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NHSC Site Administrator Portal User Guide

August, 2013







NHSC Site Administrator Portal User Guide

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SITE ADMINISTRATOR LANDING PAGE (OVERVIEW)

PROGRAM

for SITE ADMINISTRATORS

1

Account Settings

Log Ou

There are six main sections to the site administrator landing page:

1. My Messages (pg. 5) & Account Settings (pg. 5)

> The site administrator can view messages sent from BCRS and update their account information.

- NHSC Approved Sites (pg. 6) If the site administrator is a recognized point of contact (POC) at an NHSC approved site, those sites will appear here. Clicking on the name of a site will open that site's information landing page (pg. 18).
- 3. NHSC Inactive Sites (pg. 7) If the site administrator is a recognized POC at an NHSC inactive site, those sites will appear here. Clicking on that name of a site will open that site's information landing page (pg. 18).
- 4. Pending Site Applications (pg. 8) If the site administrator has either submitted an application for a site or is a POC at a site which has an application pending, those applications will appear here. Clicking on the ID will open that application.
- My Activities (pg. 9) The site administrator can view recent activities he/she have completed.
- 6. Need Assistance? (pg. 10)

This section contains a number of tools for the site administrator as well as support contact information and a summary of all open requests.





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MY MESSAGES

Selecting the "My Messages" link at the top of the landing page will open the site administrator's message inbox. The exclamation icon (⁹) next to the link indicates that a new message is available to view.

Inbox Status Subject Date Welcome to the BCRS Portal! 08/23/2011	Aessages	
Status Subject Date V Welcome to the BCRS Portal! 08/23/2011	(
U Welcome to the BCRS Portal! 08/23/2011	us Subject	Date
	Welcome to the BCRS Portal	I! 08/23/2011

The inbox view includes the following information:

- **1.** Status Indicates the status of the message, an exclamation point (\bigcirc) indicates a new message.
- 2. Subject the subject of the message.
- 3. Date The date the message was received.

Selecting the subject of the message in the inbox opens the message for viewing.

ACCOUNT SETTINGS

The Account Settings page allows the site administrator to update security information as well as email and password information.

Application ID:		
Your Current Email Address: pmilutinovic@sapient.co	m	
CHANGE EMAIL ADDRESS	CHANGE PASSWORD	
New Email Address	Create New Password 🕖	
Confirm New Email Address	Confirm New Password	
Current Password	Current Password	
Change Email	Change Password	
CHANGE SECURITY INFORMATION		
Security Question 🕖 Select	•	
Answer		
Current Password		



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NHSC APPROVED SITES

The NHSC Approved Sites list contains all the NHSC sites that have the status of "active" that the site administrator is a point of contact at. If the site administrator feels that a site is missing from the NHSC Approved Sites list, please call **1-800-221-9393** for assistance. Clicking on a site's name in the table will open that site's specific site information landing page (pg. 18).

- NHSC APPROVED SITES

Site Name	Address	Status	Expiration Date
Active Medical Site #1 🕟	123 Main Street Anytown, VA 55555555	Active (A)	08/23/2014
Active Medical Site #2 ►	123 Main Street Anytown, VA 55555555	Active (A)	08/23/2014

The table includes the following information about approved sites:

- 1. Site Name this is the name of the site.
- 2. Site Address this is the physical address for the site (mailing address is stored separately).
- 3. Status for approved sites this is "active."
 - "Active" sites are sites at which NHSC clinicians may serve and receive credit towards their service obligation.
- 4. **Expiration Date** this is the date by which the site will need to recertify with the NHSC
 - Past the expiration date, a site will become "inactive" until a recertification for that site is approved (see NHSC Inactive Sites for more information).



NHSC INACTIVE SITES

The NHSC Inactive Sites list contains all the NSHC sites that have the status of "inactive" and for which the site administrator is a point of contact. If the site administrator feels that a site is missing from theNHSC Inactive Sites list, please call **1-800-221-9393** for assistance. Clicking on a site's name in the table will open that site's specific site information landing page (pg. 18).

- INACTIVE SITES

Site Name	Address	Status	Expiration Date
Inactive Medical Site #1 •	123 Main Street Anytown, VA 555555555	Inactive (I)	08/23/2014
Inactive Medical Site #2 >	123 Main Street Anytown, VA 555555555	Inactive (I)	08/23/2014

The table includes the following information about "inactive" sites:

- 1. Site Name this is the name of the site.
- 2. Site Address this is the physical address for the site (mailing address is stored separately).
- 3. Status for approved sites this is "Inactive."
 - "Inactive" sites still appear in the NHSC database, but have the following restrictions. 1. NHSC Clinicians cannot receive credit for working at an "inactive" site.
 - 2. "Inactive" sites may not post open positions to the Job Opportunities List.
- 4. Expiration Date this is the date by which the site will need to recertify with the NHSC.



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PENDING SITE APPLICATIONS

The Pending Site Applications list contains all the NHSC applications either submitted by this site administrator or for sites for which this site administrator is a POC. If the site administrator feels that an application is missing from the site, please call **1-800-221-9393** for assistance. Clicking on a ID number in the table will open that application.

PENDING SITE APPLICATIONS AND RECERTIFICATIONS

Request ID#	Request Type	Site Name	Address	Date Last Updated	Status	
51744 🗩	Site Recertification	DOVER FOXCROFT FAMILY MEDICINE	891 WEST MAIN STREET SUITE 200 DOVER-FOXCROFT, ME 04426	08/08/2013	In Progress	Cancel 🕟
51735 🕑	Site Application	Test Site 100	234 Anywhere Street Anywhere, FL 23456	08/08/2013	Submitted - Pending Decision	
51734 🕟	Site Application	Test site 13	123 anywhere street Anywhere, FL 12345	08/08/2013	In Progress	Cancel 🕟

The table includes the following information about pending applications:

- 1. Request ID# this is the unique ID number for the application.
- 2. Request Type the type of request (e.g. Site Application or Site Recertification).
- 3. Site Name this is the name of the site which the application is for.
- 4. Address- this is the physical address of the site.
- 5. Date Last Updated this is the date on which the application was last modified.
- 6. Status this is the current status of the application, the status can be as follows:
 - 1. In Progress the application is incomplete and has not been submitted.
 - 2. Submitted Pending Decision- the application has been submitted for review.

CANCELLING A SITE APPLICATION OR RECERTIFICATION

To cancel a site application or recertification, select the "Cancel" button on the row of the request to be removed. Only requests that are "In Progress," may be cancelled.

51734 🗩	Site	Test site 13	123 anywhere street	08/08/2013	In Progress	Cancel 🕟
	Application		Anywhere, FL 12345			

Upon selecting the "Cancel" button, the system will display a confirmation message. Selecting "Yes, Cancel" will void the request. You will receive a portal message in "My Messages" notifying you of the cancellation. The request itself will be removed from the Pending Site Applications and Recertifications table and appear in the Inactive Sites table.

- -	Cancel Site Application	×	10
E	Cancel Application		2
1	Are you sure you want to cancel the application for the site	e listed below?	
s	DOVER FOXCROFT FAMILY MEDICINE		m si
s			10
	NO, GO BACK	YES, CANCEL	2
I,			1



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MY ACTIVITIES

The My Activities section displays recently completed portal activities and information related to that activity in a read only format. The site administrator may also choose to view all the activities that he/she have ever completed by selecting "View All Activities." If the site administrator feels that a completed activity is missing from the list, please call **1-800-221-9393** for assistance.

My Activities

Activity Type	Site Name	Activity Description		Status	Date Last Updated	Completed By
In Service Verification	BJC Boone Convenient Care - Moberly	Verification of	Completed by	Completed	08/26/2013	
In Service Verification	BJC Boone Convenient Care - Moberly	Verification of .	N Completed by	Completed	03/09/2013	
In Service ∨erification	BJC Boone Convenient Care - Moberly	Verification of	Completed by	Completed	09/24/2012	
In Service Verification	BJC Boone Convenient Care - Moberly	Verification of	Completed by	Completed	06/11/2012	
In Service Verification	BJC Boone Convenient Care - Moberly	Verification of	Completed by	Completed	06/04/2012	

View All Activities 🕟

The table includes the following information about the site administrator's activities:

- 1. Activity Type the type of activity completed.
- 2. Site Name this is the name of the site which the request is associated with.
- 3. Activity Description- a short description of the activity.
- 4. Status this is the current status of the request, available statuses vary based on the request.
- 5. Date Last Updated this is the date on which the request was last modified.
- 6. Completed By- the name of the individual who completed the activity.



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NEED ASSISTANCE?

The Need Assistance section provides the site administrator with tools to help manage their account and sites. In this section is also the number to call for support, common activities the site administrator can perform and a list of all open requests for that site administrator.

I NEED TO				CONTACT US For support, please contact us at 1.800-221-9393 , Monday through Frida (except Federal holidays), 8 am to 8 pm ET.	
Submit a New NHSC Site Application Update My Contact Information		0			
		0			
OPEN REQUI	ESTS				
OPEN REQUI Request ID#	ESTS Request Type	Site Name		Date Last Updated	Status
OPEN REQUI Request ID# 52027 ►	ESTS Request Type Site Application	Site Name Sample Test Site	1	Date Last Updated 3/26/2013	Status Submitted - Pending Decision

Submit a New NHSC Site Application – see pg. 11

The table includes the following information about pending applications:

- 1. **Request ID#** this is the unique ID number for the application.
- 2. Request Type the type of request (i.e. Site Application, Site Recertification, Question, etc...).
- 3. Site Name This is the name of the site which the request is associated with.
- 4. Date Last Updated this is the date on which the request was last modified.
- 5. Status this is the current status of the request, available statuses vary based on the request.

UPDATE MY CONTACT INFORMATION

Selecting Update My Contact Information opens the form to the right. Here the site administrator can update the following information about themselves:

- 1. Phone Numbers Daytime, Mobile and Fax numbers.
- Email and Password are handled through the Account Settings page (pg. 5).
- **3.** Work Address the address at which the site administrator works.

effect until you click	in we have on record. To make any changes, simply click the box and enter the new information. Please note, changes will not take the submit button, and you may be contacted by an NHSC Representative to confirm your changes.
PHONE	
Daytime	(555) 555-5555
Mobile	(655) 655-6565
Fax	(555) 555-5555
	sswop
Email addresses ca	in only be edited on the Account Settings page.
WORK ADDRE	55
Address Line 1	123 Main Street
Address Line 2	
City	Anytown
	Virginia
State	
State Zip	55555



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APPLYING FOR A NEW NHSC SITE

The site administrator portal allows site administrators to apply for new sites to become part of the NHSC. A site administrator can begin a new application by either selecting the "Apply for a New NHSC Site" button from the landing page, or by selecting the "Submit a New NHSC Site Application" in the Need Assistance Section. Only sites that have never been part of the NHSC at one time should initiate a new site application.

