

# North Carolina Office of Rural Health

## Placement Services Team

### Guidelines: High Needs Service Bonus (HNSB)

Revised: June 25, 2025

Placement Services Team  
2009 Mail Service Center  
Raleigh, North Carolina 27699-2009  
Office: 919-527-6440  
NC DHHS: Medical, Dental, and Psychiatric Recruitment Opportunities for Providers

The Office of Rural Health (ORH) offers qualifying providers, **without educational (student) loan debt**, incentive bonus payments through the **High Needs Service Bonus (HNSB) Incentive Program**. The payments are taxable. Incentive bonus payments are awarded to eligible providers in exchange for providing comprehensive primary care services in outpatient settings (or General Surgeons working at Critical Access Hospitals) at eligible sites serving those with the highest need located within Health Professional Shortage Areas (HPSAs). North Carolina areas with assigned HPSA scores can be reviewed at: <https://data.hrsa.gov/tools/shortage-area>. The higher the HPSA score, the higher the need.

Funding is limited and the awards will be based on a first-come, first-served basis for eligible and complete applications.

Applicants are strongly encouraged to review these guidelines carefully and gather necessary documentation so that when they begin their application, they will be prepared to complete the on-line application in its entirety.

The HNSB Incentive Program is state-funded and modeled after the federal program, National Health Service Corps Loan Repayment Program (NHSC LRP). The HNSB Incentive Program is administered by the ORH Placement Services Team. The team recruits medical, dental, and behavioral health providers in rural and underserved areas to provide outpatient primary care services. Recruitment activities include matching providers with open job opportunities and connecting them with internal or external incentive programs. Sites are encouraged to post open job opportunities with the Placement Services Team to match providers.

**BOTH PROVIDERS AND SITES MUST MEET ELIGIBILITY REQUIREMENTS. PLEASE READ THIS DOCUMENT IN ITS ENTIRETY. *Guidelines are subject to change at any time, at the discretion of ORH. Awards are contingent upon availability of funding, final departmental approval, and completion of the contract process.***

## Provider Eligibility Types, Awards and Commitments

Providers	Incentive Awards (Based on Full-Time Employment)	Service Commitments
<b>Primary Care Physician</b> <ul style="list-style-type: none"> <li>• Allopathic (MD)</li> <li>• Osteopathic (DO)</li> </ul> <p>Serving within the following specialties:</p> <ul style="list-style-type: none"> <li>• Family Medicine</li> <li>• General Internal Medicine</li> <li>• General Surgery - FOR CRITICAL ACCESS HOSPITALS ONLY</li> <li>• Obstetrics/Gynecology (OB/GYN)</li> <li>• General Pediatrics</li> <li>• Psychiatry</li> </ul>	Up to \$100,000	Up to 4 years
<b>Dentists</b>	Up to \$100,000	Up to 4 years
<b>Dental Hygienists</b>	Up to \$60,000	Up to 4 years
<b>Advanced Practice Providers</b> <ul style="list-style-type: none"> <li>• Nurse Practitioners</li> <li>• Physician Assistants</li> <li>• Certified Nurse Midwives</li> </ul> <p>Serving within the following specialties:</p> <ul style="list-style-type: none"> <li>• Family Medicine</li> <li>• General Internal Medicine</li> <li>• Obstetrics/Gynecology (OB/GYN)</li> <li>• General Pediatrics</li> <li>• Psychiatry</li> </ul>	Up to \$60,000	Up to 4 years
<ul style="list-style-type: none"> <li>• Pro-rated awards are given for part-time employment.</li> <li>• HNSB incentive payments are taxable.</li> </ul>		

## Section A: Provider Eligibility Requirements

All providers applying for HNSB must meet the following program requirements.

1. Start Date of Employment:

- The applicant’s employment start date must be within five (5) years of the application submission date or within five (5) years of completing a previous service commitment.
- Applications with employment start dates exceeding five (5) years will only be considered if the applicant has completed a prior service commitment and is applying within five (5) years of the end date of the satisfied service commitment.
- The start date cannot be in the future—the provider must be actively employed at the practice site at the time of application submission.

