a Protected Clinic.
- Hold an active unrestricted Iowa license, registration or certification to practice in Iowa as one of the following:
 - Advanced Registered Nurse Practitioner
 - Audiologist
 - Bachelor Social Worker
 - Chiropractor
 - Dental Assistant
 - Dental Hygienist
 - Dentist (DDS/DMD)
 - Emergency Medical Care Provider
 - Independent Social Worker
 - Licensed Practical Nurse
 - Marital and Family Therapist
 - Master Social Worker
 - Mental Health Counselor
 - Occupational Therapist
 - Optometrist
 - Pharmacist
 - Physical Therapist
 - Physician (MD/DO)
 - Physician Assistant, under the supervision of a Physician
 - Podiatrist
 - Psychologist
 - Registered Nurse
 - Respiratory Therapist
 - Speech Pathologist
- Hold a fully executed Protection Agreement with the Volunteer Health Care Provider Program.
- Specialty Health Care Providers must be referred by the Specialty Care Referral Network.
- A specialty health care provider may provide services in several locations. To be covered as an Individual Volunteer Health Care Provider, each location where services may be provided must have either a fully executed Sponsor Entity Agreement or Protection Agreement with the Volunteer Health Care Provider Program.

Abbreviations

AHEC	Area Health Education Centers
Auto-HPSA	Automatic Facility HPSA
CAH	Critical Access Hospital
CMS	Centers for Medicare and Medicaid Services
Flex	Medicare Rural Hospital Flexibility Program
FORHP	Federal Office of Rural Health Policy
FPL	Federal Poverty Level
FQHC	Federally Qualified Health Center
FTE	Full-Time Equivalent
HHS	United States Department of Health and Human Services
HPSA	Health Professional Shortage Area
HRSA	Health Resources and Services Administration
IDPH	Iowa Department of Public Health
IHS	Indian Health Service
IMU	Index of Medical Underservice
LAL	FQHC Look-A-Like
LRP	Loan Repayment Program
MBQIP	Medicare Beneficiary Quality Improvement Project
MSA	Metropolitan Statistical Area
MUA	Medically Underserved Areas
MUP	Medically Underserved Populations
NHSC	National Health Service Corps
NSC	Nearest Source of Care
OFAC	Other Facility HPSA
PRIMECARRE	Primary Care Recruitment and Retention Endeavor
RHC	Rural Health Clinic
RUCA	Rural Urban Commuting Area
SDMP	Shortage Designation Modernization Project
SHIP	Small Rural Hospital Improvement Program
SLRP	State Loan Repayment Program
UI-OSCEP	University of Iowa, Office of Statewide Clinical Education Program
VHCPP	Volunteer Health Care Provider Program

Program Resources

Shortage Designations

<https://idph.iowa.gov/policy-and-workforce-services/rural-health-primary-care/primary-care>

<https://medicine.uiowa.edu/oscep/>

<https://bhw.hrsa.gov/shortage-designation>

Flex Program

<https://idph.iowa.gov/policy-and-workforce-services/rural-health-primary-care/flex>

<https://www.hrsa.gov/rural-health/rural-hospitals/index.html>

<https://www.ruralcenter.org/tasc/flex>

SHIP Program

<https://idph.iowa.gov/policy-and-workforce-services/rural-health-primary-care/ship>

<https://www.hrsa.gov/rural-health/rural-hospitals/index.html>

<https://www.ruralcenter.org/ship>

SafeNetRx Program

<https://idph.iowa.gov/policy-and-workforce-services/rural-health-primary-care/repository>

National Health Service Corps Loan Repayment Program

<https://nhsc.hrsa.gov/>

Iowa State Loan Repayment Program

<https://idph.iowa.gov/policy-and-workforce-services/rural-health-primary-care/primecarre>

Iowa State Conrad 30 J-1 Visa Waiver Program

<https://idph.iowa.gov/policy-and-workforce-services/rural-health-primary-care/primary-care>

<https://i1visawaiverrecommendation.state.gov/>

<https://www.uscis.gov/working-united-states/students-and-exchange-visitors/conrad-30-waiver-program>

<http://www.conrad30.com/basics.html>

Volunteer Health Care Provider Program

<https://idph.iowa.gov/policy-and-workforce-services/rural-health-primary-care/vhcpp>



For more information about this report:

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Visit <https://idph.iowa.gov/policy-and-workforce-services/rural-health-primary-care> for contact information.

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