1	
INSTRUCTIONS	
Welcome to the NHSC Or NHSC Site Agreement (lo must meet all requirement program requirements, co 221-9393 or GetHelp@hr	nline Site Application . Before you begin, carefully review the NHSC website, the NHSC Site Reference Guide 🔁 , and the cated in the appendix of the NHSC Reference Guide) to ensure your site meets all eligibility and program requirements. Sites is listed in the NHSC Site Agreement at time of application. If you have questions about the general application process or ntact your State Primary Care Office. For technical issues in completing the application contact the NHSC Call Center at 1-800 sa.gov.
If you are applying on beh a separate application and credit for time spent at an the main/administrative si	alf of multiple clinical site locations, please complete the main/administrative site application first. Each site location must submit I meet the same eligibility criteria in order to be approved by the NHSC. In order for NHSC obligated clinicians to receive service y clinical service site location, each clinical service site must obtain written approval from the NHSC. Please note that approval of e does not indicate approval for affiliated satellite sites.
Type of Site * 🔞	Select

When starting a new application, the site administrator must first select the type of site they are applying for from a list in the drop down menu. If the type of site selected has a Site Subtype, they are also required to select the subtype from another drop down menu list before continuing to the NHSC Site Eligibility Questions.

Type of Site * 🕖	Community Outpatient Facility	•
Site SubType *	Select 💌	

Γ

If the selected site type or subtype (if applicable) is auto-approved or ineligible to apply, a message informing the site administrator will be displayed.

٦Г

The Site is Ineligible to Apply:	The Site is Auto-Approved:
Due to the type of facility of your site, this location is not an eligible service site for the National Health Service Corps (NHSC). A listing of eligible site types is available on the NHSC website . If you have additional questions, please contact your State Primary Care Office or the NHSC Call Center at 1-800-221-9393 or GetHelp@hrsa.gov	Please Note: If your site is 1) a <i>Federally Qualified Health</i> <i>Center</i> funded under Section 330 of the Public Health Service Act, 2) an <i>Indian Health Service Site</i> funded through IHS, or 3) a <i>Federal Prison</i> , you do not need to submit a site application as your site may receive automatic approval through the National Health Service Corps (NHSC). If you cannot see this site in the "NHSC Approved Sites" section of the portal, please contact us at 1-800-221-9393 or GetHelp@hrsa.gov .

If your site is an auto-approved site type, please contact the NHSC indicating your interest in joining.



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NHSC SITE ELIGIBILITY QUESTIONS

After selecting a Site Type and Site Subtype (if applicable), the site administrator must answer the NHSC Site Eligibility Questions to ensure their facility is eligible to participate in the National Health Service Corps (NHSC).

NHSC SITE ELIGIBILITY QUESTIONS

As an official representative of the applying site, please answer each of the following questions. For more information on NHSC member site eligibility requirements, please visit the NHSC Sites **website**.

As an official representative of the applying site, have you read the NHSC Site Reference Guide 🔁 and do you understand the program requirements as listed in the NHSC Site Agreement included at the end of the Reference Guide?

O Yes O No

Is your site physically located in and does it serve the population of a Health Professional Shortage Area (HPSA) which corresponds to the services provided at the site?

O Yes O No

Is your site a Primary Care Outpatient Facility, as defined below, or a CMS-certified Critical Access Hospital? 🕖

O Yes O No

Does your site utilize a qualified discounted/sliding fee schedule and has it been in place for at least 12 months? 0

O Yes O No

Does your site deny services to an individual based on inability to pay or enrollment in Medicare, Medicaid or your state's Children's Health Insurance Program (CHIP)?

O Yes O No

Does your site utilize a credentialing process which, at a minimum, includes reference review, licensure verification, and a query of the National Practitioner Data Bank (NPDB)?

O Yes O No

Does your site prominently display a statement in common areas (and on site's Web site if applicable) that explicitly states that 1) no one will be denied access to services due to inability to pay and 2) there is a discounted/sliding fee schedule available? *Examples of acceptable sign and website language are located in the Downloadable Resources section of the NHSC* website under "Site Policy Poster".

O Yes O No

CONTINUE

The "Continue" button will not be enabled until each question is answered. Upon selecting "Continue," the General Information Page will be displayed or the Site Administrator will be notified the site is ineligible to apply based on the previous answers (Image located below).

Eligibility Information

Based on responses to the above questions, this site is not eligible for participation in the National Health Service Corps (NHSC). For more information on NHSC site eligibility and program requirements, please review our **website** and the **NHSC Site Reference Guide** 1. If you have additional questions, please contact your **State Primary Care Office** or the NHSC Call Center at 1-800-221-9393 or **GetHelp@hrsa.gov**.

BACK TO PORTAL



GENERAL SITE INFORMATION (1/6)

The first page of the site application captures the contact information for the site applying to become part of the NHSC.

The site administrator completes the fields on the form. All fields marked with an asterisk (*) are required fields. Move mouse over tooltip icons (1) to view additional information about the field.

Important Notes:

- 1. Practice Site Name and Location this is the physical address of the site. There are separate fields for mailing address.
- 2. Also Known as/Doing Business as this is an alternate name the facility may be referenced as. The name entered in the Site Name field is how the record will appear in the system.
- 3. Check the box under "Mailing Address" to indicate that the physical address and the mailing address for the site are the same.
- 4. Upon completion of this page, the appropriate State PCO Member is notified that the site has initiated an application.

General	Information
* required field	

Please enter information pertaining to the clinical site where NHSC clinicians will serve. Organizations with more than one site location (i.e. satellites) must submit an NHSC application for each clinical service site where NHSC clinicians may practice

PRACTICE SITE NAME AND LOCATION (Where the NHSC clinician will serve their obligation)

Site Name * 🛈	
Also Known as/Doing Business as Alias 🚺	
Address Line 1 *	
Address Line 2	
City *	
State/Province/Region *	Select
Zip/Postal Code *	
County *	Select 💌
Site Phone Number *	
Site Fax Number	
Site E-mail Address *	
Site Web Address 🕖	
Site Classification *	Select
Mailing Address	
Address Line 1 *	
Address Line 2	
City *	
State * Select	Y
Zip/Postal Code *	
	SAVE FOR LATER CONTINUE

The site administrator may select to "Save for Later" to save the information and return to the landing page only when all the required fields have been entered. Selecting "Home" in the navigation banner located at the top of every page, will return the site administrator to the landing page without saving the information. Only selecting "Continue" or "Save for Later" will save the information that has been entered on the page.

APPLICATION POINTS OF CONTACT (2/6)

This section of the application has identical functionality to the Manage Points of Contact tool discussed as part of Site Self Service (pg. 26).

NOTE: All sites except those classified as Solo Private Non-Profit or Solo Private For Profit are required to list a minimum of 2 points of contact.



NHSC INFORMATION (3/6)

The third page of the site application captures the NHSC Program information for the site applying to become part of the NHSC.

All fields marked with an asterisk (*) are required fields. Move mouse over tooltip icons (⁽¹⁾) to view additional information about the field.

Important Notes:

- The Site Administrator is required to select at least one service that is provided at the site.
- The Site Administrator is required to enter the corresponding insurance number if selecting "Yes" to the Medicaid, Medicare or State Children's Health Insurance questions. If "No" is selected for any of those questions, the Site Administrator is required to enter a reason for not accepting that particular program.
- **3.** The Site Administrator has the ability to enter any additional

NHSC Program Information

Please enter information pertaining to the clinical site where NHSC clinicians will serve. Organizations with more than one site location (i.e. satellites) must submit an NHSC application for each clinical service site where NHSC clinicians may practice.

Primary Care Services Provided (check all that apply)-

Verify the type of outpatient, ambulatory (or certified Critical Access Hospital) primary care services provided by the site by checking all services below provided at the applying site. In order to be approved through NHSC, the site must be located in a primary care, mental health, or dental Health Professional Shortage Area (HPSA) which corresponds to the services provided by the site.

Primary Medical Care	Primary Dental Care	Primary Behavioral Health Care
General Primary Care	General Dentistry	General Mental Health Care
Family Medicine	Pediatric Dentistry	
General Internal Medicine		
General Pediatrics		
Geriatrics		
C Obstetrics/Gynecology		
Women's Health		
According to the site's discounted/sliding fee schedu (maximum amount charged to a qualifying patient who i	ile , what is the nominal fee is at 100% of poverty)? 🕖	
Does your site accept Medicare @?	C Yes C No	
Does your site accept Medicaid 🖗?	C Yes C No	
Does your site accept the state's Children's Health I nsurance Program & (CHIP)?	O Yes O No	
Does the applying site have a current clinical recruitm and retention plan on file and available for NHSC revie upon request?	nent CYes CNo ew	
Please provide any additional information that you feel v be useful in the review of your NHSC Site Application.	would	
		SAVE FOR LATER CONTINUE

information that may be useful in the review of the application.

When the site administrator has finished entering the required NHSC Program Information, selecting "Continue" will navigate to the next page of the application.



HPSA SCORE SUGGESTION (4/6)

The HPSA Score Suggestion page allows the Site Administrator to suggest HPSAs appropriate for the site using the HPSA Find Tool. HPSA suggestion is not required to submit an application. Only HPSAs that match the primary care services (Primary Medical, Primary Dental, or Primary Behavioral Health Care) selected on the NHSC Program Information page may be suggested.

Steps for Suggesting a HPSA:

- Select the link for the "HPSA Find Tool" to search for valid HPSAs (external web page)*.
- Enter the HPSA ID and select "Add."
- **3.** When finished entering HPSAs for the site, select "Continue."

HPSA Rules:

- 1. An active site must be assigned at least one (1) HPSA.
- 2. A site may not be assigned more than six (6) HPSAs.
- 3. A site may not be assigned more than one (1) HPSA of each type (e.g. Primary Medical Care, Dental, and Mental Health), unless one of the HPSAs is an Auto-HPSA.