2. Medical License Requirement:

- Applicants must hold a full, unrestricted medical license. Training or provisional licenses are not eligible.

3. United States citizenship or permanent resident status

4. Accept Medicaid and Medicare (Children’s Health Insurance Program-if applicable)

**Note:** Providers who work at DHHS State Facilities or Free and Charitable Clinics are excluded from this requirement.

5. Service Commitment Requirement (If Applicable)

Applicants must not be currently fulfilling an existing service commitment. However, providers who have completed a service obligation may apply to the NC Loan Repayment Program (NC LRP) within five (5) years of completing that prior commitment.

*Employment contracts between providers and their practice sites are not considered service commitments for the purposes of NC LRP eligibility.*

Examples of qualifying service commitments (not an exhaustive list) include:

- Forgivable Education Loans for Service (FELS)
- National Health Service Corps (NHSC) Scholarship Program
- NHSC Student to Service (S2S) Program
- Community Practitioner Program (CPP)

Note: Providers with deferred service commitments are only eligible to apply to NC LRP after the deferred obligation has been fully satisfied.

6. **Employment Status**

**a. Full-Time Employment**

- Work at least 32 hours/week providing direct patient care at an eligible on-site clinical practice (Refer to Eligible Sites Section)
- Extended unpaid leave (i.e., Maternity, Paternity, Adoption Leave or severe/extended illness leave) must be reviewed and approved by ORH. ORH may extend contract terms based on the date the provider returns to work

**b. Part-Time Employment**

- Work between 20-31 hours/week providing direct patient care at an eligible on-site clinical practice (Refer to Eligible Sites Section)
- Pro-rated awards are given for part-time employment
- Extended leave: Same as full-time extended leave above

## Section B: Site Eligibility Requirements

All providers applying for HNSB must work at sites meeting ALL the requirements listed below:

1. The site's physical address is required to determine eligibility. Sites are defined as the ACTUAL work location of the provider (e.g., The address where the provider shows up to work every day to provide comprehensive primary care)
2. If providers work at multiple sites, all sites must meet the eligibility criteria.
3. Sites must accept Medicaid and Medicare/Accept Children's Health Insurance Program (if applicable)  
Note: Providers who work at DHHS State Facilities or Free and Charitable Clinics are excluded from this requirement.
4. Site(s) must provide comprehensive outpatient primary care services in eligible sites serving those with high needs. Comprehensive outpatient primary care is defined as preventive, acute and chronic primary health services that provide a continuum of care not focused or limited to gender identity, age, organ system, a particular illness, or categorical population (i.e., developmentally disabled or those with cancer). Sites that provide comprehensive primary care services via telehealth may be considered, when the patient and the provider are located at eligible sites.  
**Note:** Urgent care centers, emergency room departments, and immediate care facilities are not eligible. \* DHHS State Facilities and School Based Health Centers are excluded from this requirement.
5. For General Surgeons only, the site must be at a Critical Access Hospital.
6. Sites cannot use HNSB incentives to reduce a provider's salary.
7. Sites must be located within a Health Professional Shortage Area (HPSA) of **10 and above**. Areas with assigned HPSA scores can be found at: <https://data.hrsa.gov/tools/shortage-area>. The score must correspond with the discipline of the provider applying for HNSB. For example: A primary care physician must use the HPSA score for Primary Care within the county of the site location.  
  
**Note:** When in doubt, please reach out to the Placement Services Team for assistance. The HPSA score is verified by the Placement Services team during the application review process and is required on the incentive application.

**Eligible Site Types are listed on the next page**

## Section C: Eligible Site Types

**All providers applying for HNSB must ensure they work at one of the site types listed in the columns below.** There are two eligible site categories: Exempt and Non-Exempt.

**Exempt:** Exempt Sites were known in previous guidelines as “Sites with Automatic Eligibility.” Providers who work at any of the exempt sites are **not required** to submit additional site supplemental documentation with their application (i.e., Sliding Fee Scale, Site Data Table).

