Health Professional Shortage Areas (HPSAs): Changes to the Designation Process

The designation process for HPSAs is changing. The Shortage Designation Management System (SDMS) State Primary Care Offices use to process designation applications has been modernized and its corresponding data sources used have changed. This modernization effort affects HPSA scores.

**WHAT ARE HPSAS?**

Health Professional Shortage Area (HPSA) designations are used to identify areas, facilities, and population groups experiencing a shortage of health professionals.

There are three categories of HPSA designations based on health disciplines:

- Primary medical
- Dental
- Mental health

There are different types of HPSAs with the most common including:

- Geographic
- Population groups
- Facility – examples include:
  - Auto-HPSAs (Facility type designated by statute as having a shortage, such as Federally Qualified Health Centers, Tribal Health Clinics, and Certified Rural Health Clinics)
  - Correctional Institutions
- High needs

Although other data are considered in establishing a HPSA and determining the HPSA score, the primary factor is the number of health professionals relative to the population being considered. Federal regulations stipulate that, to be considered as having a shortage of providers, an area must have a population-to-provider ratio that meets a minimum threshold, based on the type of health discipline.

Alaska’s HPSAs are affected by a new SDMS Business Rule requiring a minimum population threshold before being able to submit an application for designation. Because many of Alaska’s geographic HPSAs do not meet the minimum population threshold, the state requested legal counsel review. As a result, these HPSAs will not be withdrawn as a result of their population, they may still be withdrawn if they do not meet the population to provider ratio.

Population to provider ratios are a minimum of at least:

- Primary medical care – 3,500 to 1;
- Dental care – 5,000 to 1;
- Mental health care (psychiatrists only) – 30,000 to 1.

**WHY ARE HPSAS IMPORTANT?**

HPSA designations are used as eligibility criteria for a variety of federal programs to distribute limited resources to the highest need areas. The following programs are associated with HPSAs:

- National Health Service Corps:
  - Student to Service Loan Repayment
  - Loan Repayment
  - Scholarship
- Nurse Corps:
  - Loan Repayment
  - Scholarship
- Federally-funded State Loan Repayment (SHARP I)
- J-1 Visa Conrad 30 Waiver Program
- CMS Bonus Payments
- CMS Essential Community Providers, where applicable.
**WHAT IS CHANGING?**

The designation process for HPSAs is changing. In 2014, the Health Resources and Services Administration (HRSA) began the Shortage Designation Project to give greater transparency, accountability, and parity to the HPSA designation and scoring process. It is also intended to reduce the burden of data collection on State Primary Care Offices (PCOs) by using publicly available data sets such as American Community Survey Population data and the National Practitioner Index as part of HPSA determination.

The project consists of three components:
- Update existing geographic, population, and some facility HPSA designations.
- Re-design of the Shortage Designation Management System (SDMS) State PCOs use to develop designation applications.
- An Impact Analysis, using SDMS data captured at a single point in time (February 3, 2017). It is a planning and information tool for State PCOs to prioritize shortage designation work and to prepare stakeholders for any changes that may occur with the National Shortage Designation Update, scheduled to be effective July 2018.

The February Impact Analysis findings project what may happen to existing primary care, dental, and mental health geographic, population and other facility HPSA designations. Provider data have the greatest influence on the Impact Analysis results. State PCOs are responsible for reviewing and updating provider data.

HRSA will conduct a second Impact Analysis in early April. The State PCO office will provide an update at that time.

**WHO IS AFFECTED?**

Currently, Alaska has 47 geographic primary care, dental, and mental health HPSA designations. According to the findings of the February 2017 Impact Analysis, 17 of Alaska’s 47 Geographic HPSA designations (36%) failed the impact analysis and may be proposed for withdrawal when the National Shortage Designation Update occurs. The earliest these HPSAs would be de-designated would be July, 2018.

17 Alaska HPSAs proposed for withdrawal include:
- 5 Primary Care HPSAs
- 6 Dental HPSAs
- 6 Mental Health HPSAs

In the remaining 30 HPSAs that passed the Impact Analysis, scores have been re-calculated:
- 9 HPSA scores would increase
- 18 HPSA scores would decrease
- 3 HPSA scores would remain the same

A detailed analysis of the findings of the February Impact Analysis is available upon request.

**WHAT CAN YOU DO?**

HRSA will continue to provide periodic Impact Analysis results to reflect State PCO revisions to provider data. State PCOs may update provider data in SDMS and create new or revise existing HPSAs at any time during this process.

**Provider data are critical to HPSA scores and designations.**
- Contact the State PCO for how changes to the HPSA designation process may affect your organization;
- Provide the State PCO with a designated point of contact, with current contact information;
- Work with your State PCO to address any concerns you may have about the data used for this analysis;
- Assist the State PCO in identifying and updating provider information for your community.

**ALASKA STATE PRIMARY CARE OFFICE CONTACT INFORMATION**

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<th>After April 28, 2017:</th>
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