

# CORPS CONNECTIONS

SCHOLARS  
August 2011

## Join Us for Corps Community Day: October 13, 2011 *United to Increase Access to Health Care*

The National Health Service Corps (NHSC) is uniting to increase understanding of the importance of access to primary health care and the role of NHSC providers and sites by holding the first **Corps Community Day** on **October 13, 2011** during National Primary Care Week. We encourage you to participate by conducting an activity in your community. Be creative or try:



- Presenting at a local high school, college and/or health professional school about the NHSC and why you should become a primary care provider
- Participating in the “*What the Corps means in your community*” video contest on [www.Challenge.gov](http://www.Challenge.gov)
- Hosting a “Meet your Providers” open house at your site
- Coordinating a family health walk in your community

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Here’s how to get involved:

- ✓ Visit <http://nhsc.hrsa.gov> for event and activity ideas, background information on the Corps and the state of primary care, an interactive U.S. map with state-by-state details on local Corps Community Day activities, customizable flyers, and other tools and resources.
- ✓ Email us at [CorpsCommunityDay@hrsa.gov](mailto:CorpsCommunityDay@hrsa.gov) with details about your Corps Community Day event or activity to have it added to the interactive map.
- ✓ Share your plans and connect with fellow members, alumni and partners by joining the discussion on the NHSC Facebook page’s [Corps Community Day discussion thread](#).
- ✓ Feel free to email any questions to [CorpsCommunityDay@hrsa.gov](mailto:CorpsCommunityDay@hrsa.gov).

Thank you in advance for your participation!

## National Health Service Corps – Stories from the Field

**Kristen Frank, MD**  
**Family Physician**  
**Kodiak Area Native Association**  
**Kodiak, AK**



After college, I joined the Peace Corps and served in Guinea, West Africa. I loved working in the field of public health, with people from a different culture than mine, and felt I'd found my calling. I continued to work in West Africa for several years after completing my service in the Peace Corps, and although I continued to enjoy my work and my community, I found myself yearning for home.

When I learned about the NHSC, it was a natural fit; I could pursue my passions for health care, work with people of diverse cultures, serve vulnerable communities, and seek adventure. I was awarded an NHSC Scholarship for medical school and felt confident it was the right path for me. During my third year of medical school, I found an opportunity through the NHSC Student/Resident Experiences and Rotations in Community Health (SEARCH) program to come up to rural Alaska to gain exposure to family medicine, and was intrigued. I spent the summer in Seward, Alaska, and was as excited about the challenges of providing medical care in a rural setting as I was about the adventures found in Alaska, and so I returned to Alaska for my family medicine residency training. Colleagues and classmates commented that family medicine would not be challenging enough for me, but the opposite is true. I can't imagine a field more challenging than rural family medicine where you really are on the frontlines and routinely are presented with traumatic injuries from the fishing industry, cardiac emergencies, plane crash victims, and hypothermia, in addition to the daily challenges of cross-cultural and language barriers and trying to provide the best care to many patients who have no health insurance. It is a field where boredom is never an issue.

During my residency, I grew to love the adventures you can't avoid in Alaska, including backcountry skiing, exploring the oceans by kayak, and hiking into the wilderness. On a rural rotation in Dutch Harbor, I met and fell in love with my new husband who shares the same sense of adventure and was drawn to rural Alaska for the same reasons I am.

My husband and I chose to fulfill my NHSC service in Kodiak, Alaska, a remote island with a tight community and a beautiful setting for exploring the wilderness. I work at the Kodiak Area Native Association in my dream job, which integrates my love for cross-cultural interaction and provides comprehensive health care to rural populations. Similar to my work in West Africa, I work closely with an integrated team of providers, including nutritionists, behavioral health specialists, and diabetes educators, as well as rural community health aides, to extend our reach to more remote Alaskan villages. We utilize technology via the Internet and telemedicine, and work closely with colleagues in the villages and in Anchorage, using technology to optimize patient care.

Alaska has proved to be such an exciting place to live and work, and I am thankful to the NHSC for providing this opportunity to me and my family. We could not be happier. Continue to check out the [NHSC Facebook page](#) for more inspiring stories.

### **Do you want to be featured in Stories from the Field?**

[Email us](#) and tell us your story. Do you know an outstanding NHSC member who should be profiled here? [Email us](#) and nominate them! Be sure to tell us why you think their contributions to their community and the NHSC make them an exceptional member!