HPSA Score Suggestion

SUGGEST A HPSA

You may suggest Health Professional Shortage Area (HPSA) IDs which are applicable to **test site 6** and based on verified information found in the **HPSA Find** tool. The HPSA score must correspond to the services (primary care, mental health, and/or dental) provided at this site location. This field is not required for submission of the NHSC Site Application. NHSC and State Primary Care Office staff will verify this information and add all applicable HPSA IDs to the application during the review process. If no HPSA exists for the physical location of the applying site, the site application will be denied. For additional assistance in identifying the HPSA ID, contact your **State Primary Care Office**.



Note: The NHSC system updates HPSA scores annually on January 1st. If this field does not recognize a designated HPSA from the HPSA Find database, please continue with the application. The application will be held and processed after the January 1st HPSA update if the application meets all other requirements.

HPSAs Suggested by the Site

HPSA ID	Name	Auto-HPSA	Score	HPSA Discipline	Status	
10499904A6	Fredonia Service Area	No	13	Primary Care	Designated	Delete
					SAVE FOR LATER	CONTINUE
						vviiii

*The HPSA Find Tool is an online tool furnished by the Health Resources and Services Administration (HRSA) that allows the user to search for HPSAs by address. For information on using the HPSA find tool, refer to documentation on the tool site.

The HPSAs Suggested by the Site table displays the following information:

- 1. HPSA ID the ID assigned to the HPSA.
- **2.** Name- the name of the HPSA.
- 3. Auto HPSA- Yes/No indication if the HPSA is auto-approved
- 4. **Score** the current score of the HPSA.
- 5. HPSA Discipline- the discipline of the HPSA. Options include Primary Care, Mental Health, or Dental.
- 6. Status- the current status of the HPSA.

The site administrator may remove HPSAs that have been suggested by selecting "Delete" on the row of the HPSA to be deleted.



APPLICATION SUPPORTING DOCUMENTS (5/6)

The fifth page of the site application allows the site administrator to digitally upload supporting documents required to prove NHSC eligibility.

The documents that appear in the Selected Document Types table are required. Instructions, site agreement requirements, and other information regarding each type of document listed can be found by expanding the Document Instructions accordion. Comments are optional, unless "Other Documentation Requested by NHSC or State Primary Care Office" is selected.

When the site administrator is finished uploading documents, selecting "Continue" will navigate to the next page of the application.

Uploading a Document (File Size Limit: 5 MB)

1. Select one or more document

upporting Documents ^{quited} feld	
Please upload the required documents listed below pertaining to the clinical site whe location (i.e. satellites) must submit an NHSC application for each clinical service sit contact your State Primary Care Office .	rre NHSC clinicians will serve. Organizations with more than one site te where NHSC clinicians may practice. For additional assistance,
+ DOCUMENT INSTRUCTIONS	
- UPLOAD DOCUMENTS	
More information about required documents, including samples or templates can be	found on the NHSC Sites and Communities Page.
Select document type(s):	
Policies on Non-Discrimination*	
Discounted/Sliding Fee Schedule*	
\Box Patient Application for the Discounted/Sliding Fee Schedule*	
Discounted/Sliding Fee Schedule Policies*	
Photograph of Posted Signage*	
Proof of Access to System of Care*	
NHSC Site Data Tables*	
Other Documentation Requested by NHSC or State Primary Care Office	
Comment	
Choose File No file chosen Upload Document	
UPLOADED DOCUMENTS	
No documents have been uploaded for this request	
	SAVE FOR LATER CONTINUE

types for the document. A single document may contain several document types (e.g. a single PDF file may have a Discounted Sliding Fee Schedule and NHSC Site Data Tables in one document).

- 2. Select "Choose File" and browse and select the appropriate file.
- 3. Select "Upload Document."

Deleting a Document – In the Uploaded Documents table, select "Delete" in the row of the particular document to remove it.



APPLICATION SITE AGREEMENT (6/6)

The final page of the site application is where the site administrator agrees to the NHSC Site Agreement.

Agreement and Submission

- 1. Read the NHSC Site Agreement.
- Check the box certifying that the site meets and will continue to meet NHSC site requirements.
- Check the box certifying you are an official representative of the site.
- Digitally sign the application by entering the site administrator's password.
- 5. Select "Submit."

National Health Service Corps (NHSC) approved sites must meet all requirements stated below at the time of application and must continue to meet the requirements in order to maintain status as an NHSC-approved site. This Agreement certifies that the site named on this application meets all NHSC requirements as outlined below, and I, siteApplication person firstName] Smith am authorized to provide such certification for the above named site. 1. Is located in and treats patients from a federally-designated Health Professional Shortage Area (HPSA). 2. Does not discriminate in the provision of services to an individual () because the individual is unable to pay; (ii) because payment for those service would be made under Medicare, Medicaid, or the Children's Health Insurance Program (CHP); or (ii) based upon the individual's race, color, sex, national origin, disability, religion, age, or sexual orientation. [May or may not be applicable to Indian Health Programs (ITUs)]. a. Uses a schedule of fees or payments for services consistent with locally prevailing rates or charges and designed to cover the site's reasonable costs of operation. (May or may not be applicable to ITUs). b. Uses a discounted/sliding fee schedule to ensure that no one who is unable to pay will be denied access to services. This system must provide a full discount to individual and families with annual incomes at or below 100% of the federal powerty will allow a norther theorement. Theorefore theous with the information given in this NHSC Site Application is accurate and complete best of my knowledge and belief. I understand that it may be investigated and certify that test site 6 currently meets all requirements. Lake write the Porgram Figure to Children herein may de got CPR 79.) Linderstand that it may be investigated and that any false statement	INSU SITE AGREEMET	4T:
This Agreement certifies that the site named on this application meets all NHSC requirements as outlined below, and I, siteApplication, person firstName) Smith am authorized to provide such certification for the above named site. 1. Is located in and treats patients from a federally-designated Health Professional Shortage Area (HPSA) . 2. Does not discriminate in the provision of services to an individual (because the individual is unable to pay; (ii) because payment for those services would be made under Medicare, Medicaid, or the Children's Health Insurance Program (CHIP); or (i) based upon the individual's race, color, sex, national origin, (isability, religion, age, or sexual orientation. [<i>May or may not be applicable to Indian Health Service Facilities, Tribally-Operated</i> 503 <i>Health Programs, and Urban Indian Health Norgrams</i> (<i>TUa</i>)]. a. Uses a schedule of fees or payments for services consistent with locally prevailing rates or charges and designed to cover the site's reasonable costs of operation. (<i>May or may not be applicable to ITUs</i> , free <i>clinics, or prisons</i>) b. Uses a discounted/Sitiding fee schedule to ensure that no one who is unable to pay will be denied access to services. This system must provide a full discount to individuals and families with annual incomes a tor below 100% of the federal poverty mintarian status as an NHSC-approved service showed). Therefore the cuick information given in this NHSC Site Application is accurate and complete best of my knowledge and belief. Lunderstand that it may be investigated and certify that any false statement herein may be paylice to the argor under the origin set accurate and complete best of my knowledge and belief. Lunderstand that it may be investigated and certify that any false statement herein may be paylice to a science and complete best of my knowledge and belief. Lunderstand that it may be investigated and certify that any false statement herein may be paylice to is accurate and complete best of my knowledge and belief. Lund	National Health Service Co continue to meet the requi	rps (NHSC) approved sites must meet all requirements stated below at the time of application and must rements in order to maintain status as an NHSC-approved site.
 Is located in and treats patients from a federally-designated Health Professional Shortage Area (HPSA). Does not discriminate in the provision of services to an individual (i) because the individual is unable to pay; (ii) because payment for those services would be made under Medicare, Medicaid, or the Children's Health Insurance Program (CHIP); or (ii) based upon the individual's race, color, sex, national origin, disability, religion, age, or sexual orientation. [May or may not be applicable Indian Health Check Facilities, This May Operated 63 Mealth Programs and Urban Indian Mealth Programs (CHIP); or (ii) based upon the individual's race, color, sex, national origin, disability, religion, age, or sexual orientation. [May or may not be applicable Indian Health Check Facilities, This May Operated 63 Mealth Programs and Urban Indian Mealth Programs (TUA)]. Uses a schedule of fees or payments for services consistent with locally prevailing rates or charges and designed to cover the site's reasonable costs of operation. (May or may not be applicable to ITUS, free clinics, or prisons.) Uses a discounted/Silding fee schedule to ensure that no one who is unable to pay will be denied access to services. This system must provide a full discount to individuals and families with annual incomes at or below 100% of the federal poverty undid the operative data costs on denied. Therefore, there using the events and the state the test of the state of the statement is laccurate and complete best of my knowledge and belief. Understand that it may be investigated and certify that the information given in this request is accurate and complete best of my knowledge and belief. Understand that it may be investigated and certify that the information given in this request is accurate and complete best of my knowledge and belief. Understand that it may be investigated and certify that the information given in this request is accurate and complete best of my knowledge and belief. Und	This Agreement certifies that siteApplication.person.firstNa	the site named on this application meets all NHSC requirements as outlined below, and I, me) Smith am authorized to provide such certification for the above named site.
2. Does not discriminate in the provision of services to an individual (i) because the individual is unable to pay; (ii) because payment for those services would be made under Medicare, Medicaid, or the Children's Health Insurance Program (CHIP); or (ii) based upon the individual's race, color, sex, national origin, disability, religion, age, or sexual orientation. [May or may not be applicable to Indian Health Service Facilities, Trikely-Qoested 650 Health Programs, and Urban Indian Health Reader Royrams (TUB)]. a. Uses a schedule of fees or payments for services consistent with locally prevailing rates or charges and designed to cover the site's reasonable costs of operation. (<i>May or may not be applicable to ITUB, free clinics, or prisons.</i>) b. Uses a discounted/sliding fee schedule to ensure that no one who is unable to pay will be denied access to sciences. This system must provide a full discount to individuals and families with annual incomes at or below 100% of the federal poverty undiduced local costs of operation. Therefore, Meanted 1000, and	1. Is located in and treat	s patients from a federally-designated Health Professional Shortage Area (HPSA).
system must provide a full discount to individuals and families with annual incomes at or below 100% of the federal poverty individual and incomes a new backward. Therefore there with incomes between 100% and 100% of the federal poverty licertify that test site 6 currently meets all requirements listed in the NHSC Site Agreement above and will continue to meet these requirements in mariani status as an NHSC-approved service site. La low swrify that all the information given in this NHSC Site Application is accurate and complete a best of my knowledge and belief. Lunderstand that it may be investigated and certify that the information given in this request is accurate and complete the best of my knowledge and belief. Lunderstand that it may be investigated and that any false statement herein may be parison as a felony under S. Code, Tille 18, Section 2003 na subject me to civil penalities under the Program Fraud Civil Remedies Act of 1956 (45 CFR 78) Junderstand the bmitting my request does not guarantee its approval, and that it requires review for compliance with my obligation and program policies. I certify that Lam an official representative of test site 6.	 Does not discriminate those services would t individual's race, color <i>Health Service Faciliti</i> Uses a schedule o site's reasonable c Uses a discounte 	in the provision of services to an individual () because the individual is unable to pay; (1) because payment for e made under Medicare, Mediciaid, or the Children's Health Insurance Program (CHIP); or (10) based upon the sex, national origin, disability, religion, age, or sexual orientation. (<i>May or may not be applicable to Indian</i> na, <i>Tribaly-Operated</i> 638 Health Programs, and Urban Indian Health Programs (TUal). If less or payments for services consistent with locally prevailing rates or charges and designed to cover the osts of operation. (<i>May or may not be applicable to ITUs</i> , free clinics, or prisons) distiding fee schedule to ensure that no one who is unable to pay will be denied access to services. This
I certify that test site 6 currently meets all requirements listed in the NHSC Site Agreement above and will continue to meet these requirements in maintain status as an NHSC Sapproved service site. I also verify that all the information given in this NHSC Site Application is accurate and complete a best of my knowledge and belief. I understand that it may be investigated and certify that the information given in this sequest is accurate and complete the best of my knowledge and belief. I understand that it may be investigated and that any false statement herein may be punished as a felony under S. Code, Title 18, Section 21001 and subject me to civil penalties under the Program Fraud Civil Remedies Act of 1986 (45 CFR 79). I understand that bimitting my request does not guarantee its approval, and that it requires review for compliance with my obligation and program policies. I certify that I am an official representative of test site 6 .	system must provi	de a full discount to individuals and families with annual incomes at or below 100% of the federal poverty
		ently meets all requirements listed in the NHSC Site Agreement above and will continue to meet these requirements in (

