PROGRAM GUIDANCE

The Primary Care Practitioner Loan Redemption Program of New Jersey (NJLRP) goal is to promote access to primary care services in State designated underserved areas by improving the maldistribution of primary care personnel. As an incentive, the NJLRP provides for the redemption of eligible graduate education loans for its participants in exchange for service in underserved areas. Eligible participants must be a resident of New Jersey, licensed to practice in New Jersey, have completed a discipline as a primary care Physician (Internal Medicine, Pediatrics, Family Practice, Obstetrics/Gynecology), Dentist (General Dentist, Pedodontist), Certified Nurse Practitioner, Certified Physician Assistant, Certified Nurse Midwife. If the loan redemption is funded by matching dollars from federal/state funds, then the eligible participant must be a U.S. citizen or U.S. national.

Please read the program and placement site application guidance before proceeding with the placement site application. The guidance provides an explanation of program criteria and requirements. The NJLRP requires placement sites to sign an Agreement for a minimum of two (2) years, once approved to participate by the Committee.

1. Eligibility Screening. Applications are screened by NJLRP staff. Following a favorable review, eligible placement sites may be contacted for a site visit with NJLRP staff. Placement sites which are ineligible upon review of submission will be notified via written correspondence and the reason will be specified. Placement sites are presented to the NJLRP Selection Committee for approval into the program at its next meeting. The Selection Committee meets quarterly to review placement site and provider applications. Applications are accepted on an on-going basis. Service obligation will begin on the date the Selection Committee approves the site. All hours worked by a provider prior to site approval in the NJLRP cannot be used toward NJLRP service obligation.

2. Site Requirements.
   - Qualifying Underserved Areas. In order to qualify to participate as an eligible placement site; sites should be: a) located within a medically underserved area as listed on the New Jersey Medically Underserved Index (NJMUI) identified by the Commissioner of New Jersey Department of Health; or located in a State, County or Municipal private non-profit health care facilities which meet staffing shortage ratios; or b) located within a Federally designed Health Professional Shortage Area (HPSA) or qualifying Federally Qualified Health Center (FQHC) or Community/Migrant Health Center (C/MHC) as defined in Section 332 of the Public Health Service Act.
   - Patient Population Served and other Qualifying Criteria.
     - Medicaid. Sites must accept Medicaid (Fee for Service) and demonstrate that the percentage of medically underserved patients that it serves, as determined by its Medicaid and uninsured patients, is equal or greater than the percentage of Medicaid eligible and uninsured persons in the County.
     - Medicare. Must accept Medicare assignment.
     - Medicaid Managed Care. Must participate in Medicaid Managed Care programs. Sites must submit copies of Medicaid Managed Care signed contracts verifying participation. The NJLRP does not require a full copy of each contract; it is acceptable to submit the first and last page of each contract with signatures.
     - Sliding Fee Schedule. Placement sites must have an established sliding fee scale (SFS). Sites must submit a copy of a current Sliding Fee Schedule on organizational letterhead to include an effective date. Discounted/sliding fee schedules are a means of addressing the need for equitable charges for services rendered to patients. A discounted/sliding fee schedule is developed according to local fee standards and must be in writing. Discounted/sliding fees are based upon federal poverty guidelines, and patient eligibility is determined by annual income and family size. Schedules are established and implemented to ensure that a non-discriminatory, uniform, and reasonable charge is consistently and evenly applied. For patients whose household income and family size place them below poverty, a typical, nominal fee is often between $7 and
$15. Patients between 101-200% of poverty are expected to pay some percentage of the full fee. A discounted/sliding fee schedule applies only to direct patient charges. Billing for third party coverage (Medicare, Medicaid, SCHIP or private insurance carriers) is set at the usual and customary full charge. To obtain a Sliding Fee package guide for adoption, please contact the NJLRP office.

- **Patient Origin Study (POS).** Placement sites not located in a State designated underserved area (SDUA) listed on the New Jersey Medically Underserved Index [NJMUI] must submit a Patient Origin Study (POS). In order to qualify, sites must demonstrate that at least 80% of its patients originate from SDUAs. To obtain a Patient Origin Study guide, please contact the NJLRP office.

3. **Reporting Requirements and Evaluations.** Approved placement sites are required to complete quarterly service reports, a six month evaluation and an annual evaluation.

- **Quarterly Service Reports (QSRs).** Sites must submit quarterly service reports on patient services rendered for each NJLRP provider. The NJLRP will send the QSR on-line to the designated person at the site each quarter for completion and submission. The NJLRP reserves the right to confirm patient statistics submitted to the program by the placement site.

- **Six Month Probationary Period.** During the initial six month probationary period of a provider’s first contract year, sites may be contacted to discuss the NJLRP provider’s work performance, productivity and suitability of the placement.

- **Annual Evaluation.** At the end of each year a written annual evaluation on each provider must be completed and submitted to the NJLRP throughout the service obligation.

4. **Provider Contract and Service Obligation.**

- **Contracts.** Placement sites are required to conclude a contract with the applicant to include: a mutually acceptable annual salary; a mutually agreed upon work schedule; a mutually acceptable benefit package, including vacation and health insurance; support for a relevant continuing education experience; initial term for at least 1 year with satisfactory performance, with annual renewals thereafter, again contingent upon satisfactory performance.

- **Provider Service Obligation.** NJLRP providers are required to work on a full-time basis (40 hours per week) during the initial two years on the program. For the third and fourth year of service NJLRP providers may opt to work part-time, extending their service obligation over a period of two years each year.

