

*Proposed Rules for Designation of  
MUA/Ps and HPSAs*

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**PUBLIC HEALTH**  
ALWAYS WORKING FOR A SAFER AND  
**HEALTHIER COMMUNITY**

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# Current Uses of Designations - 40 Federal Programs

Program Eligibility Requirements		
	HPSA	MUA/P
Community Health Centers		X
FQHC Look-Alikes		X
National Health Service Corps	X	
Medicare Incentive Payments	X	
Rural Health Clinic Certification	X	X
J-1 Visa Waiver Program	X	X
Federal Health Professions Grant Program	X	X
WA State Loan Repayment Program		
WA State Health Systems Resources Grants		

# History

- A previous version was published on September 1, 1998 [63 FR 46538 – 55]
- The proposed rules generated nearly 800 comments.
- The new rules are version two of this original report.



# Scope

- No changes for dental and mental HPSAs at this point.
- The new rules are only for primary care.



# New Rules in a Nutshell

- Consolidation of criteria and processes for designating MUA/Ps and HPSAs.
- New provider definition:
  - mid-levels as well as physicians.
- New adjusted population-to-provider ratios.



## New Rules in a Nutshell – *Cont.*

- The new ratio is adjusted for:
  - Health care needs
  - Percent non-white
  - Percent Hispanic
  - Percent population >65 years
  - Percent low income population
  - Unemployment rate
  - Mortality rate
  - Low birth weight
  - Infant mortality rate



## New Rules in a Nutshell – *Cont.*

- A new single shortage threshold – 3000:1
- Two tiers of shortage areas with different benefits.
  - **Tier 1 HPSAs:** When federally-sponsored provider FTEs are counted.
  - **Tier 2 HPSAs:** When federally sponsored provider FTEs are **NOT** counted.



# Issues to Think about:

- Cost and complexity
- Loss of many existing MUA/Ps.
- Loss of benefits for some Federally Qualified Health Centers (FQHC) and Rural Health Clinics (RHC).
- Lower HPSA retention rates.
- Availability and use of census data for sub-population groups.
- Unclear information about how to use state collected mid-level information.
- Possibility of not being able to use CCDs as a geographical designation area.
- Counting federally supported providers.
- State role in developing Rational Service Area Plans.



# Good News

- New designation categories for:
  - Safety net facility designation
  - Emergency HPSA designations



# TIMELINE FOR FINAL RULE

February 29-April 29 '08

60 Day Comment  
Period

May 29

Comments Due

April-August '08  
HRSA Review

Departmental  
Clearance,  
Secretarial Review  
and Approval

Sept-November '08

OMB Clearance  
of Final Rule

Dec '08/January '09

Final Rule  
Published

January '09

Transition Period  
Begins



# Safety-Net Facility Designation Criteria

<b>Metropolitan Areas</b>	<b>Non-Metropolitan Areas</b>
<p>At least 10% of all patients are served under a posted, sliding fee schedule, or for no charge.</p> <p><b>AND</b></p> <p>At least 40% of all patients are served either under Medicaid, under a posted sliding fee schedule, or for no charge.</p>	<p>At least 10% of all patients are served under a posted, sliding fee schedule, or for no charge.</p> <p><b>AND</b></p> <p>At least 30% of all patients are served either under Medicaid, under a posted sliding fee schedule, or for no charge.</p>

# 90 Day Comment Period



Comments are invited.

- **When:** They must be submitted by May 29, 2008
- **How:** You may submit electronic comments to <http://www.regulations.gov/fdms/public/component/main?main=DocumentDetail&o=09000064803eb1e0>



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