What Happens Now?

Upon submission, the application is sent to the appropriate analyst at the Division of Regional Operations (DRO) for review as well as the appropriate State Primary Care Office (PCO) staff member for additional comments and a recommendation. When a final decision has been made on the application, the site administrator will be notified of the decision via a portal message and the information for the site will be updated in the system accordingly.



NHSC Site Administrator Portal User Guide

SITE INFORMATION LANDING PAGE (OVERVIEW)

The Site Information Page provides, at a glance, all the tools the site administrator needs to manage their site. The Site Information Page is broken into three sections:

 Site Information (pg. 19) This section includes all the information about the site. The sections are expandable and include the contact information for a site, additional NHSC site information and the site's



main/administrative site's basic information (if available).

2. Self-Service (pg. 21)

This section provides tools for managing the site.

3. Need Assistance? (pg. 34)

Additional tools and functionality for helping the site administrator solve problems.

Each of these sections is examined in more detail below.



NHSC Site Administrator Portal User Guide

SITE INFORMATION

At a glance, the Site Information section of the Site Information page displays the site's name, status, expiration date and BCRS ID. This section also includes the following tools to help the site administrator:

1. Contact Information (pg. 20)

This tool allows the site administrator to view and update the site's information.

2. Additional Site Information (pg. 20)

This tool allows the site administrator to view additional NHSC information for the site.

Site Information					
Site Name	Status Active (A)	Expiration Date 12/31/2013	BCRS ID		
- CONTACT INFO	ORMATIC	N			
If the information displayed Information ()	below is inc	correct, please update	your Site		
Site Name					
Site Address		a l'ann			
Site Email Address	10	@EXAMPLE.CO	м		
Site Phone Number	(000)	000-0000			
Site Fax Number					
- ADDITIONAL SI	TE INFO	RMATION			
Site Geography		Rural			
Site Classification		Private For-Profit			
Type of Site		Private Practice (Solo	'Group)		
Mental Health HPSA Sc	оге	17			



CONTACT INFORMATION

At a glance, the Contact Information section displays the site's name, address, email, and phone and fax numbers for the site. Selecting "Update your Site Information" has identical functionality to the Manage Site Profile tool discussed as part of Site Self Service (pg. 29).

CONTACT INFORMATION				
If the information displayed below is incorrect, please update your Site Information >				
Site Name	Street House, in Descury			
Site Address	115 Ex. 100			
Site Email Address	@EXAMPLE.COM			
Site Phone Number	(000) 000-0000			
Site Fax Number				

The Contact Information section displays the following information:

- 1. Site Name this is the name of the site.
- 2. Site Address this is the physical address for the site (mailing address is stored separately).
- 3. Site Email Address- the email address of the site.
- 4. Site Phone Number- the phone number of the site.
- 5. Site Fax Number- the fax number of the site.

ADDITIONAL SITE INFORMATION

The Additional Site Information section displays NHSC information for the site in a read only format.

- ADDITIONAL SITE INFORMATION				
Site Geography	Rural			
Site Classification	Private For-Profit			
Type of Site	Private Practice (Solo/Group)			
Mental Health HPSA Score	17			

The Additional Site Information section displays the following information:

- Site Geography the type of geography associated with the site (e.g. Rural, Frontier, or Urban).
- 2. Site Classification- the classification of the site.
- **3. Type of Site** the site type of the facility.
- 4. (Type of HPSA) HPSA Score- the type and current score of the HPSA(s) assigned to the site.



SELF-SERVICE

The Self-Service section of the Site Information Page includes the following tools to help the site administrator:

1. Manage Current Job Openings (pg. 22)

This tool allows the site administrator to create new job postings that will appear on the Job Opportunities List (JOL).

Self-Service	
Manage Current Job Openings 🕨	
View Clinician Roster 🕨	
Manage Points of Contact 🕞	
Manage Site Profile 🕨	
Site Visits 🕨	

2. View Clinician Roster (pg. 25) (only available for sites with clinicians in service)

This tool allows the site administrator to view all the clinicians currently serving obligations at the site.

3. Manage Points of Contact (pg. 26)

This tool allows the site administrator to update the points of contact (POCs) for this site.

4. Manage Site Profile (pg. 29)

This tool allows the site administrator to update basic contact information as well as the site profile for the site.

5. Site Visits (p. 33)

This tool allows the site administrator to view past and upcoming site visits.



NHSC Site Administrator Portal User Guide

RECRUITMENT MANAGEMENT (MANAGE CURRENT JOB OPENINGS)

This tool allows the site administrator to manage the positions posted to the Job Opportunities List (JOL). Here the site administrator can create new open job postings, update current job postings and close non-valid job postings. A complete Site Profile is required before creating or updating existing positions

tive Medi	cal Site #1	Status Active (A)		Address 123 Main Street Anytown, VA 555555555	Expiration D 08/23/2014	ate
Use the hours. OPEN	options below to create a POSITIONS Discipling	nd edit job openings a	t your site. Chan	iges made will be reflected on the	HRSA Job Opportunities	List (JOL) within 24
59660	Physician Assistant	Family Practice	Full-Time	Loan Repayment Program	11/27/2011	08/23/2011
59661	Nurse Practitioner	Family Practice	Part-Time	Loan Repayment Program	10/31/2011	08/23/2011
					Сп	eate New Position

The Open Positions table shows all the current job postings for that site. The table displays the following information:

- 1. ID the unique ID number for the positions.
- 2. Discipline the discipline associated with the position.
- 3. Specialty the specialty associated with the discipline.
- 4. Allocation either "Full-Time" or "Part-Time."
- 5. Eligible For the NHSC participant program that this position is eligible for, either "Loan Repayment Program" or "Loan Repayment or Scholar Program."
- 6. Posting Expiration when the job posting will stop posting on the JOL (extendable by the site administrator).
- 7. Last Updated the date the position was last edited.

From this page the site administrator can:

- 1. Create a New Position.
- 2. View/Edit Existing Open Positions.
- 3. View a History of Positions.

The History of Positions will display a list of all vacancies that closed or expired after September 7, 2011.



CREATE A NEW POSITION

The Create New Position screen allows the site administrator to create a new open job posting for the Job Opportunities List (JOL). The screen will only allow the site administrator to create position postings that correspond to the Health Professional Shortage Areas (HPSAs) designated to the site. The paragraph at the top of the page indicates which HPSA types are designated for the site (Primary Care, Dental and/or Mental Health).

Please enter the following inform discipline(s): Primary Care, De the above HPSA disciplines. For the Federal Register.	ation regarding your position. Your site is located in a Health Professional Shortage Area (HPSA) of the following ntal, Mental Health . You may create a limited number of Scholar and Loan Repayor positions that correspond to one of information regarding the limitations on the number of Scholar and Loan Repayor positions you can create, please refer to
Discipline *	Please Select
Specialty *	Please Select V
Eligible For * 🕕	Please Select
Allocation * 🕖	Full-Time Part-Time
Estimated Hours Per Week *	
Projected Hire *	
Position Description * 🕖 (250 characters maximum)	
The position will be available on Posting Expiration Date may not	The Job Opportunities List (JOL) on the Posting Start Date and will be removed on the Posting Expiration Date. The t exceed 90 days from today or the Posting Start Date, whichever is later.
Posting Start Date *	
Posting Expiration Date * 🕖	Cot Maximum Expiration

When creating a new position posting, the site administrator enters the following information (*all fields are required*):

- 1. Discipline The discipline for the position; filtered by the HPSAs designated for the site.
- 2. Specialty The specialty for the position; filtered by the Discipline selected.

Each position is assigned to a HPSA based on the Discipline and Specialty combination selected.

- Eligible For The NHSC participant program for which service credit can be gained. This field is filtered by the score of the HPSA assigned to the position from the discipline and specialty combination and the currently enforced program limits as defined in the Federal Register (<u>http://nhsc.hrsa.gov/communities/apply.htm</u>).
- 4. Allocations The full-time or part-time designation for the position.
- 5. Estimated Hours The number of hours per week the position is to fill.
- 6. Projected Hire The date by which the site administrator is targeting the position to be filled.
- 7. Position Description A brief description of the position outlining the important functions of the position.

Each position must have a Posting Start Date and Posting Expiration Date.

Posting Start Date – The date on which the position posting should first appear on the JOL (new positions may take **up to 24 hours** from creation to appear on the JOL); cannot be before the current date.

Posting Expiration Date – The date on which the position posting should be removed from the JOL if not filled or closed beforehand. Posting Expiration Date can initially be a *maximum* of 90 days past the posting start date. The Set Maximum Expiration Button (Set Maximum Expiration) can be used to automatically calculate and enter the maximum expiration date for the position posting.