**\*Note:** Providers employed at health departments must provide documentation in the employment letter demonstrating that it offers comprehensive outpatient primary care services within the provider’s licensed scope of practice. Providers at State-Designated Rural Health Centers and CMS-Certified Rural Health clinics may be required to submit additional documentation to verify eligibility to ensure that the organization is accurately classified and meets the stated designation criteria. School-based clinics are in or near schools and are typically affiliated with FQHC or Look-Alike.

Exempt Sites	Non-Exempt Sites
	Providers working at non-exempt sites must submit additional site information with their application.
Critical Access Hospitals (CAHs) <ul style="list-style-type: none"> <li>• <b>Inpatient:</b> General Surgeons Only</li> <li>• <b>Outpatient providers</b> working in a Critical Access Hospital Provider Based Clinic (refer to the outpatient providers under the Eligible Provider List on Page 2)</li> </ul>	Private Practices – Primary Care Private Practices – Dental Private Practices – Behavioral Health
Federally Qualified Health Centers (FQHCs)	Telehealth sites providing comprehensive primary care services may be considered, when the patient and the provider are located at eligible sites
Free and Charitable Clinics	
*Health Departments (must provide full scope of primary care)	
National Health Service Corps Certified Sites (not otherwise listed)	
*State-Designated Rural Health Centers	
*CMS Certified Rural Health Clinics (RHCs)	
School-Based Health Centers/School Based Clinics	
Small Rural Hospital - <ul style="list-style-type: none"> <li>• <b>Outpatient providers</b> working in a Small Rural Hospital Provider Based Clinic (refer to the outpatient providers under the Eligible Provider List on Page 2)</li> </ul>	
NC DHHS State-Operated Healthcare Facilities <ul style="list-style-type: none"> <li>• Alcohol and Drug Abuse Treatment Centers (ADATCs)               <ul style="list-style-type: none"> <li>○ Julian F. Keith ADATC</li> <li>○ Walter B. Jones ADATC</li> </ul> </li> <li>• State Development Centers               <ul style="list-style-type: none"> <li>○ Caswell Developmental Center</li> <li>○ J. Iverson Riddle Developmental Center</li> <li>○ Murdoch Developmental Center</li> </ul> </li> <li>• Neuro-Medical Treatment Centers               <ul style="list-style-type: none"> <li>○ Black Mountain NTC</li> <li>○ O'Berry NTC</li> <li>○ Longleaf NTC</li> </ul> </li> <li>• State Psychiatric Hospitals               <ul style="list-style-type: none"> <li>○ Broughton Hospital</li> <li>○ Central Regional Hospital</li> <li>○ Cherry Hospital</li> </ul> </li> <li>• Residential Programs for Children               <ul style="list-style-type: none"> <li>○ Whitaker Psychiatric Residential Treatment Facility</li> <li>○ Wright School</li> </ul> </li> </ul>	

## Section D: Application Process

- Eligible providers should review the entire HNSB guidelines to ensure they meet the provider and site eligibility criteria. This is important so providers can be prepared to upload the required information and documentation during the electronic application process.
- Only electronic applications will be accepted. Paper applications will not be accepted or reviewed. The provider applying must electronically sign the HNSB application.
- The on-line application requires that applicants attest that the information submitted on the application is true, accurate and complete.
- ORH reserves the right to request additional documentation not listed on the electronic application to determine eligibility.

**How To Apply:** There is a two-step application process.

### **Application Link:**

To apply, applicants will complete the following two steps:

- The application process starts with applicants completing an eligibility screening questionnaire. Based on the responses to the eligibility screening questions, providers will be emailed an individual link that will provide access to the on-line HNSB application. ***If there are problems with the application link, please contact Lisa McKeithan, Placement Services Manager at [lisa.mckeithan@dhhs.nc.gov](mailto:lisa.mckeithan@dhhs.nc.gov) and/or at 919-527-6481.***
- Providers must submit an on-line HNSB application and upload all required documentation using the HNSB application link to be considered for an award.

**Processing Applications:** An automatic email confirming receipt of the application will be sent to the applicant.

**Award Notification:** Applicants will receive an email notification of their applicant status within 20 business days of the application submission date. Awards are contingent upon availability of funding, final departmental approval, and completion of the contract process.

