

# **The National Health Service Corps and Health Care for the Homeless Programs**

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*A Toolkit for Navigating  
Logistics and Opportunities*

National Health Care for the Homeless Council  
July 2013

NATIONAL  
HEALTH CARE  
*for the*  
HOMELESS  
COUNCIL



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## INTRODUCTION

The National Health Service Corps (NHSC) is a federal program that provides scholarships and loan repayment to students and clinicians in exchange for a commitment to provide primary health care in a Health Professional Shortage Area (HPSA). Created in 1972, the NHSC now includes nearly 10,000 clinicians who serve more than 10.4 million people in rural, urban, and frontier areas.

Health Care for the Homeless (HCH) grantees, by nature of their 330(h) funding, are approved NHSC sites (meaning that they do not have to apply), and can therefore, immediately engage with the NHSC to recruit qualified providers. As an NHSC site, you have an opportunity to recruit NHSC providers, who frequently choose to remain working in underserved areas after their NHSC service commitment has concluded. The 2012 NHSC Retention Survey found that 82 percent of NHSC clinicians who completed their services obligations continued to practice in underserved areas in the short term (up to one year after their service completion), and 55 percent still practiced in underserved areas a decade after their service completion. HCH programs are underrepresented among NHSC sites in the NHSC Jobs Center [<http://nhscjobs.hrsa.gov/external/search/index.seam>] which is a free online recruitment tool that connects thousands of primary care providers with job vacancies across the country. As of June 2013, there are 435 active NHSC Health Care for the Homeless sites, but only 54 of these have site profiles on the NHSC Jobs Center ([nhscjobs.hrsa.gov](http://nhscjobs.hrsa.gov)), and 257 HCH sites do not have a point of contact listed. As an NHSC-approved site, you must complete a site profile in order to post job vacancies on the NHSC Jobs Center. The purpose of this toolkit is to provide the HCH community with the knowledge and resources to recruit and retain providers through NHSC programs. Included in the toolkit is an overview of the NHSC programs, benefits and logistics of being an NHSC site, and recruitment resources. Information in this toolkit was obtained from the NHSC website [<http://nhsc.hrsa.gov/index.html>], the NHSC Site Reference Guide [<http://nhsc.hrsa.gov/currentmembers/membersites/downloadableresources/servicesitereferenceguide.pdf>], and NHSC staff members. It is our hope that this toolkit will help HCH programs better leverage the resources of the NHSC in order to provide the highest quality care to the people they serve.

This document was developed in collaboration with the National Health Service Corps. We would like to especially thank the Bureau of Clinician Recruitment and Service Team at the Health Resources and Services Administration of the U.S. Department of Health and Human Services for their time and expertise in reviewing this document, as well as for presenting a workshop at our 2013 National Conference and a webinar in June 2013 (archived on our website). We would also like to thank Melanie Taylor, Chief Operating Officer of Fourth Street Clinic/Wasatch Homeless Health Care in Salt Lake City, Utah, for providing qualitative information on the organization's long and successful experience with the NHSC. This work is made richer by their contributions.

