

Quarterly Work Report

SHARP Program – Alaska Department of Health & Social Services

Guidance / Instructions

This provides description & guidance for completing & submitting the Quarterly Work Report form, via which attendant loan repayment occurs.

Purpose:

Each SHARP practitioner, via his/her respective site, must submit a brief “Quarterly Work Report” (Report) in order to have quarterly loan repayments sent to his/her eligible lender/holder(s). The requirement is one of the terms for SHARP participation, as specified in the Memorandum of Agreement (MOA) (& elsewhere). The Report serves several purposes, one of which is that of invoice. Another is documentation that the practitioner fulfilled contract terms during the preceding 90-days of employment, having provided required clinical services, at the specified site(s).

Medicaid, Medicare & the Uninsured:

The SHARP program must ascertain that the Practitioner has charged for his or her professional services at the usual and customary prevailing rates in the area in which such services are provided, except that if a patient/client is unable to pay such rate, then such person(s) were charged at a discounted rate (i.e., sliding fee scale) or not charged any fee.

In addition, the practitioner must have provided primary health services to any individual seeking care, and must accept Medicare and Medicaid assignment rates, and must have treated patients regardless of their ability to pay (i.e., use of discounted sliding fee schedule). The Practitioner has agreed to not discriminate on the basis of the patient’s ability to pay for such care or on the basis that payment for such care will be made pursuant to Medicare (established in Title XVIII of Social Sec Act), or Medicaid (Title XIX of such Act).

Definition of Full-Time Clinical Practice:

Expectation of the contract (MOA) is for full-time clinical employment. Full-time clinical practice (aka service) is defined as a minimum of 40 hours per week of patient care at the approved service site, with no more than 8 of those hours per week devoted to practice-related administrative activities or other non-clinical activities (e.g., research or teaching). If necessary, the practice will include hospital treatment coverage appropriate to meet the needs of his or her patients of the approved service site and to ensure continuity of care. The Practitioner will provide at least 45 weeks of primary care per service year. This full-time primary health care service must occur in a public or non-profit entity located in a current federally designated HPSA appropriate to the Practitioner’s discipline.

For all health professionals except obstetrician/gynecologist (OB/GYN) physicians, family practice physicians who practice obstetrics on a regular basis, and certified nurse midwives (CNM), at least 32 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(s). The remaining hours must be spent either providing primary care, or providing inpatient care to patients of the approved site, and/or in practice-related administrative &/or other non-clinical activities.

For OB/GYN physicians, family practice physicians who practice obstetrics on a regular basis, and CNMs, 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 primary care, or providing inpatient care to patients of the approved site, and/or in practice-related administrative &/or other non-clinical activities not to exceed 8 hours per week.

Time spent “on call” does *not* count toward the minimum 40 hour per week requirement.

No more than 7 weeks (35 workdays) per year can be spent away from the practice for vacation, holidays, continuing professional education, illness, or any other reason. Absences greater than 7 weeks in a SHARP service year will extend the service commitment end date proportionately.

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. Time spent in “on-call” status will not count toward the 40-hour week. Hours worked over the required 40 hours per week will not be applied to any other workweek.

If the submitted Report indicates that less than full-time clinical employment occurred during the prior period then the LRP payment amount may be prorated in accordance with the stipulations above. For detail, see: <http://www.hss.state.ak.us/dhcs/healthplanning/sharp/assets/SHARP-MOA.pdf>

How to file:

Submit the Work Report form to the SHARP program office. Both the practitioner and site representative must sign. The site is the entity that should submit the Report, following signatures. Please type or print all entries except signatures. Send in the Report electronically by: (a) filling-out form, (b) collecting signatures, (c) scanning document, & then (d) sending it in as attachment via email. The site must file an individual Work Report for each employed SHARP practitioner. The report should be sent as an attachment to: robert.sewell@alaska.gov

The form is available for download via the SHARP program’s website at: <http://www.hss.state.ak.us/dhcs/healthplanning/sharp/default.htm>

Loan repayment process:

Subsequent to receipt of acceptably completed Work Report, the program will send payment directly to the practitioner’s eligible lender/holder. The practitioner will be informed as to occurrence of payment. Amount of payment is described for each Practitioner on his/her MOA, and has been further detailed elsewhere via individual correspondence.

Timeline:

Pertinent dates appear in the table below: (a) calendar-quarters, (b) quarter end-dates, (c) Report due-dates, and (d) loan repayment mail-out dates. NLT means “not later than.” Sites are allowed and encouraged to submit their Reports as soon as convenient following quarter end-date. Dates for Items (c) and (d) are subject to revision as the program continues to develop. If these dates change at some future point, then prior written notice will be served.

Quarter	End-date	Report - NLT	LRP - NLT
Q-1: Jan-Mar	31-Mar	30-Apr	31-May
Q-2: Apr-Jun	30-Jun	31-Jul	31-Aug
Q-3: July-Sept	30-Sep	30-Oct	30-Nov
Q-4: Oct-Dec	31-Dec	31-Jan	28-Feb

Payment planning:

Careful inspection of this table indicates sizeable duration between (1) quarter end-dates, and (2) LRP payment dates. It is thus necessary that each practitioner take this schedule into account as he/she plans his/her own continued loan repayment during the interim months which lapse until his/her SHARP payments being. Each practitioner is advised to continue making his/her regular monthly loan payments at least until he/she is notified by respective lender/holders that the first full quarterly disbursements have been received by the lender/holder.

Start-date:

Know that “service credit” for the SHARP benefit begins on the date that the practitioner’s SHARP MOA award is signed by the SHARP/DHSS program manager or the date that the practitioner is licensed by the State of Alaska and begins full-time practice consistent with his/her MOA-specified service requirements at the approved site, whichever is later. This date is known as the “effective date” (aka start date). If the practitioner worked as a SHARP participant during June 2010 (i.e. 6/15 to 6/30), then a small partial-quarter LRP payment will be scheduled according to the above-described process with payment NLT August 31st. All other SHARP practitioners will have an effective date during CY-2010 Quarter-3 (July-Sept), with first payment scheduled NLT November 30th.

Questions & addressee:

Send the completed Report form, as well as questions, to Robert Sewell (email: robert.sewell@alaska.gov). The Work Report form should be sent via e-attachment. For more information about SHARP, interested persons are also referred to the program’s website, which is: <http://www.hss.state.ak.us/dhcs/healthplanning/sharp/default.htm>