



## **HEALTH CENTERS AND HEALTH CARE REFORM:**

### **NATIONAL HEALTH SERVICE CORPS**

*The Reconciliation Act of 2010 makes changes to Patient Protection and Affordable Care Act (PPACA). Together, the Reconciliation Act and PPACA are considered the final health care reform package.*

### **THE NATIONAL HEALTH SERVICE CORPS TRUST FUND**

The health reform package contains a total of \$1.5 billion in *new, dedicated funding* for the National Health Service Corps over five years. This funding will place an estimated 15,000 primary care providers in provider shortage areas. The National Health Service Corps Trust Fund is in addition to existing discretionary funding, which was \$142 million in FY 2010.

National Health Service Corps Funding, 2011-2015			
FISCAL YEAR	Trust Fund +	Discretionary Funding (est.)	Total Annual Funding (est.)
FY 2011	\$290 Million	\$142 Million	<b>\$432 Million</b>
FY 2012	\$295 Million	\$142 Million	<b>\$437 Million</b>
FY 2013	\$300 Million	\$142 Million	<b>\$442 Million</b>
FY 2014	\$305 Million	\$142 Million	<b>\$447 Million</b>
FY 2015	\$310 Million	\$142 Million	<b>\$452 Million</b>

### **PROGRAMMATIC CHANGES**

#### **Changes to Loan Repayment**

The award Corps members can receive is increased from \$35,000 to \$50,000, plus beginning in FY2012 the award amount can be increased annually by the Secretary to reflect inflation.

#### **Teaching as Eligible Service**

The health reform package allows Corps members to count up to 20% of their time spent teaching towards their full-time service obligation. Corps members working in Teaching Health Centers may count up to 50%.

#### **Part-time Clinical Practice**

Corps members may satisfy their service obligation through part-time clinical practice (a minimum of 20 hours per week). The Corps member must enter into a written agreement to either double the period of obligated service or receive 50% of the full-time loan repayment amount.

### **PERMANENT AUTHORIZATION**

The National Health Service Corps is also reauthorized permanently under the bill. For FY2010-2015, the bill authorizes significantly increased spending on the program and then for each succeeding year after that authorizes increases the authorization based on a formula.