VIEW/EDIT A POSITION

The View/Edit Position Screen for open positions allows the site administrator to edit the attributes of the position.

All the same rules for the fields apply as when creating the position. For a description of the fields and rules, please refer to the Create New Position Section (pg. 23).

Adjusting Posting Expiration Date - the site administrator can change the posting expiration date. The new date can be set to a maximum of 90 days past the current date or 90 days past the Posting Start Date (only if the Posting Start Date is in the future).

Please enter the following inform discipline(s): Mental Health, D	nation regarding your position. Your site is located in a Health Professional Shortage Area (HPSA) of the following ental, Primary Care. You may create a limited number of Scholar and Loan Repayor positions that correspond to one of
the above HPSA disciplines. Fo the Federal Register.	r information regarding the limitations on the number of Scholar and Loan Repayor positions you can create, please refer to
Status	Open
Discipline *	Physician Assistant
Specialty *	Family Practice
Eligible For * 🕖	Loan Repayment Program
Allocation * 🕖	● Full-Time ○ Part-Time
Estimated Hours Per Week *	40
Projected Hire *	09/04/2011
Position Description * 🕖	Position Description
(250 characters maximum)	
The position will be available on Posting Expiration Date may no	the Job Opportunities List (JOL) on the Posting Start Date and will be removed on the Posting Expiration Date. The t exceed 90 days from today or the Posting Start Date, whichever is later.
Position ID on JOL	59660
Posting Start Date *	08/29/2011
Posting Expiration Date * 🕖	11/27/2011 Set Maximum Expiration
	CANCEL CLOSE POSITION SAVE
	SANGLE GEOSE FOSTHON SAVE

CLOSING A POSITION

To close an open postion, on the View/Edit Position Screen, select the "Close Position" (CLOSE POSITION) button. A confirmation screen will appear. The site administrator must provide a reason for closing the vacancy. The current available reasons are:

- Position is Filled the position has been filled outside the NHSC (when an NHSC position is matched to an • open position at a site the status of the position will update automatically).
- No Longer an Open Position the position is not being offered any longer.

		in belore their obting	Expiration Date. L	∋y aoing sõ, it will i	be permanently removed	d from the Job
Opportunities List (JOL) within 24	hours.					
Reason for Closing Vacancy *	Please Select	~				
						_

Only after a reason for closure has been entered can the position be closed.



NHSC Site Administrator Portal User Guide

CLINICIAN ROSTER (VIEW CLINICIAN ROSTER)

The site administrator has the ability to view a list of NHSC clinicians currently serving a service obligation at their site. If a site has one or more NHSC clinicians in service, the "View Clinician Roster" tool will be available under "Self-Service" on the Site Information Page.

The clinician roster lists all NHSC clinicians who are currently fulfilling their service obligation at your site. Clinicians which are not part of the NHSC will not be shown here.

CLINICIAN ROSTER

Clinician	Discipline	Specialty	Program	Allocation	Start Date	Obligation End Date
	Certified Nurse Midwife	None	Loan Repayment Program	Full-Time	4/26/2011	12/9/2012

The Clinician Roster includes the following information:

- 1. Clinician the name of the clinician in service.
- 2. Discipline the discipline of the clinician.
- **3. Specialty** the specialty of the clinician.
- 4. **Program** the NHSC program for the clinician; either Loan Repayment or Scholar Program.
- **5. Allocation** full-time or part-time.
- 6. Start Date the initial date the clinician began fulfilling service obligation at the site.
- 7. Obligation End Date the current date the clinician will fulfill their service obligation.



MANAGE POINTS OF CONTACT (POC)

The Site Point of Contacts (POC) table shows, at a glance, all the POCs currently associated with the site.

lame	Type of Contact		Address	Phone	Email	
Sample POC 🕨	Recruitment Contact	~	123 Main Street Anytown, VA 999990000	(123) 456-7890		Remove
Sample POC #2 🕨	NHSC Point of Contact	•	123 Main Street Anytown, VA 55555555	(555) 555-5555	sample@EXAMPLE.COM	Remove 🕨

The Site Points of Contact table provides the following information:

- **1.** Name the name of the POC.
 - If the name is in blue, then the POC is confirmed for that site and is editable by the site administrator, if the name is gray, then the POC is unconfirmed and is not editable by the site administrator. For more information on confirming POCs, see the Adding Points of Contact Section (pg. 27).
- Type of Contact the type of POC.
 - A minimum of one Recruitment Contact is required for each site; this is the POC that is sent to the Opportunities List with open position postings.
- 3. Address the work address of the POC.
- 4. Phone the primary phone number for the POC.
- 5. Email the primary email address for the POC.

From this screen the site administrator can:

- 1. Remove a POC.
- 2. Add a POC.
- 3. Edit a POC.

REMOVING A POC

To remove a POC from the site, select the "Remove" link on the row of the POC to be removed. If the remove option is gray, then the POC cannot be removed.

A POC may not be removed in the following conditions:

- 1. The POC is the site administrator currently viewing the table.
- 2. The POC is the only Recruitment Contact for the site.
 - To remove a POC designated as the only Recruitment Contact for a site, you must assign another POC listed the Recruitment Contact role. The first POC is now removable.



ADDING A POC

When adding a new POC to the site, the system provides three separate ways to locate and add a POC. Each method must be performed in the order listed.

1. Adding a POC from Within the Site's Network

The first method for adding a new POC is using the in-network dropdown menu. An "in-network" POC is an individual who serves as a POC as another site that is affiliated with the current site and the affiliation is on file with the NHSC. If the site has no other in-network sites or innetwork POCs on record, the system will skip this method.

lame	Type of Contact		Address	Phone	Email	
Sample POC 🕨	Recruitment Contact	V	123 Main Street Anytown, VA 999990000	(123) 456-7890	ckinter@sapient.com	Remove
Sample POC #2 🕨	NHSC Point of Contact	~	123 Main Street Anytown, VA 55555555	(555) 555-5555	sample@EXAMPLE.COM	Remove 🕨
DD POC FROM	I SITE NETWORK					
ease search for you	r Point Of Contact within your c	urrent site	network.			

To add a POC from within the site network, select the POC from the dropdown and select "Add". POCs added using this method are automatically confirmed and their information is automatically editable in the Site POC Table.

If the desired POC is not listed, check the box next to "I do not see my POC listed" and select "Search NHSC Database" to continue to the next search method.

2. Searching the NHSC Database

The second method for adding a POC is searching for an existing POC in the NHSC database.

To search for a POC enter any criteria in the search fields and select "Search". The POCs listed are POCs at other existing NHSC sites and are outside the

Search NHSC D	atabase	
ADD POC FROM NHSC	DATABASE	
To search for your Point Of Conta	t in the NHSC database, please enter one or more of the following o	criteria.
POC First Name		
POC Last Name		
POC Primary Email		
POC Primary Phone Number		
Search		

current site's network. In the list of search results, select a POC. Only POCs at other sites are displayed through this search method. If the desired POC is also an NHSC clinician, please contact the NHSC for assistance.

When adding a POC using this method, the POC will be added as "unconfirmed" and will not be editable from the Site POC table. An email confirmation is sent to the newly added POC asking them to confirm the association. Once the POC confirms via the email, they will become editable in the Site POC Table.

If the desired POC is not found via search, check the box next to "No, my POC is not listed in these matches" and select "Enter New POC".

NOTE: Only Points of Contact are displayed through this search method. If the desired POC is an NHSC clinician, please contact the NHSC for assistance.



3. Entering New POC Information

The third and final option for adding a new POC to a site is to manually enter the POC information. All required fields are marked with an asterisk (*).

When entering an email address, use the work email address of the POC, not a personal email address. The email address must be unique for each POC across the NHSC.

Upon saving the information the system will search for potential matches in the system. If matches are located, the site administrator will be prompted to either select a match or save the newly entered information.

POCs created using this method are automatically confirmed for the site and are immediately editable in the Site POC Table.

EDITING A POC

Selecting an editable POC in the Site POC Table opens the Edit POC Information screen.

Here the site administrator can update the POC information as appropriate and select "Save". All required fields are marked with an asterisk (*).

Updating Your Own Information

When site administrators update their own records, they cannot update their name or

Edit POC Information

ENTER NEW POC INFORMATION Please enter the following information regarding your new POC

safd

Select 💌

Select 💌

Recruitment Contact

•

•

SAVE

First Name *

Last Name '

Type of Contact *

Fax Number Email Address *

Address Line 1 *

Address Line 2

Zip/Postal Code *

City * State/Province/Region *

Primary Phone Number* Secondary Phone Number

Title

Suffix

Please enter the following information to m	odify to your existing Point Of Contact.
First Name *	Sample
Last Name *	POC#2
Type of Contact *	NHSC Point of Contact
Primary Phone Number *	(555) 555-5555
Secondary Phone Number	(555) 555-5555
Fax Number	(555) 555-5555
Email Address *	sample@EXAMPLE.COM
Address Line 1 *	123 Main Street
Address Line 2	
City *	Anytown
State/Province/Region *	Virginia
Zip/Postal Code *	55555 -5555
	SAVE

email address from this page. In order to change their name, site administrators need to contact BCRS. To change their email address, site administrators need to use the Account Settings tool (pg. 5).

Updating Other POCs Information

Site administrators have the ability to update the information for other POCs at their site(s). If the POC the site administrator wishes to edit has registered a portal account, the site administrator will *not* be able to change their name or email address. If the POC the site administrator wishes to edit has not registered a portal account, the site administrator will be able to edit all fields.

Whenever POC information is changed, the POC whose record was changed will receive an email notifying them of the change.