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## I. OVERVIEW OF THE NATIONAL HEALTH SERVICE CORPS

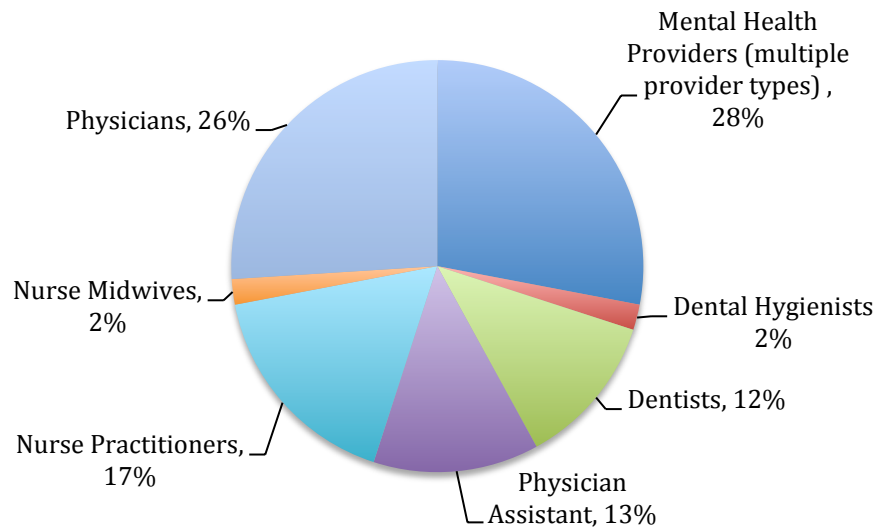
The National Health Service Corps (NHSC) is a federal program that is part of the U.S. Department of Health and Human Services (DHHS). Specifically, the NHSC is administered by the Health Resources and Services Administration (HRSA), Bureau of Clinician Recruitment and Service (BCRS). Clinicians working through the NHSC receive scholarships and loan repayment in exchange for committing to work in an underserved area, known as a Health Professional Shortage Area (HPSA), for a defined period of time.

### History and Field Strength

The NHSC was created in response to the health care crisis that emerged in the United States in the 1950s and 1960s. Older physicians were retiring and young doctors started to choose specialization over general practice, leaving many areas of the country without medical services. The NHSC enabled health centers in rural, urban, and frontier communities to compete with private medical practices and help to limit a growing primary health care shortage. Since its establishment in 1972, the NHSC has supported over 40,000 primary care medical, dental and behavioral health providers working in underserved areas at NHSC-approved sites. For more information about the history of the NHSC, please see <http://nhsc.hrsa.gov/corpsexperience/aboutus/missionhistory/index.html>

As of September 30, 2012, there were nearly 10,000 NHSC clinicians and 14,000 NHSC-approved sites across the country, providing culturally competent care to nearly 10.4 million Americans regardless of their ability to pay. All those who are involved with the Corps, including sites, are dedicated to ensuring access to health care for everyone, preventing and treating disease and illness, and caring for the most vulnerable populations who may otherwise go without care. The NHSC supports various primary care disciplines and specialties, as illustrated by the chart below.

## NHSC Field Strength as of September 2012



### NHSC Programs

In exchange for committing to work in a HPSA for a defined period of time, clinicians can receive support through one of four programs offered through the NHSC:

- *Scholarship Program (SP):* Awards scholarships to students pursuing primary health care professions training in NHSC-eligible disciplines, in return for a commitment to provide health care to communities in need upon graduation and the completion of training. In return for each school year (or partial school year) of financial support received, students agree to provide primary health care services for one (1) year at an NHSC-approved site located in a high-need HPSA. For the first school year, or partial school year, of support, there is a minimum two-year service commitment. The SP includes tax-free payment for up to four years for tuition, required fees, and other reasonable educational costs, as well as a taxable monthly living stipend. Eligible individuals must be enrolled or accepted in the following primary care disciplines in an eligible degree program at a U.S.-accredited school:

- Medicine (MD or DO)
- Dentistry (DDS or DMD)
- Nurse Practitioner
- Certified Nurse-Midwife
- Physician Assistant

For more information, please see <http://nhsc.hrsa.gov/scholarships/overview/index.html>.

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- *Loan Repayment Program (LRP)*: Offers loan repayment assistance to licensed primary health care providers in exchange for working (and partial credit for teaching) in rural, urban, and frontier communities with limited access to care. LRP offers two levels of funding based upon the need of the community in which a provider works, as defined by the HPSA score. There are full-time and half-time service commitment options. Providers must practice in one of the following disciplines:

- Primary Care Physician (MD or DO)
- Dentist (DDS or DMD)
- Primary Care Certified Nurse Practitioner (NP)
- Certified Nurse-Midwife (CNM)
- Primary Care Physician Assistant (PA)
- Registered Dental Hygienist (RDH)
- Health Service Psychologist (HSP)
- Licensed Clinical Social Worker (LCSW)
- Psychiatric Nurse Specialist (PNS)
- Marriage and Family Therapist (MFT)
- Licensed Professional Counselor (LPC)

For more information, please see <http://nhsc.hrsa.gov/loanrepayment/applicationprocess/index.html>.