  - **Full-time practice is defined as:**
    - For all providers except as noted below at least 32 of the minimum 40 hours per week must be spent providing direct patient care at the approved placement site during normally scheduled office hours. The remaining 8 hours per week may be spent in practice related administrative duties. Time spent “on-call” will not count toward the 40 hour week.
    - For providers of obstetrics/gynecology at least 21 hours of the minimum 40 hours per week must be spent providing direct patient care at the approved placement site during normally scheduled office hours. The remaining 19 hours per week may be spent in practice related administrative duties. Time spent “on-call” will not count toward the 40 hour week.
    - Providers may dedicate up to 20% of this time to resident and/or medical/dental student supervision and teaching, provided it does not reduce their productivity below the accepted standards for primary care physicians/dentists. Exceptions to this must be approved by the Selection Committee.
Part-time practice is defined as:

- For all providers except as noted below at least 16 of the minimum 20 hours per week must be spent providing direct patient care at the approved placement site during normally scheduled office hours. The remaining 4 hours per week may be spent in practice related administrative duties. Time spent “on-call” will not count toward the 420 hour week.
- For providers of obstetrics/gynecology at least 11 hours of the minimum 20 hours per week must be spent providing direct patient care at the approved placement site during normally scheduled office hours. The remaining 9 hours per week may be spent in practice related administrative duties. Time spent “on-call” will not count toward the 420 hour week.
- Providers may dedicate up to 20% of this time to resident and/or medical/dental student supervision and teaching, provided it does not reduce their productivity below the accepted standards for primary care physicians/dentists. Exceptions to this must be approved by the Selection Committee.

Provider Placement. The maximum number of providers that will be placed in any one approved placement site is contingent on provider productivity standards; availability of program funds; and other applications in process regarding sites of greatest need. Sites must demonstrate that it can meet NJLRP productivity standards to qualify as an approved site and can sustain the placement of approved NJLRP participants.

5. Productivity Standards. The NJLRP has established productivity standards that are used as a guide to measure each participant's work performance. Participating sites must submit Quarterly Service Reports for each approved participant. NJLRP productivity standards are used as the minimum number of annual patient encounters a NJLRP provider is required to provide while enrolled on the program (see chart below). The NJLRP uses these standards to measure productivity of its providers and placement sites. If a NJLRP provider is unable to meet the NJLRP productivity standards during their first year of service, the provider and placement site will receive a written warning. If a provider's productivity falls below the NJLRP standards at the end of the second, third or fourth year of service, the NJLRP will reassess the approval status of the provider and/or placement site. The NJLRP will determine if the provider should be granted contract renewal at the placement site location.

### Primary Care Practitioner Loan Redemption Program (NJLRP) Productivity Standards

<table>
<thead>
<tr>
<th>Specialty</th>
<th>Number of Patient Visits Annually</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Dentists and/or Pedodontists</td>
<td>2,500-3,000</td>
</tr>
<tr>
<td>Family Practice</td>
<td>3,500-4,000</td>
</tr>
<tr>
<td>Internal Medicine</td>
<td>3,000-3,500</td>
</tr>
<tr>
<td>Obstetrics/Gynecology</td>
<td>3,000-3,500</td>
</tr>
<tr>
<td>Pediatrics</td>
<td>3,700-4,200</td>
</tr>
<tr>
<td>Physician Assistants</td>
<td>2,500-3,000</td>
</tr>
<tr>
<td>Nurse Midwives</td>
<td>2,200-2,700</td>
</tr>
<tr>
<td>Nurse Practitioners</td>
<td>see specialty (below)</td>
</tr>
<tr>
<td>• Family Practice</td>
<td>1,600</td>
</tr>
<tr>
<td>• Obstetrics/Gynecology</td>
<td>2,000</td>
</tr>
<tr>
<td>• Pediatrics</td>
<td>1,600</td>
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</tbody>
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The NJLRP placement site application consists of two parts: 1. Completion of the placement site application and, 2. Submission of required supporting documents. Placement sites are required to complete each of the sections and submit the placement site application to the NJLRP along with supporting documents.

A. Site Location
   Answers to this section include the placement site name, contact person, mailing and email addresses, Medicaid number; Medicaid Managed Care program, and other contact information.

B. Scope of Service
   This section should include the hours of operation and location of all offices. If there are additional offices the name of each address location must be provided.

C. Description of Practice
   Answers to this section should include the type of practice; information on Medicaid Managed Care participation, Medicare participation, Sliding Fee Schedule participation, employment vacancies and if the practice is located in a New Jersey Medically Underserved Area.

D. Patient Population Served
   This section should be completed to include the medical and/or dental patients the site currently has for the specified reporting period and Payor Mix. The section for visits consists of the number of times each of the specified patients came into the practice for services during the reporting period. Information in this section should be completed for a recent twelve (12) month period of service. If a newly opened practice; the data reported on the application should be projected for both patients and visits for a 12 month period.

E. Patient Visits by Specialty
   Data in this section should include the number of visits provided for each specialty during the reporting period listed on the placement site application. This section should only include primary care visits; Internal Medicine, Obstetrics/Gynecology, Pediatrics, Family Practice, General Dentistry, and Pedodontics. Do not include other patient visits in this section not considered primary care by the NJLRP.

F. Staffing
   Indicate the number of each full-time and part-time provider by specialty for the reported twelve (12) month period of service. If completing the section for part-time staff; you should complete the number of part-time staff by specialty for the same twelve month period of service. Complete the actual number of hours worked for each part-time staff (i.e. if a part-time staff member works 12 hours per week then these hours should be listed). If a part-time staff member is a percentage full time equivalent (FTE) include information in this section.