# NHSC Sites 101: Finding the Site That's Right for You!

The NHSC is a network of more than 9,000 primary health care professionals practicing at over 10,000 member sites that provide care to underserved rural, urban, and frontier communities across the country. As a scholar, you will fulfill your service commitment at an NHSC-approved site in a high need area. NHSC sites include a range of site types. While you are in school and training, you are encouraged to do a rotation, or even volunteer at different types of sites. It will allow you to see first-hand what makes the site type unique and help you identify what kind of site might be the best fit for you when you transition into service.

## NHSC sites include:

- Federally Qualified Health Center (FQHC)
- FQHC Look-Alike
- Rural Health Center (RHC)
- Hospital Affiliated Primary Care Out-Patient Clinic
  - Critical Access Hospital
- Indian Health Service, Tribal Clinic, and Urban Indian Health Clinic (ITU)
- State or Federal Correctional Facility
- Private Practice (Solo/Group)
- Other Health Facility
  - Community Outpatient Facility
  - Community Mental Health Facility
  - State and County Departments of Health Clinic
  - Mobile Unit
  - Free Clinic
  - School-based Health Program
  - Immigration and Customs Enforcement (ICE) Health Service Corps



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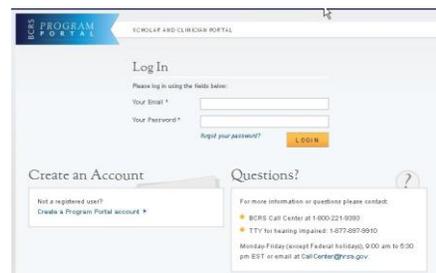
## Have You Activated Your Customer Service Portal Account?

Earlier this year, you should have received an email with instructions on how to activate your NHSC Customer Service Portal account. The Customer Service Portal is your online tool for conducting business with the Corps. It provides Corps members a convenient way to access information related to your award.

You can use the portal to:

- View payment information
- View W-4 information
- Update your contact information
- Ask NHSC a question

If you have not done so already, please activate your portal account and review your personal information. To login, visit [www.nhsc.hrsa.gov](http://www.nhsc.hrsa.gov) and click on the yellow "Customer Service Portal" button.



If you experience any issues accessing your account, contact the Call Center at: 1-800-221-9393 (TTY: 1-877-897-9910).

## Event Calendar



### Region VIII Community Connection (CO-MT-ND-SD-UT-WY)

September 7, 2011

6:00 - 8:30 p.m.

Sheraton Denver Downtown  
1550 Court Place  
Denver, CO 80202

\*Please contact [nhsccdenver@hrsa.gov](mailto:nhsccdenver@hrsa.gov)  
for more information or to RSVP by  
August 31.

### Corps Community Day

October 13, 2011

\*Locations across the country!

### New Scholar Orientation Conference

October 27-29, 2011

New Orleans, LA

## NHSC Hosts Over 70 Providers, Scholars, and Alumni at the Boston Community Connection Event

On July 14, the NHSC hosted over 70 providers, scholars, alumni, and partners at the Boston Community Connection event, which was held at Massachusetts General Hospital. Community Connection events are designed to bring together NHSC participants, stakeholders, and community resources at the local and state level.

During the event, special guest speakers shared their experiences with attendees, including Jim O'Connell, MD, who serves as President of the Boston Healthcare for the Homeless Program. Dr. O'Connell spoke to the captivated audience about his experiences during the 25 years he has spent caring for Boston's homeless population in one of the program's hospital-based clinics. A special panel of current and former NHSC providers also discussed *Life in the NHSC & Primary Health Care Perspectives*. Panelists included: Warren Ferguson, MD; Greg Hood, PA; Lacy Clayton, NP; and moderator, Eric Weil, MD. Several local organizations that support the primary care providers also participated in the event, including the Primary Care Office, Primary Care Association, Office of Rural Health, universities, and state colleges.

NHSC would like to thank Partners Healthcare System, The Stoeckle Center for Primary Care Innovation at Massachusetts General Hospital, the Harvard Medical School Center for Primary Care, and the Massachusetts Area Health Education Center for supporting this event!

This was the third NHSC Community Connection event this year. Be on the lookout for upcoming events, dates, and locations in your area! These informal gatherings offer a unique opportunity to network and share ideas and experiences with other NHSC providers, scholars, and alumni in your community.