- *Students to Service Loan Repayment Program (S2S LRP)*: Provides loan repayment assistance to medical students (MD and DO) in their last year of school in return for a commitment to provide primary health care services in eligible HPSAs of greatest need. S2S LRP offers full- and half-time service commitments. With continued service, eligible providers may be able to pay off all qualifying student loans. For more information, please see <http://nhsc.hrsa.gov/loanrepayment/studentstoserviceprogram/index.html>.
- *State Loan Repayment Program (SLRP)*: A federally-funded grant program to states and territories that provides cost-sharing grants to assist them in operating their own state educational loan repayment programs for primary care providers working in HPSAs within their state. The State Loan Repayment Program does not provide loan repayment directly to individual health professionals, and not all states offer SLRP. Providers interested in obtaining information about their state's educational loan repayment program must contact their individual SLRP point of contact for information about eligibility and requirements. Further information about SLRP and state-by-state points of contact is available at <http://nhsc.hrsa.gov/loanrepayment/stateloanrepaymentprogram/>.

## II. HCH GRANTEES AS NHSC SITES

By nature of their 330(h) funding, HCH grantees are granted an automatic facility HPSA designation and are therefore approved NHSC sites. This means that HCH grantees *do not* have to apply for NHSC approval and can immediately engage with the benefits of being an NHSC site. A site can include both main and satellite sites; a main site is generally the primary clinical practice site for the organization, often housing administrative/executive offices.



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## **Benefits of Being an NHSC Site**

### ■ *Assistance in helping you attract and retain qualified and dedicated primary care providers*

By joining the NHSC, sites are able to recruit dedicated clinicians (through the NHSC Loan Repayment and/or Scholarship Programs) to provide health care services to their communities.

- NHSC-approved sites are able to recruit clinicians through the NHSC Jobs Center at <http://nhscjobs.hrsa.gov/external/search/index.seam>. The NHSC Job Center provides a comprehensive list of NHSC-qualifying job openings across the nation and is a valuable resource for NHSC applicants and members, as well as non-NHSC providers who are interested in working in medically underserved areas.
- NHSC-approved sites are also able to recruit clinicians through participation in virtual events like webinars, webcasts and the NHSC Virtual Job Fairs which brings together job-seekers and NHSC-approved sites with vacancies.
- NHSC providers are eligible to apply for additional financial support in return for additional service, supporting the retention of NHSC members at NHSC-approved sites.

### ■ *Opportunities to network with other NHSC-approved sites and community organizations*

- NHSC-approved sites are provided opportunities to network with other NHSC sites. In addition, NHSC sites are able to develop and foster partnerships with academic institutions and other community organizations.
- Celebrate Corps Community Day by partnering with organizations in your community, inspiring young health care providers, or hosting an engaging event that raises the awareness of primary care and its impact on underserved communities. Corps Community Day is celebrated every year in October. For more information, please visit <http://www.nhsc.hrsa.gov/corpsexperience/corpscommunityday/index.html>.

### ■ *Direct access to State Primary Care Offices (PCOs) that provide assistance with increasing access to primary health care services in your community*

NHSC sites have direct access to State Primary Care Offices (PCOs), which are state-based offices that provide assistance to communities in order to increase access to primary and preventive health care services. The PCOs provide technical assistance to NHSC-approved sites to address primary care needs.

### ■ *Membership in a network of partners who are dedicated to providing care in communities with limited access to health care*

## **Health Professional Shortage Area (HPSA) Scores**

A Health Professional Shortage Area (HPSA) is a designation, determined by the Health and Human Services Secretary, of a health workforce or provider shortage. There are three categories of HPSAs based on health discipline: Primary Care, Dental, and Mental Health. For each discipline category, there are three types of HPSAs each with their own designation requirements: geographic area, population group, or health

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care facility. HPSA scores reflect the level of need at a service site and are used in determining priorities for assignment of NHSC clinicians. HPSA scores range from 1-25 for primary care and mental health, and from 1-26 for dental. HPSA scores determine the level of funding given to NHSC providers, as well as the number of providers that are eligible for support at a single site. Priority funding is given to clinicians working at a site with a HPSA score of 14 or higher, which corresponds to greater need.