## Section E: Requested Documentation - All Providers

The information below must be submitted using the electronic application process. *Applicants are strongly encouraged to review the required application documentation carefully and gather necessary documentation before starting the application.*

Applicants will **enter basic information** in the on-line application portal including but not limited to: Full Name, Personal Email Address, Work Email Address, Mailing Address, Degree, Discipline, NPI Number, License Number, Whether Provider is Enrolled in the Medicaid Program, Personal Phone Number, Work Phone Number, the Provider's Direct Supervisor's Name, Phone Number and Email address.

Applicants will Upload: **A signed statement** from **the provider's employer** on **company letterhead** documenting:

- Start date of employment/first day on the job
- Site name
- Site address: If the provider is working at multiple sites, the letter must document the address of each site.
- Total hours worked per week by the provider
- Total hours devoted to direct patient care per week by the provider (Administrative time, charting, and/or on call time does not count towards direct patient care hours.)
- Direct supervisor's name, phone number and email

If the letter does not include all the items listed above, the application will be deemed incomplete.

Applicants will upload: If applicable, Previous Service Commitment: **A signed statement** from the **provider** documenting details about the previous service commitment. The letter must include the service commitment type (i.e. National Health Service Corp, NC Loan Repayment Program, Medical Society Community Practitioner Program) and the start and completion date of the service commitment.

Applicants must be prepared to enter the Health Professional Service Area (**HPSA**) **score** on the electronic application. Sites must be located within the HPSA. Areas with assigned HPSA scores, which can be found at: <https://data.hrsa.gov/tools/shortage-area>. The score must correspond with the discipline of the provider applying for HNSB. For example: A primary care physician must use the HPSA scores for Primary Care within the county of the site location. The HPSA score will be verified by ORH.

## Section F: Requested Documentation - Exempt vs Non-Exempt

The information below will be required to complete the electronic application process.

Exempt Sites	Non-Exempt Sites
<p>Providers who work at any of the exempt sites are <b>not required</b> to submit additional site supplemental documentation with their application.</p>	<ol style="list-style-type: none"> <li>1. Sliding Fee Scale (SFS) and Policy                             <ul style="list-style-type: none"> <li>• SFS must be based on current poverty guidelines up to 200% of Federal Poverty Level: <a href="https://aspe.hhs.gov/poverty-guidelines">https://aspe.hhs.gov/poverty-guidelines</a></li> <li>• SFS must include a notice for the patient that documents services will not be denied because of inability to pay. It must include details on how to apply for the SFS. In addition, the SFS must be supported by the site’s written operating procedures and/or policies, based on the current Federal Poverty Level, and applied uniformly to all patients.</li> </ul> </li> <li>2. A <b>signed statement</b> from <b>provider’s employer</b> on <b>company letterhead</b> documenting that the site accepts Medicare and Medicaid. In addition, include if the site accepts Children’s Health Insurance Program (if applicable).</li> <li>3. Copy or picture of posted signage stating that the site will not deny services for any reason-including race, color, sex, national origin, disability, religion, age*, sexual orientation or gender identity. *Age is not an applicable discriminatory factor on pediatric, geriatric, or obstetrics/gynecology sites.</li> <li>4. Site Data Table (requires six months of data) from the provider’s exact site/work location.                             <ul style="list-style-type: none"> <li>• Sites will report data on the number of patients served and the number of patient visits. Sites will report data on patient applications for sliding fee schedule. See <i>Site Data Table Template</i> for reference.</li> </ul> </li> </ol>

## Section G: Site Data Table Template

(Requires 6 months of data)

<b>Data Period (From Month/Year):</b>		<b>Data Period (To Month/Year):</b>	
<b>Primary Insurance</b>	<b>Complete data for "Number of Patients" OR "Number of Patient Visits"</b>		
Medicare			
Medicaid			
Other Public Insurance			
Private Insurance			
Sliding Fee Schedule (SFS)			
Self-Pay (No Insurance and not on SFS)			
<b>TOTAL</b>			
<b>Patient Applications for Sliding Fee Schedule (SFS)</b>			
	<b>Number of Applications</b>		
<b>SFS Applications Approved</b>			
<b>SFS Applications Not Approved</b>			
<b>Total Applications Received</b>			

## Section H: Contracts and Incentive Payments

A provider's signature on the electronic HNSB application does not constitute a contractual agreement.

