

Alaska SHARP Program FAQs for SHARP-II

FULL-TIME and PART-TIME EMPLOYMENT

1. Q. What is the definition of full-time and half-time clinical practice under SHARP-II?

A: *Full-Time Clinical Practice:* A minimum of 40 hours per week of patient care at the approved service Site, with no more than eight of those 40 hours devoted to practice-related administrative activities or other non-clinical activities (e.g., research or teaching). The Practitioner will provide at least 45 weeks of healthcare per service year. The 40 hours per week may be compressed into no less than 4 days per week, with no more than 12 hours of work to be performed in any 24-hour period.

- For OB/GYNs, Certified Nurse Midwives, and Family Medicine Physicians who practice obstetrics on a regular basis: At least 21 of the minimum 40 hours per week must be spent providing direct patient care during normally scheduled clinic hours in the ambulatory care setting at the approved service Site. The remaining hours must be spent either providing clinic-based direct care or providing inpatient direct care to patients of the approved Site, and/or in practice-related administrative and/or other non-clinical activities not to exceed eight hours per week.
- For all other Practitioners: At least 32 of the minimum 40 hours per week must be spent providing direct patient care during normally scheduled healthcare delivery hours in the healthcare setting at the approved service Site(s). The remaining hours must be spent either providing clinic-based healthcare or providing inpatient direct care to patients of approved Site, and/or in practice-related administrative and/or other non-clinical activities.

Half-Time Clinical Practice: Practitioner works a minimum of 20 hours per week, but not exceeding 39 hours per week, for a minimum of 45 weeks per service year. The Practitioner must work no fewer than two workdays per week, and perform no more than 12 hours work in a 24-hour period.

- For OB/GYNs, Certified Nurse Midwives, Family Medicine Physicians who practice obstetrics on a regular basis, providers of Geriatric Services, Pediatric Dentists, and Behavioral & Mental Health Clinicians: At least 11 hours/week are spent providing direct patient care in the healthcare setting(s) at the approved service Site(s) during normally scheduled healthcare delivery hours. The remaining nine hours/week are spent providing healthcare services for patients or teaching at the approved Site(s), providing clinical services in alternative settings (e.g., hospitals, nursing homes, shelters) as directed by the

approved Site(s), or performing practice-related administrative activities. Teaching and practice-related administrative activities shall not exceed a total of four hours/week.

- For all other Practitioners: At least 16 hours per week are spent providing direct patient care in the healthcare setting(s) at the approved service Site(s) during normally scheduled office hours. The remaining four hours per week are spent providing healthcare services for patients or teaching at the approved Site(s), providing clinical services in alternative settings (e.g., hospitals, nursing homes, shelters) as directed by the approved Site(s), or performing practice-related administrative activities. Teaching and practice-related administrative activities shall not exceed a total of four hours/week.

Subject to the program's MOA, no more than seven weeks (35 work days) per year may be spent away from the practice for any reason. Absences greater than seven weeks in a SHARP service year will extend the service commitment end-date proportionately. Hours worked in excess of that number of hours required for the minimum work week will not be applied to any other work week. Time spent "on call" does not count toward the minimum number of hours required per work week. If necessary, the practice will include hospital treatment coverage appropriate to meet the needs of the Practitioner's patients of the approved Site and to ensure continuity of care. If the Practitioner's submitted Quarterly Work Report indicates that less than "Full-Time" direct delivery of healthcare service occurred during the prior period (or less than "Half-Time," if specified in MOA), then the SHARP payment amount may be prorated.

- 2. Q. If my work under the SHARP-II Program requires me to work periodically at other sites within my employer organization, will this be considered time away from my full-time position, or will it be considered SHARP-eligible service?**

A: The time served at other eligible sites and agreed upon sites within your agency is acceptable service.

- 3. Q. If a job consists of a set number of hours of primary care weekly with an ER shift weekly, with an additional weekly on-call period, how can this be determined to qualify as a full-time position?**

A: Applicants should read the definitions of full-time and half-time service, which appear in the memorandum of agreement and also above in this FAQ list. On-call time does not count toward the hours required per work week. Under SHARP-II the ER work is potentially allowed. That is, both hospital duty, and hospitalists are not disallowed, but rather may be

considered. Please carefully review both the regulations and the application for more information.

- 4. Q. If I need to take time away from the SHARP Program once I have begun my service (as for the birth of a child or military service, for instance), how will this affect my loan repayment program?**

A: The clinician would need to execute an MOA Amendment, which provides for a scheduled hiatus away from clinical duties for some specified period of time.

- 5. Q. If I am a SHARP-eligible clinician working in a practice, but also spend a certain number of days each year at another community that is considered underserved for my specialty, could I qualify for the SHARP-II program for the time I spend in the other community?**

A: You should review the definition of full-time and half-time service (included above in this FAQ list) to see if your service at the second site would qualify as a half-time position under SHARP-II. Also, you need to consider which site would be the sponsoring agency, your regular work site of the other site. This is critical for determining which site would be designated a Health Care Services Shortage Area, which should submit a Site Application and be required to pay the employer match.

- 6. Q. Can a clinician working part-time at two unrelated sites participate in the SHARP-II Program for both sites?**

A: At this time the answer is no. However, it is not disallowed by the statute or regulations per se. An applicant could submit an application or applications for the two sites to see if the SHARP-II Advisory Body would approve them.

- 7. Q. Does the 35-day maximum that a full-time SHARP-II clinician can be away from clinical practice in a year include holidays?**

A: Yes. The memorandum of agreement (MOA) signed by the participant, the employer, and the state specifies that the annual 35-day away-from-practice allowance includes vacation, holidays, continuing professional education, illness, or any other reason. Absences greater than seven weeks in a SHARP service year will extend the service commitment end date proportionately.