By nature of their 330(h) funding, HCH grantees are granted an automatic *facility* HPSA designation and therefore do not have to apply to be NHSC-approved. However, as auto-facility HPSA sites, HCH grantees *do* have to obtain a HPSA score for the site(s) at which an NHSC provider will work. As auto-facility HPSA sites, HCH grantees are scored by the Bureau of Clinician Recruitment and Service in HRSA at the time of the initial grant award from the Bureau of Primary Health Care (BPHC) and based on nationally available data sources. However, it is very important that the site checks its HPSA score regularly and requests a re-score if the information does not look accurate or if the facility has updated or more current data.

Data for determining HPSA scores can be obtained from a variety of sources, including UDS data, state Primary Care Offices (PCOs), US Census data, local/county/state level data, and GIS road classification data. The HPSA scoring methodology varies by category and type:

- Scoring Methodology for Primary Care
  - Population to Primary care physician ratio
  - Percent of population with incomes below 100 percent of poverty
  - Infant mortality rate or low birth weight (whichever score is higher)
  - Travel time or distance to the nearest available sources of care
  
- Scoring Methodology for Dental
  - Population to Dentist ratio
  - Percent of population with incomes below 100 percent of poverty
  - Access to Fluoridated Water < 50 percent of the population
  - Travel time or distance to the nearest available sources of care
  
- Scoring for Mental and Behavioral Health
  - Population to Primary care physician ratio
  - Percent of population with incomes below 100 percent of poverty
  - Travel time or distance to the nearest available sources of care
  - Youth Dependency Ratio
  - Elderly Dependency Ratio
  - Substance Abuse Prevalence
  - Alcohol Abuse Prevalence

For more information on auto-HPSAs please contact your state PCOs. A list of all PCOs can be found at: <http://bhpr.hrsa.gov/shortage/hpsas/primarycareoffices.html>.

### **Site Roles and Responsibilities**

Serving as an NHSC site does involve some additional responsibilities. These are primarily related to assisting providers in fulfilling their service obligations, site monitoring and compliance, and completing an annual NHSC Site Survey. Depending on the size and administrative structure of an organization, oversight

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of NHSC-related issues and responsibilities can reside with the human resources department, chief operating officer, chief executive officer, or other administrative personnel as deemed appropriate by the site.

➤ *Assisting Providers in successfully fulfilling their service obligations*

NHSC clinicians enter into a contractual agreement with the NHSC, thus it is important that NHSC-approved sites afford providers the opportunity to fulfill this agreement. NHSC expects member sites to do the following to support NHSC members in fulfilling their service obligation:

- a. Ensure clinicians work only at NHSC-approved service sites; each site must be approved prior to the beginning of a clinician's assignment at that site.
- b. Encourage clinicians to follow the NHSC minimum hourly and weekly service requirements; however, the employment contract between the NHSC-approved site and clinician may stipulate additional work hours.
- c. Report and verify leave for each six months of the clinician's contract through the NHSC Customer Service Portal account [<https://programportal.hrsa.gov/extranet/landing.seam>]. Clinicians are allowed approximately 35 absences per service year with the NHSC; NHSC-approved sites also approve the clinician's reported leave, which must include any time away from the office taken by the NHSC clinician (e.g., annual, sick, holidays, continuing medical education).
- d. Activate the site administrator/representative through the Customer Service Portal account to verify clinician service time, review in-service clinician information, and post job openings.
- e. Submit required documents to facilitate a transfer request if applicable. Prior to leaving a service site, clinicians must submit a transfer request via the Customer Service Portal to change his or her current site to another service site. To ensure that NHSC-approved service sites can continue to meet the needs of patients, the NHSC strongly encourages NHSC clinicians to discuss their plans with the site first. An NHSC clinician's current site must submit the appropriate documentation to the Division of Program Operations (DPO). Further information is available in the NHSC Site Reference Guide, which is available at <http://nhsc.hrsa.gov/downloads/sitereference.pdf>.
- f. Make available for review to the NHSC an NHSC clinician's personnel documents, communications and/or practice-related documents as needed. The NHSC continues to monitor an NHSC clinician's compliance with NHSC service requirements and eligibility to work.
- g. Provide appropriate supervision to NHSC clinicians, as well as needed orientation, training, and mentorship regarding the site's processes and procedures, client population, and primary care practice. Most often, site assignments are new work and living environments and experiences for NHSC clinicians.
- h. Routinely check the National Practitioner Data Bank (NPDB) (<http://www.npdb-hipdb.hrsa.gov>) to assure the quality of health care practitioners that are hired.