Contracting Process:

1. Providers will receive an email stating their application has been approved.
2. Once the contract has been approved by NC DHHS, the providers will receive the contract by email.
3. The contract requires an electronic signature attesting that the accuracy of the information and acceptance of the contractual terms.
4. The contract must be signed by both the provider and Director of the Office of Rural Health to be considered executed.

All contracts are subject to the availability of funds.

Physician responsibilities under the contract:

- Providers must submit required reports and surveys as requested by ORH while under contract including the Statement of Service (SOS) forms attesting that they are still in practice at the approved site.
- Providers should inform ORH immediately if they have any changes in personal information (i.e., name changes, address changes, contact numbers), work location, work hours or work assignments while under contract. Any major changes may require a contract amendment and delay incentive payments. If providers do not inform ORH, they may be in breach of contract resulting in possible immediate termination of contract.

## Section I: Award Renewal Extension

Providers in good standing, meaning they have fulfilled their previous HNSB contractual obligation, are eligible to do **ONE** of the following:

1. Reapply for **ONE ADDITIONAL** HNSB award for a **MAXIMUM OF TWO AWARDS** if they can provide documentation.

Award Renewal Extensions are contingent upon funding availability, and the current guidelines at the time of reapplying. Approval amounts will be determined by ORH.

## Section J: Placement Services Team Contact List

Program Manager: [Lisa.McKeithan@dhhs.nc.gov](mailto:Lisa.McKeithan@dhhs.nc.gov)

Recruiters are assigned by Medicaid Regions across the State.

Recruiter	Counties Served			
Lisa McKeithan <a href="mailto:Lisa.McKeithan@dhhs.nc.gov">Lisa.McKeithan@dhhs.nc.gov</a>  Medicaid Region #1	Cherokee	Clay	Graham	Haywood
	Henderson	Jackson	Macon	Madison
	McDowell	Mitchell	Polk	Rutherford
	Swain	Transylvania	Yancey	
Lisa McKeithan <a href="mailto:Lisa.McKeithan@dhhs.nc.gov">Lisa.McKeithan@dhhs.nc.gov</a>  Medicaid Region #2	Alleghany	Ashe	Davidson	Davie
	Forsyth	Guilford	Randolph	Rockingham
	Stokes	Surry	Watauga	Wilkes
	Yadkin			
Rachel Lane <a href="mailto:Rachel.Lane@dhhs.nc.gov">Rachel.Lane@dhhs.nc.gov</a>  Medicaid Region #3	Alexander	Anson	Cabarrus	Catawba
	Cleveland	Gaston	Iredell	Lincoln
	Mecklenburg	Rowan	Stanly	Union
Alma Davis <a href="mailto:Alma.Davis@dhhs.nc.gov">Alma.Davis@dhhs.nc.gov</a>  Medicaid Region #4	Alamance	Caswell	Chatham	Durham
	Franklin	Granville	Johnston	Nash
	Orange	Person	Vance	Wake
	Warren	Wilson		

<p>Maya Sanders  <a href="mailto:Maya.Sanders@dhhs.nc.gov">Maya.Sanders@dhhs.nc.gov</a></p> <p>Medicaid Region #5</p>	Bladen	Brunswick	Columbus	Cumberland
	Harnett	Hoke	Lee	Montgomery
	Moore	New Hanover	Pender	Richmond
	Robeson	Sampson	Scotland	
<p>Karen Gliarmis  <a href="mailto:karen.gliarmis@dhhs.nc.gov">karen.gliarmis@dhhs.nc.gov</a></p> <p>Medicaid Region #6</p>	Beaufort	Bertie	Camden	Carteret
	Chowan	Craven	Currituck	Dare
	Duplin	Edgecombe	Gates	Greene
	Halifax	Hertford	Hyde	Jones
	Lenoir	Martin	Northampton	Onslow
	Pamlico	Pasquotank	Perquimans	Pitt
	Tyrrell	Washington	Wayne	