NHSC Site Administrator Portal User Guide

MANAGE SITE PROFILE

The first page displayed for the Site Administrator upon selecting "Manage Site Profile" from the Self Service section or selecting "Update your Site Information" from the Contact Information section is the Manage Site Profile Page. The information that the site administrator can update directly on the portal is limited to information that does not affect NHSC eligibility or Health Professional Shortage Area (HPSA) designation. This information will be displayed on the site's profile on the Jobs Center. Fields marked with (*) are required fields.

lanage Site Profile ^{quired field}	
Your Site Profile displays information about your site that job seek photos and web links displayed on your Site Profile here. See an example of a site profile ►	ers can review. It is available through the NHSC Jobs Center. Manage the information,
STEP 1: DESCRIBE YOUR SITE	Peter's Health Facility
Site Name	Petar's Health Facility
The meaning (IFML 140 Characters) Provide a concise overview of your alte's mission to assist a job seeker in understanding the most important aspects of	A
your site	
Site Description (limit 1000 characters) - Enter a more detailed description of your site here. You may include important services you provide, features of your community, etc.	
STEP 2: VERIFY POINTS OF CONTACT All points of contact for your site that are labeled as a "Recruitmen please go to the Manage Points of Contact section for this site.	t Contact" will appear as points of contact on your site profile. To update this information,
Recruitment Contacts	
Contact Name Phone	Email
Petar Smith (123) 456-7890	pmilutinovic@sapient.com
tnis document. Suggestion: include your site's name in the name of Upload New Site Brochure.	ST THE THE.
Choose File No file chosen	
STEP 4: PROVIDE SITE DETAILS	
Languages Spoken By Patients *	Services Provided *
E Spanish	
	· Panny Wedene
Don't see what you're looking for? Add It!	Don't see what you're looking for? Add It!
Specialty Services Provided	Other Benefits Provided
Pain Management	Multidisciplinary Care
	¥
Don't see what you're looking for? Add It!	Don't see what you're looking for? Add It!
STEP 5: PROVIDE OTHER SITE INFORMATION	
Other Information	Site Contact Information
Number of patients served annually * 🕖	Site Email Address * pedro@health.com
	Official Website
Days/Hours of Operation *	Site Phone Number * (123) 432-1563
	Site Fax Number
	DUNS Number
Facility Size * 🕖	
	a
Relevant Links	
Add web site or social media links so job seekers can learn more	about your
organization and community.	
Name Address	Add Itt
\square I have read and agreed to the terms and conditions outlin	ned in the Rules of Behavior for site administrators
If you would like to update information	Want to see what it looks like? 🕖 🛛 Ready to upload images?
not available on this page, please contact us 🕩	SAVE & VIEW PROFILE SAVE & CONTINUE

PROPERTY OF HRSA | BCRS

NHSC Site Administrator Portal User Guide

To update the information, the site administer enters the new information into the appropriate field, selects the checkbox agreeing to the terms and conditions and selects "Save and Continue". Selecting "Save &View Profile" will display how the information will appear on the Jobs Center. The information that a site administrator can update is as follows:

- 1. Step 1: Describe your site (pg. 30) a description of the site.
- 2. Step 2: Verify Points of Contact (pg. 30) the point(s) of contact for the site. Please refer to p.23 (Manage Points of Contacts) for more information.
- 3. Step 3: Upload a Brochure for your Site (pg.31) the ability for the site to upload their brochure.
- 4. Step 4: Provide Site Details (pg. 31) a list of options such services the site provides, languages spoken, any other benefits the site may choose.
- 5. Step 5: Provide Other Site Information (pg. 32) other information the site provides.
- 6. Step 6: Manage Site Profile Images (pg. 32) images the site may upload to be displayed on the Jobs Center.

If the site administrator needs to update any other information about the site (i.e. site name, address, site type, etc...), please contact NHSC using the "Contact Us" link at the top of the page as this information may affect NHSC eligibility.

DESCRIBE YOUR SITE

When describing the site, the system allows the site administrator to enter the site's headline as well as a short description.

STEP 1: DESCRIBE YOUR SITE	
Site Name	Petar's Health Facility
Site Headline (limit 140 characters) Provide a concise overview of your site's mission to assist a job seeker in understanding the most important aspects of your site	
Site Description (limit 1000 characters) * Enter a more detailed description of your site here. You may include important services you provide, features of your community, etc.	

- 1. Site Headline- a concise overview of the site's mission.
- 2. Site Description- a detailed description of the site.

VERIFY POINTS OF CONTACT

This section of the application has identical functionality to the Manage Points of Contact tool discussed as part of Site Self Service (pg. 26).

STEP 2: VERIFY POINTS OF CONTACT

All points of contact for your site that are labeled as a "Recruitment Contact" will appear as points of contact on your site profile. To update this information, please go to the Manage Points of Contact section for this site.

Recruitment Contacts		
Contact Name	Phone	Email
Petar Smith	(123) 456-7890	pmilutinovic@sapient.com



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UPLOAD BROCHURE FOR YOUR SITE

This section allows the site administrator to upload a brochure to promote the site.

STEP 3: UPLOAD BROCHURE FOR YOUR SITE

Here, you can upload a one-page flyer or marketing brochure that you use to promote your site. Those who view your site profile will be able to download this document. Suggestion: Include your site's name in the name of the file.

Upload New Site Brochure

Suggested file types: jpg, doc, & pdf

Choose File No file chosen

Uploading a Document (File Size Limit: 5 MB)

- **1.** Select a document to upload.
- 2. Select "Choose File" and browse and select the appropriate file.

PROVIDE SITE DETAILS

This section allows the site administrator to select details about the site. If the site administrator cannot find the specific item that is listed, they may add the item by entering it in the data field located below that specific section and selecting "Add It!"

Patois		Services Provided
🗖 Khmer		Counseling
Hangul		Nurse midwifery
Tagalog		Pediatrics
3 3	•	🗖 Women's Health 💗
n't see what you're looking for?	Add It!	Don't see what you're looking for? Add It!
n't see what you're looking for?	Add It!	Don't see what you're looking for? Add It! Other Benefits Provided
nt see what you're looking for?	Add It!	Oon't see what you're looking for? Add it! Other Benefits Provided
Int see what you're looking for?	Add It!	Don't see what you're looking for? Add It! Other Benefits Provided Teaching
ecialty Services Provided Parm management Pulmonary Health Migrant Health Care	Add It!	Don't see what you're looking for? Add It! Other Benefits Provided Teaching CMEs/CEUs
	Add It!	Don't see what you're looking for?

- 1. Languages Spoken By Patients- allows the site administrator to select the various languages spoken by patients of the site.
- 2. Services Provided- allows the site administrator to select the various services that are provided at the site.
- **3. Specialty Services Provided** allows the site administrator to select the various specialty services that are provided at the site.
- 4. Other Benefits Provided- allows the site administrator to select other benefits that the site provides.



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PROVIDE OTHER SITE INFORMATION

This section allows the site administrator to provide further details about the site as well as update the site's contact information.

STEP 5: PROVIDE OTHER SITE INFORMATION		
Other Information	Site Contact Information	
Number of patients served annually * 🕖	Site Email Address *	pedro@health.com
	Official Website	
Days/Hours of Operation *	Site Phone Number *	(123) 432-1563
	Site Fax Number	
Facility Size * 🕖	DUNS Number	
Relevant Links		
Add web site or social media links so job seekers can learn more about you organization and community.	ır	
Name Address Add It!		

- 1. Number of patients served annually- this is the number of patients the site treats in a calendar year.
- 2. Days/Hours of Operation- the days of operation and the business hours of the site.
- 3. Facility Size- the total number of exam rooms/examination chairs the site has.
- 4. Relevant Links- additional links the site has added.
- 5. Site Contact Information- the contact information and DUNS Number associated with the site.

MANAGE SITE PROFILE IMAGES

Upon selecting "Save and Continue" on the Manage Site Profile page, the site administrator is navigated to the Manage Site Profile Images page. On this page, the site administrator has the ability enter a description and upload images that will be displayed on the site's profile on the Jobs Center as well as manage existing images.

Manage Site Profile I	mages	
UPLOAD NEW IMAGE		
Image Title *		
Image Description *		
Upload Image	Choose File No sen Upload Image	
MANAGE EXISTING IMAGES		
	Want to see what it looks like? 🌗	Done Uploading?
	SAVE & VIEW PROFILE	SAVE & FINISH

Uploading an Image (File Size Limit: 5 MB)

- 1. Select "Choose File" and browse and select the appropriate file.
- 2. Select "Upload Image."

When the Site Administrator has finished uploading images, selecting "Save and finish" will save the information that has been entered and return the site administrator to the Site Information Landing page.



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SITE VISITS

The Site Visit table displays all pending site visits as well as site visits that have already been performed.

ENDING VISIT	s		
Туре	Scheduled Date	Status	
Routine	08/31/2013 01:00 PM	Proposed	
AST VISITS			
here are no previous	Site Visits on record.		

The Pending Visits table and the Past Visits table provide the following information:

- **1. Type** the type of visit scheduled.
- 2. Scheduled Date the date and time the visit is scheduled for.
- 3. Status- the current status of the visit.



NHSC Site Administrator Portal User Guide

NEED ASSISTANCE? (SITE INFORMATION PAGE)

The Need Assistance section of the Site Information Page allows the site administrator to perform four actions:

View Submitted Requests (pg. 34)

Recent requests submitted for the site will appear in the table with older requests in the "View All Requests" link.

- Recertify (pg. 35) Submit a recertification for the site when it is about to expire.
- Reapply (pg. 41) (not pictured) Resubmit an application after the previous attempt was rejected.
- Ask a Question (pg. 42) Ask BCRS a question using the inquiry feature.

Status Submitted
Status Submitted
Submitted
View All Requests 🕨
0

VIEWING REQUESTS

The "All Requests" table on the Site Information page includes requests with action in the past 30 days. To view older requests, the "View All Requests" link will display tables for all "open" requests and a history of all "closed" requests for the site. Selecting a request from either of the tables will open a page with the request details and any actions the site administrator can perform. The information in the tables includes:

- 1. **Request Type** identifies the type of request.
- 2. Date Submitted the date the request was first submitted.
- 3. Date Last Updated the date the request was last modified or action was taken.
- 4. **Status** status of the request, either "Submitted", "Open" or "Closed" for an inquiry or "Submitted-Pending Decision", "Canceled", "Rejected", "Pending Site Visit" or "Approved" for an application.



SITE RECERTIFICATION

The "Recertify" link will appear when a site is able to recertify. NHSC sites are required to recertify every three (3) years in order to maintain eligibility. A portal message containing instructions will be sent to the site administrator when the recertification cycle opens notifying him/her that their site needs to submit a recertification. In order to initiate a recertification the site must:

- Have an approved site application on file.
- Not have an existing site recertification in progress.
- Not have an existing site recertification pending a site visit.
- Not be in "Terminated" status.
- Not receive funding through the Bureau of Primary Health Care (BPHC) (recertification not required).
- Not be a "federal" site (IHS, ICE, Federal BOP, etc...) (recertification not required).

The recertification follows the same process as the site application, but is prepopulated with the current site information found in the system.