➤ *Site Monitoring and Compliance*

The Division of Regional Operations (DRO) is responsible for monitoring NHSC sites. The purpose of site monitoring is to establish oversight processes and activities to identify at-risk sites, provide opportunities to address technical assistance needs that will promote sustainability, and increase NHSC program compliance. Additionally, site monitoring serves to support NHSC clinicians by improving the

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sites' understanding and compliance with NHSC clinician service requirements. Site monitoring helps to strengthen the relationships between NHSC program personnel, NHSC clinicians, and sites to address specific site needs.

Site Visits: DRO performs site visits to NHSC, approximately once every three years, in order to ensure compliance with site requirements and to provide any necessary technical assistance. Site visits are coordinated with the State PCO, and may include their representative in the visiting team.

During a site visit, the following can be expected:

- NHSC sites are evaluated according to their understanding and implementation of NHSC site and clinician service requirements. During a visit, NHSC staff will also provide needed technical assistance to answer a site's questions and ensure compliance with NHSC requirements in order to remain an NHSC-approved site.
- The site visit is initiated by DRO staff in collaboration with the site and State PCO. Once a date is agreed upon, DRO staff may request documentation prior to the site visit (e.g., their Uniform Data System (UDS) Report or NHSC Annual Site Survey, policies on non-discrimination, Medicare/Medicaid acceptance, sliding fee scale information, recruitment/retention plan if available, and policies and procedures for personnel and practice management). These materials are reviewed in advance of the actual site visit. DRO staff also review individual provider data through BCRS Management Information System Solution (BMISS) and are prepared to verify or document any inaccuracies in the database if necessary regarding NHSC clinicians at the site.
- During the site visit, DRO staff will meet separately with the site administrator and then NHSC clinicians (either individually or in a group if number is large). The discussion with the site administrator is focused on how the site is meeting NHSC expectations and requirements. Using a standard site visit tool, questions will be asked regarding the provision of cultural competent services, credentialing policies, types of referral systems in place, involvement in the community, recruitment and retention planning, salary and benefit packages, personnel and practice management policies, and NHSC data reporting requirements. Emphasis will be placed on assuring that the site is financially sound and offering appropriate support to the NHSC clinicians at the site. This visit also provides the opportunity for the site to ask questions of the NHSC program and for DRO staff and State PCOs to offer technical assistance.
- Interviews with the NHSC clinicians are conducted with a dual focus of assuring clinicians are meeting NHSC requirements and making certain they are integrating into the community and experiencing a rewarding practice setting. A priority for these visits is the actual face-to-face interaction between the NHSC representative and the NHSC clinician.

Site Compliance: The following steps are critical in order for sites to stay in compliance:

1. Continue to offer culturally-appropriate, primary health care services to all patients in the HPSA, regardless of the patient's ability to pay;
2. Agree not to discriminate in the provision of care for patients due to their socioeconomic status, race, ethnic origin, gender, religious beliefs and practices, or sexual orientation;
3. Offer a sliding fee scale;
4. Contact NHSC if there are any changes in the HPSA, the site changes location, or if there are NHSC clinician concerns such as changes in employment or disciplinary concerns;
5. Make appropriate patient referrals;

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6. Provide an opportunity for NHSC clinicians to complete their requisite service commitment as stated in their respective NHSC service contracts;
  7. Agree not to reduce an NHSC clinician salary due to NHSC support;
  8. Conduct appropriate clinician background review;
  9. Adhere to sound fiscal management policies; and
  10. Submit an NHSC Site Survey (formerly known as the UDS Report) annually.