## NHSC Announces Students to Service Loan Repayment Pilot Program

The National Health Service Corps (NHSC) Students to Service Loan Repayment Program (S2S LRP) pilot program will provide loan repayment assistance to medical students (MD and DO) while in their last year of school in return for a commitment to provide primary health services in eligible Health Professional Shortage areas (HPSAs) of greatest need. The program is seeking applicants who demonstrate the characteristics for and an interest in serving the nation's medically underserved populations through their service commitment and beyond.

The S2S LRP will provide funds to participants to repay their outstanding qualifying student loans while still completing health professions training. Program options include:

- **Full-Time Clinical Practice** – The NHSC will pay up to \$120,000 for an initial 3 years of full-time clinical service defined as no less than 40 hours per week, for a minimum of 45 weeks a year.
- **Half-Time Clinical Practice** – The NHSC will pay up to \$120,000 for an initial 6 years of half-time clinical service defined as no less than 20 hours per week (not to exceed 39 hours per week), for a minimum of 45 weeks per year.

The NHSC projects that the S2S LRP application cycle will open in November 2011 and close in January 2012.

Additional information, including eligibility requirements, can be found at:

<http://nhsc.hrsa.gov/loanrepayment/studentstoservice.htm>.

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### Information and Resources to Pass Along to Your Patients:

#### **Pre-Existing Condition Insurance Plan — New Coverage Option for the Uninsured**

Patients who have had a hard time finding health insurance because of a pre-existing condition or who have been turned down for insurance coverage may now be eligible for a new program created by the Affordable Care Act -- the Pre-Existing Condition Insurance Plan.

This transitional program is available for children and adults in all 50 states and the District of Columbia who have been locked out of the health insurance market because of a pre-existing condition. In 2014, Americans—regardless of their health status—will have access to affordable health insurance when the nation transitions to a new marketplace.

Under this new program, patients will receive health coverage for a wide range of medical benefits including physician's services, hospital care, and prescription drugs. All covered benefits are available—even to treat a pre-existing condition. Patients won't be charged a higher premium because of a medical condition and eligibility is not based on income. Like standard health insurance plans, patients will be required to pay a monthly premium, a deductible, and some cost-sharing expenses. Premiums may vary depending on where patients live, their age, and which health plan they choose. To qualify, a patient must:

- Be a citizen of the United States or residing here legally
- Have been uninsured for at least 6 months before applying
- Have a pre-existing condition or have been denied insurance coverage because of a health condition

Each state may use different methods to determine whether patients have pre-existing conditions and whether they have been denied health coverage. To find out more about the Pre-Existing Condition Insurance Plan (PCIP), including eligibility, plan benefits and rates and how patients can apply, visit [www.pcip.gov](http://www.pcip.gov) or click on "Find Your State" and select a state from a map of the United States or from a drop-down menu for details.

Contact the PCIP Call Center toll free at 1-866-717-5826 (TTY 1-866-561-1604) for more information. The Call Center is open 8:00 a.m. to 11:00 p.m. ET.

## HHS to Launch Campaign Touting Free Services Under Medicare

A government effort to motivate Medicare patients to seek preventive medicine by offering such services for free, has only slightly increased the number of older Americans getting cancer tests, key vaccines and other preventive care.

About 5.5 million Medicare patients have used at least one preventive benefit since Medicare eliminated the charges in January, according to figures released by the Department of Health and Human Services (HHS). And as of early June, nearly 780,000 Medicare patients had an annual checkup, while 16,000 got counseling to quit smoking — two benefits added to the program for the first time. But HHS wants to increase those numbers.

HHS Secretary Kathleen Sebelius announced that the agency was launching a campaign, known as “Share the News, Share the Health” to alert Medicare patients, their doctors and their relatives that the services are available at no charge. “Our job is to make sure every single Medicare beneficiary in the country knows,” Sebelius said.

Alert your patients about the preventive benefits available to them through Medicare. For additional information about what’s covered visit <http://www.medicare.gov/share-the-health/>.

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### Questions or Comments?

If you have ideas or suggestions for future issues, please send them to [info@nhscrtsc.net](mailto:info@nhscrtsc.net).



This publication lists non-federal resources in order to provide additional information to consumers. The views and content in these resources have not been formally approved by the U.S. Department of Health and Human Services (HHS) or the Health Resources and Services Administration (HRSA). Listing these resources is not an endorsement by HHS or HRSA.