NHSC SITE ELIGIBILTY QUESTIONS

The first page of the site Start NHSC Site Recertification recertification is the NHSC Site INSTRUCTIONS Welcome to the NHSC Online Site Recertification . Before you begin, carefully review the NHSC website, the NHSC Site Reference Guide 🔁 , and the NHSC Site Agreement (located in the appendix of the NHSC Reference Guide) to ensure your aite meets all eligibility and program requirements. Sites must meet all requirements listed in the NHSC Site Agreement at time of application. If you we questions about the general application process or program requirements, contact your State Primary Care Office. For technical issues in completing the application contact the NHSC Call Center at 1-800 221-9393 or Gettlefte@inte.gov. Eligibility Page. The Site Administrator must correctly If you are applying on behalf of multiple clinical site locations, please complete the main/administrative site application first. Each site location must submit a separate application and meet the same eligibility criteria in order to be approved by the NHSC. In order for NHSC obligated clinicians to receive service credit for time spent at any clinical service site location, each clinical service site must obtain written approval from the NHSC. Please note that approval of the main/administrative site does not indicate approval for affiliated satellite sites. answer the eligibility questions to recertify. Type of Site * 🕖 Private Practice (Solo/Group) -NHSC SITE ELIGIBILITY QUESTIONS As an official representative of the applying site, please answer each of the following questions. For more information on NHSC member site eligibility requirements, please visit the NHSC Sites website. As an official representative of the applying site, have you read the NHSC Site Reference Guide 落 and do you understand the program requirements as listed in the NHSC Site Agreement included at the end of the Reference Guide? The "Continue" button will not O Yes O No Is your site physically located in and does it serve the population of a Health Professional Shortage Area (HPSA) which corresponds to the services provided at the site? 🔮 be enabled until each question is O Yes O No answered. Upon selecting Is your site a Primary Care Outpatient Facility, as defined below, or a CMS-certified Critical Access Hospital? 🕖 O Yes O No "Continue," the General Does your site utilize a qualified discounted/sliding fee schedule and has it been in place for at least 12 months? 🕡 Information Page will be C Yes C No Does your site deny services to an individual based on inability to pay or enrollment in Medicare, Medicaid or your state's Children's Health Insurance Program (CHIP)? displayed or the Site O Yes O No Administrator will be notified Does your site utilize a credential Practitioner Data Bank (NPDB) aling process which, at a minimum, includes reference review, licensure verification, and a query of the National the site is ineligible to apply C Yes C No Does your site prominently display a statement in common areas (and on site's Web site if applicable) that explicitly states that 1) no one will be denied access to services due to inability to pay and 2) there is a discounted/sliding fee schedule available? *Examples of acceptable sign and website language ere located in the Downloadsble Resources accins of the NHSC website under "Site Policy Poater"*. based on the previous answers. O Yes O No (Image located below) CONTINUE

Eligibility Information

Based on responses to the above questions, this site is not eligible for participation in the National Health Service Corps (NHSC). For more information on NHSC site eligibility and program requirements, please review our **website** and the **NHSC Site Reference Guide** 🔂 . If you have additional questions, please contact your **State Primary Care Office** or the NHSC Call Center at 1-800-221-9393 or **GetHelp@hrsa.gov**.

BACK TO PORTAL



GENERAL INFORMATON (1/6)

The first page of the site recertification is the General Information page. The entire site's contact information is included on this page. The site's address information on this page is read only. If the Site Administrator needs to make changes to the address information, they should select the checkbox indicating the current information is not correct. On review, a DRO Analyst will be alerted that the current information is not correct and contact the site.

Fields which are editable:

- 1. Also Known as/Doing Business as Alias
- 2. Site Phone Number
- **3.** Site Fax Number
- 4. Site E-mail Address
- **5.** Site Web Address
- 6. Site Classification
- 7. Mailing Address

Please enter information pertaining to the clinica submit an NHSC application for each clinical ser	I site where NHSC clinicians will serve. Organizations with more than one site location (i.e. satellites) wice site where NHSC clinicians may practice.
PRACTICE SITE NAME AND LOCAT	ION (Where the NHSC clinician will serve their obligation)
Site Name 🕖	Kardashian Health Clinic
Also Known as/Doing Business as Alias ()	
Address Line 1	123 anywhere street
Address Line 2	
City	Orlando
State/Province/Region	Florida
Zip/Postal Code	12345
County	Hendry
Check here if the above address is incorrect. Site Phone Number *	(234) 567-8901
Site Fax Number	
Site E-mail Address *	example@example.com
Site Web Address 0	
Site Classification *	Solo Private Non-Profit 💌
Mailing Address	
Mailing Address is Same as Site Location	

All fields marked with an asterisk (*) are required fields. Move mouse over tooltip icons (^(a)) to view additional information about the field.

At any time during the recertification process, the Site Administrator can select "Save for Later" to save the information and complete the recertification later. Selecting "Home" in the navigation banner located at the top of every page, will return the site administrator to the landing page without saving the information. Only selecting "Continue" or "Save for Later" will save the information that has been entered on the page. Upon completion of this page, the appropriate State PCO Member is notified that the site has initiated a recertification.

NOTE: If the site has changed names or addresses, please contact your DRO state lead or the BCRS Customer Care Center at **1-800-221-9393**.

POINTS OF CONTACT (2/6)

This section of the application has identical functionality to the Manage Points of Contact tool discussed as part of Site Self Service (pg. 26).

NOTE: All sites except those classified as Solo Private Non-Profit or Solo Private For Profit are required to list a minimum of 2 points of contact.



NHSC PROGRAM INFORMATION (3/6)

The third page of the site recertification displays the NHSC Program information for the site. All fields are prepopulated and editable.

All fields marked with an asterisk (*) are required fields. Move mouse over tooltip icons (¹) to view additional information about the field.

Important Notes:

- The Site Administrator is required to select at least one service that is provided at the site.
- The Site Administrator is required to enter the corresponding insurance number if selecting "Yes" to the Medicaid, Medicare or State Children's Health Insurance questions. If "No" is selected for any of those questions, the Site Administrator is required to enter a reason for not accepting that particular program.
- The Site Administrator has the ability to enter any additional information that may be useful in the review of the application.

Primary Care Services Provided (check all that Verify the type of outpatient, ambulatory (or certifit provided at the applying site. In order to be approv	it apply)	
Verify the type of outpatient, ambulatory (or certifi provided at the applying site. In order to be approv		
Professional Shortage Area (HPSA) which corre	ed Critical Access Hospital) primary care red through NHSC, the site must be loce sponds to the services provided by the s	e services provided by the site by checking all services bek ated in a primary care, mental health, or dental Health ite.
Primary Medical Care	Primary Dental Care	Primary Behavioral Health Care
General Primary Care	General Dentistry	General Mental Health Care
Family Medicine	Pediatric Dentistry	
General Internal Medicine		
General Pediatrics		
Geriatrics		
Obstetrics/Gynecology		
Women's Health		
scording to the site's discounted/sliding fee sch aximum amount charged to a qualifying patient w	edule , what is the nominal fee ho is at 100% of poverty)? 🚺	\$123.00
ccording to the site's discounted/silding fee sch aximum amount charged to a qualifying patient w ses your site accept Medicare (\$?	edule, what is the nominal fee ho is at 100% of poverty)?	\$123.00
coording to the site's discounted/sitiding fee sch aximum amount charged to a qualifying patient w ses your site accept Medicare G ? edicare Number	edule, what is the nominal fee ho is at 100% of poverty)? 🛈 I Yes C No 213213	\$123.00
cording to the site's discounted/Silding fee sch aximum amount charged to a qualifying patient w bes your site accept Medicare IP ? edicare Number les your site accept Medicaid IP ?	edule, what is the nominal fee ho is at 100% of poverty? 🕡 I Yes C No 213213 I Yes C No	\$123.00
cording to the site's discounted/Siding fee sch aximum amount charged to a qualifying patient w ees your site accept Medicare 6P? edicare Number ees your site accept Medicaid 6P? edicaid Number	edule, what is the nominal fee ho is at 100% of poverty)?	\$123.00
ccording to the site's discounted/silding fee sch naximum amount charged to a qualifying patient w bes your site accept Medicare (2?) edicare Number pes your site accept Medicaid (2?) edicaid Number bes your site accept the state's Children's Healt surance Program (2) (CHIP)?	adule, what is the nominal fee ho is at 100% of poverty)? Yes C No 213213 Yes C No 213213 No C Yes C No	\$123.00
Scording to the site's discounted/Siding fee sch aximum amount charged to a qualifying patient w bes your site accept Medicare G? edicare Number ses your site accept Medicaid G? adicaid Number ses your site accept the state's Children's Healt surance Program & (ChilP)? bes the applying site have a current clinical recru d retention plan on file and available for NHSC r on request?	adule, what is the nominal fee ho is at 100% of poverty)?	\$123.00

When the site administrator has finished entering the required NHSC Program Information, selecting "Continue" will navigate to the next page of the recertification.



HPSA SCORE SUGGESTION (4/6)

The HPSA Score Suggestion page allows the Site Administrator to suggest HPSAs appropriate for the site using the HPSA Find Tool. HPSA suggestion is not required to submit a recertification. Only HPSAs that match the primary care services (Primary Medical, Primary Dental, or Primary Behavioral Health Care) selected on the NHSC Program Information page may be suggested. HPSAs that are currently assigned to the site will also be displayed.

Steps for Suggesting a HPSA:

- **1.** Select the link for the "HPSA Find Tool" to search for valid HPSAs (external web page)*.
- 2. Enter the HPSA ID and select "Add."
- 3. When finished entering HPSAs for the site, select "Continue."

HPSA Rules:

- 1. An active site must be assigned at least one (1) HPSA.
- 2. A site may not be assigned more than six (6) HPSAs.
- 3. A site may not be assigned more than one (1) HPSA of each type (e.g. Primary Medical Care, Dental, and Mental Health), unless one of the HPSAs is an Auto-HPSA.

*The HPSA Find Tool is an online tool furnished by the Health Resources and Services Administration (HRSA) that allows the user to search for HPSAs by address. For information on using the HPSA find tool, refer to documentation on the tool site.

The HPSAs Suggested by the Site table and the Assigned HPSAs displays the following information:

- 1. HPSA ID the ID assigned to the HPSA.
- 2. Name- the name of the HPSA.
- 3. Auto HPSA- Yes/No indication if the HPSA is auto-approved
- Score- the current score of the HPSA.
- 5. HPSA Discipline- the discipline of the HPSA. Options include Primary Care, Mental Health, or Dental.
- 6. Status- the current status of the HPSA.