► *NHSC Site Survey*

The NHSC Annual Site Survey (formerly known as the NHSC UDS Report) is a data collection system designed to measure the primary health care services provided to underserved and vulnerable populations by NHSC sites. The report provides both the NHSC and NHSC-approved sites with information regarding the services provided, number of users, staffing, production, finances, and managed care enrollment at the various sites. For more information regarding the NHSC Site Survey, please visit <http://nhsc.hrsa.gov/currentmembers/membersites/reportingrenewal/index.html>

### III. PROVIDER RECRUITMENT AND RETENTION

Engaging with the NHSC is an excellent strategy for recruiting and retaining qualified health care providers who choose to work in areas where they are most needed. Recruitment occurs through the NHSC Jobs Center [<http://nhscjobs.hrsa.gov/external/search/index.seam>] as well as through NHSC Virtual Job Fairs. Furthermore, the NHSC strongly encourages sites to develop and implement recruitment and retention plans. Support from the NHSC constitutes a significant investment in the education and training of providers in underserved areas, and intentional commitment to retaining these providers is critical in preventing a “revolving door” phenomenon.

In order to begin recruiting NHSC providers, you must first review the NHSC Jobs Center [<http://nhscjobs.hrsa.gov/external/search/index.seam>] website, set up a NHSC Site Portal Account, and create/update your Site Profile. Your Site Profile is your primary marketing tool to attract NHSC providers and other clinicians who use the Jobs Center, so be sure to include all relevant information (including photographs) to illustrate the personality and atmosphere of your organization and what it’s like to work there. Also, you are encouraged to include any pertinent information (e.g., leisure activities, school systems, information on the community), that may be of interest to clinicians seeking employment at your site.

#### NHSC Jobs Center and Site Profile:

1. Review the NHSC Jobs Center at <http://nhscjobs.hrsa.gov>. The Jobs Center is used not only by NHSC providers, but also by other primary care clinicians who are looking for work in underserved areas.
  - Is your site listed?
  - Is the information correct and up to date?
  - Is a point of contact listed?
2. Log-Into/Create a Site Portal Account <https://programportal.hrsa.gov>
  - Update Site Profile (<http://nhsc.hrsa.gov/sites/SiteProfile/>)

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- Upload pictures of your site into your Site Profile. Get creative! Some sites include pictures of their staff at extracurricular events like 5K races, staff parties, etc. Remember—your site profile is your primary marketing tool to attract providers.
  - Add at least two points of contact.
  - Add any open clinical vacancies (these will be reflected on the Jobs Center)

#### **Virtual Job Fairs:**

This platform provides a cost-effective solution for promoting job vacancies by connecting sites and providers virtually using Adobe Connect technology. BCRS hosts several Virtual Job Fairs each year. In 2012, BCRS held three Virtual Job Fairs in 2012 which enabled 206 NHSC-approved sites from 27 states to promote more than 370 job opportunities to 575 providers from across the country. By completing your Site Profile and ensuring that your organization lists two current points of contact, you will receive notification of upcoming Virtual Job Fairs for which you are eligible to participate in, and which you can advertise clinical vacancies in your organization.

#### **Recruitment and Retention Plan**

The NHSC strongly suggests that all sites develop and maintain a plan to guide the recruitment and retention of clinicians to help ensure a viable NHSC-approved site. A recruitment and retention plan clearly states the policies and processes that a site will utilize to recruit and maintain clinical staffing levels needed to appropriately serve the community. Sites should keep a current copy of your plan accessible for review during NHSC site visits, and should periodically update the plan to address any factors that may have impacted the management of a service site.

## **IV. SITE CUSTOMER SERVICE PORTAL**

The Site Customer Service Portal (<https://programportal.hrsa.gov/extranet/landing.seam>) is where sites manage all NHSC information and issues. The Portal allows sites to access their information and complete transactions online at any time of day. Through the Portal, NHSC sites can:

- Update contact information
- Ask BCRS a question
- Complete a site profile and upload photos
- Post job vacancies

It is important to note that there is occasionally scheduled maintenance to the Customer Service Portal, so please do not wait until the last minute to submit required information via the Portal. Complications stemming from delays with the Customer Service Portal can endanger the good standing of NHSC providers if required documentation is late.

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## V. FURTHER RESOURCES

- National Health Service Corps Website  
<http://nhsc.hrsa.gov/index.html>
- NHSC Site Reference Guide  
<http://nhsc.hrsa.gov/downloads/sitereference.pdf>
- NHSC For New Sites  
<http://nhsc.hrsa.gov/currentmembers/membersites/fornewsites/index.html>
- NHSC Site Profile Creation Page  
<http://nhsc.hrsa.gov/sites/SiteProfile/index.html>
- NHSC Jobs Center  
<http://nhscjobs.hrsa.gov/external/search/index.seam>
- NHSC Customer Service Portal  
<https://programportal.hrsa.gov/extranet/landing.seam>
- National Health Service Corps Clinician Retention: A Story of Dedication and Commitment (2012)  
<http://nhsc.hrsa.gov/currentmembers/membersites/retainproviders/retentionbrief.pdf>
- NHSC Member Stories and Videos  
<http://www.nhsc.hrsa.gov/corpsexperience/memberstories/>

## VI. CONTACTS

- For general questions, please call 1-800-221-9393 (TTY: 1-877-897-9910), Monday through Friday (except Federal holidays) 9:00 am to 5:30 pm.
- For more information on auto-HPSAs please contact your state Primary Care Office.
- State Primary Care Offices  
<http://bhpr.hrsa.gov/shortage/hpsas/primarycareoffices.html>
- Division of Regional Operations  
<http://nhsc.hrsa.gov/currentmembers/membersites/nhscsupportnetwork/index.html>

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## NHSC Checklist for Health Care for the Homeless Programs

As Health Care for the Homeless grantee with 330(h) funding, you are an approved NHSC site. This means that you do not have to apply to become a NHSC site, and you can immediately engage with benefits and provider recruitment opportunities of the NHSC.

There are a few things you need to do to get started:

- Determine who in your organization will be responsible for NHSC-related tasks and administration.**  
Depending on the size and structure of your organization, this could be the human resources department, chief operating officer, chief executive officer, or other personnel.
- Know your Health Professional Shortage Area (HPSA) Score, initiate a review/re-score if necessary, and contact your Regional Office or state Primary Care Office with updates.**
- Review Job Center Site.** The Jobs Center is used not only by NHSC providers, but also by other primary care clinicians who are looking for work in underserved areas.
  - Is your site listed?
  - Is the information correct and up to date?
  - Is a point of contact listed?
- Log into the Site Portal Account and create a Site Profile at <https://programportal.hrsa.gov>.**
  - Update Site Profile (<http://nhsc.hrsa.gov/sites/SiteProfile/>)
  - Upload pictures of your site into your Site Profile. Your Site Profile is your primary marketing tool to attract providers. Get creative! Some sites include pictures of their staff at extracurricular events like 5K races, staff parties, etc.
  - Add at least two points of contact.
  - Add any open clinical vacancies (these will be reflected on Jobs Center)
- Develop and/or maintain a Recruitment and Retention Plan.**
- If you haven't done so already, post signage in your organization indicating that services will not be denied due to a patient's inability to pay.**

*If you have any questions, please call 1-800-221-9393 (TTY: 1-877-897-9910), or email [CallCenter@hrsa.gov](mailto:CallCenter@hrsa.gov),  
Monday through Friday (except Federal holidays) 9:00 am to 5:30 pm*