The site administrator may remove HPSAs that have been suggested by selecting "Delete" on the row of the HPSA to be deleted.

HPSA Score Suggestion

SUGGEST A HPSA

You may suggest Health Professional Shortage Area (HPSA) IDs which are applicable to test site 200 and based on verified information found in the HPSA Find tool. The HPSA score must correspond to the services (primary care, mental health, and/or dental) provided at this site location. This field is not required for submission of the NHSC Site Application. NHSC and State Primary Care Office staff will verify this information and add all applicable HPSA IDs to the application during the review process. If no HPSA exists for the physical location of the applying site, the site application will be denied. For additional assistance in identifying the HPSA ID, contact your State Primary Care Office.

Enter the HPSA ID Add

Note: The NHSC system updates HPSA scores annually on January 1st. If this field does not recognize a designated HPSA from the HPSA Find database, please continue with the application. The application will be held and processed after the January 1st HPSA update if the application meets all other requirements.

Assigned HPSAs

HPSA ID	Name	Auto-HPSA	Score	HPSA Discipline	Status
1059990534	Portland/Wilmot Service Area	No	16	Primary Care	Designated
IPSAs Sugges	sted by the Site				
lo HPSAs have t	been suggested by the site.				
				SAVE FOR LATER	CONTINUE





SUPPORTING DOCUMENTS (5/6)

The fifth page of the site recertification allows the site administrator to digitally upload supporting documents required for recertification. Documents which were uploaded with the initial approved site application will also be listed and eligible to be opened to view.

The documents that appear in the Selected Document Type(s) table are required. Instructions, requirements, and other information can be found by expanding the Document Instructions accordion. Comments are optional, unless "Other Documentation Requested by NHSC or State Primary Care Office" is selected.

When the site administrator is finished uploading documents, selecting "Continue" will navigate to the next page of the recertification.

Uploading a Document (File Size Limit: 5 MB)

ipporting Documer	its
uired field	
Please upload the required documents listec ocation (i.e. satellites) must submit an NHS contact your State Primary Care Office .	below pertaining to the clinical site where NHSC clinicians will serve. Organizations with more than one sit C application for each clinical service site where NHSC clinicians may practice. For additional assistance,
+ DOCUMENT INSTRUCTION	ŝ
- UPLOAD DOCUMENTS	
Nore information about required documents,	including samples or templates can be found on the NHSC Sites and Communities Page.
Select document type(s):	
NHSC Site Data Tables*	
Discounted/Sliding Fee Schedule*	
Other Documentation Requested by NH	SC or State Primary Care Office
Comment	
Choose File No file chosen	Upload Document
JPLOADED DOCUMENTS	
io documents nave been uploaded for this r	aquest
reviously Uploaded Documents	
Previously Uploaded Documents Document Name	Document Type Comments
Previously Uploaded Documents Document Name Use Case Scenario Template.doc	Document Type Comments Discounted/Sliding Fee Schedule
Previously Uploaded Documents Document Name Use Case Scenario Template.doc	Document Type Comments Discounted/Sliding Fee Schedule Policies on Non-Discrimination
Previously Uploaded Documents Document Name Use Case Scenario Template.doc	Document Type Comments Discounted/Sliding Fee Schedule Policies on Non-Discrimination NHSC Site Data Tables NHSC Site Data Tables
Previously Uploaded Documents Document Name Use Case Scenario Template.doc	Document Type Comments Discounted/Sliding Fee Schedule Discounted/Sliding Fee Schedule Policies on Non-Discrimination NHSC Site Data Tables Photograph of Posted Signage Photograph of Posted Signage
Previously Uploaded Documents Document Name Use Case Scenario Template.doc	Document Type Comments Discounted/Sliding Fee Schedule Policies on Non-Discrimination NHSC Site Data Tables NHSC Site Data Tables Photograph of Posted Signage Proof of Access to Ancillary, Inpatient, or Specialty Care
Previously Uploaded Documents Document Name Use Case Scenario Template.doc	Document Type Comments Discounted/Sliding Fee Schedule Policies on Non-Discrimination NHSC Site Data Tables Photograph of Posted Signage Proof of Access to Ancillary, Inpatient, or Specialty Care Patient Application for the Discounted/Sliding Fee Schedule

- **4.** Select one or more document types for the document. A single document may contain several document types (e.g. a single PDF file may have a Sliding Fee Schedule and Proof of Practice in one document).
- 5. Select "Choose File" and browse and select the appropriate file.
- 6. Select "Upload Document."

Deleting a Document – In the uploaded documents table, select "Delete" in the row of the document to remove that document.



SAVE FOR LATER

CONTINUE

SITE AGREEMENT (6/6)

The final page of the site recertification is where the site administrator agrees to the NHSC Site Agreement.

Agreement and Submission

- 1. Read the NHSC Site Agreement.
- Check the box certifying that the site meets and will continue to meet NHSC site requirements.
- Check the box certifying you are an official representative of the site.
- Digitally sign the recertification by entering the site administrator's password.
- 5. Select "Submit."

 National Health Service Corps (NHSC) approved sites must meet all requirements stated below at the time of application and must continue to meet the requirements in order to maintain status as an NHSC-approved site. This Agreement certifies that the site named on this application meets all NHSC requirements as outlined below, and I, siteApplication person firstName) Smith am authorized to provide such certification for the above named site. I. Is located in and treats patients from a federally-designate Health Professional Shortage Area (HPSA). 2. Does not discriminate in the provision of services to an individual (i) because the individual is unable to pay, (ii) because payment for those services would be made under Medicare, Medicaid, or the Children's Health Insurance Program (CHIP); or (ii) based upon the individual's race, color, sev., national origin, disability, religin, age, or sevual orientation. [May or may not be applicable to Indian Health Service Facilities, Tribally-Operated 638 Health Programs, and Urban Indian Health Programs (ITUg)]. a. Uses a schedule of fees or payments for services consistent with locally prevailing rates or charges and designed to cover the site's reasonable costs of operation. (May or may not be applicable to ITUs, free clinics, or prisons.) b. Uses a discounted/sliding fee schedule to ensure that no one who is unable to pay will be denied access to services. This system must provide a full discount to individuals and families with annual income. 1006. ed. 2009. ed. 1006. If the federal poverty cuidelines. (Children Service Schedule access to services. This system must provide a full discount to individuals and families with annual income. 1008. ed. 2009. ed. 1006. If the federal poverty cuidelines (children federal poverty that all the information given in this NHSC Site Application is accurate and or the best of my knowledge and belief. I understand that it may be investigated and certify that the information given in	HSC SITE AGREEN	IENT:
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Icertify that test site 6 currently meets all requirements listed in the NHSC Site Agreement above and will continue to meet these requirement maintain status as an NHSC-approved service site. I also verify that all the information given in this NHSC Site Application is accurate and comp a best of my knowledge and belief. I understand that it may be investigated and certify that the information given in this request is accurate and c the best of my knowledge and belief. I understand that it may be investigated and certify that the information given in this request is accurate and c the best of my knowledge and belief. I understand that it may be investigated and that any false statement herein may be punished as a felony S. Code, That IB, Section 21001 and subject me to chil penalities under the Program Fraud Civil Remedies Act of 1996 (45 CFR 79). I understant with the neuronal statement and that any the the statement herein the the the the the test of the statement herein the s	b. Uses a discours system must p swidelings (or	ted/sliding fee schedule to ensure that no one who is unable to pay will be denied access to services. This rovide a full discount to individuals and families with annual incomes at or below 100% of the federal poverty to be accessed and the service scheme of the scheme of the service scheme of the scheme of the service scheme of the
umitting my request opes not guarantee its approval, and that it requires review for compliance with my doligation and program policies. I certify that I am an official representative of test site 6.	I certify that test site 6 c maintain status as an NH a best of my knowledge at the best of my knowledge S. Code, Title 18, Section ibmitting my request does id certify that I am an offic	urrently meets all requirements listed in the NHSC Site Agreement above and will continue to meet these requirements in SC-approved service site. I also verify that all the information given in this NHSC Site Application is accurate and complet d belief. I understand that it may be investigated and certify that the information given in this request is accurate and com and belief. I understand that it may be investigated and that any false statement herein may be punished as a felony und 21001 and subject me to civil penalties under the Program Traud Civil Remedies Act of 1986 (45 CFR 79). I understand th at it requestrative its approval, and that it requires review for compliance with my obligation and program policies.

What Happens Now?

Upon submission, the recertification is sent to the appropriate analyst at the Division of Regional Operations (DRO) for review as well as the appropriate State Primary Care Office (PCO) Member for additional comments and recommendations. When a final decision has been made on the recertification, the site administrator will be notified of the decision via portal message and the information for the site will be updated in the system accordingly.



NHSC Site Administrator Portal User Guide

REAPPLY

The "Reapply" link will appear when a site application has been rejected. A reapplication follows the same process as the initial site application, but is populated with the previously entered site information until the user reaches the NHSC Program Information page. All data fields are editable.

RECENTR	EQUESTS		
RequestID#	Request Type	Date Last Updated	Status
51730 🕟	Site Application	8/6/2013	Rejected
NEED TO			Trequests
1122210			
Reapply 🕟			

In order to reapply the site must:

- Have a rejected site application on file.
- Not have an existing application in progress.
- Not have an existing approved application.
- Not have an existing application that is pending a site visit.
- Not receive funding through the Bureau of Primary Health Care (BPHC) (recertification not required).
- Not be a "federal" site (IHS, ICE, Federal BOP, etc...) (recertification not required).



ASK A QUESTION

The Ask a Question tool allows a site administrator to ask a question to BCRS.

The Ask a Question page provides a section for the site administrator to enter a message and a place to upload any documents to help BCRS understand the issue.

Contact Us – enter a message for BCRS in the space provided. The message can be a question, comment or correction that needs to be made.

CONTACT 03	•			
Enter your question	n, comment or correction below			
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Upload Document (File Size Limit: 5MB) - the site

administrator may upload any documents to help BCRS understand the issue. Any uploaded documents can be viewed in the Your Uploaded Documents section.

To upload a document:

- 1. Select "Choose File" browse for and select a file
- 2. Enter a Description a brief description of the file being uploaded; this is required
- 3. Select "Upload Document"

What Happens Now?

After the site administrator selects "Send" the message is sent a BCRS intake team who will begin to work on answering the question or correcting the issue. BCRS may contact the site administrator with follow up messages as appropriate.

