DEPARTMENT OF THE NAVY
BUREAU OF MEDICINE AND SURGERY
7700 ARLINGTON BOULEVARD
FALLS CHURCH, VA 22042

Canc: Nov 2014
IN REPLY REFER TO
BUMEDNOTE 1110
NAVMED PDC
23 DEC 2013

BUMED NOTICE 1110

From: Chief, Bureau of Medicine and Surgery

Subj: FISCAL YEAR 2014 GUIDANCE ON USE OF HEALTH PROFESSIONS LOAN REPAYMENT PROGRAM FOR RETENTION OF NURSE CORPS OFFICERS

Ref: (a) Title 10 U. S. Code, Section 2173
(b) ASD(HA) Policy Memo 08-006 of 8 Apr 2008
(c) OPNAVINST 1110.1A
(d) ASD(HA) Policy Memo 08-008 of 29 Jul 2008
(e) BUMED-M1 Memo 1110 Ser M1/13UM10044 of 1 Apr 2013

Encl: (1) Sample Request for Health Professions Loan Repayment Program for Retention
(2) Sample First Endorsement of Health Professions Loan Repayment Program For Retention

1. Purpose. To announce the availability of loan repayments under the Health Professions Loan Repayment Program (HPLRP) to qualified health professionals currently on active duty for Fiscal Year 2014 (subject to availability of funding), and to provide information concerning eligibility and application procedures.

2. Cancellation. BUMEDNOTE 1110 of 23 Nov 2012.

3. Scope. Applies to active duty Navy officers in the Nurse Corps.

4. Background. The HPLRP is an accession and retention incentive program within the Armed Forces Health Professions Financial Assistance Programs. The HPLRP is a means to assist eligible personnel in the repayment of qualified loans in exchange for an obligated period of active duty. Reference (a) established the HPLRP and designated responsibility for the program to the Secretaries of the various military departments. Reference (b) established Department of Defense (DoD) policy and guidance for the HPLRP. Per reference (c), the Chief, Bureau of Medicine and Surgery (BUMED), designated the Deputy Chief, Total Force, BUMED, the program manager for the HPLRP. Reference (d) delineated the current maximum annual repayment amount for qualified loans.

5. Definitions

a. Active Duty Health Professional. Any regular active duty Navy officer in the Nurse Corps.

b. Qualified Loans. Government or commercial loans for the actual costs paid for tuition, reasonable educational expenses, and reasonable living expenses relating to the attainment of a Baccalaureate of Science in Nursing.

6. Eligibility Requirements for Fiscal Year 2014 Active Duty HPLRP Applicants

a. Must be a commissioned officer on active duty in the Nurse Corps. Must not be a member of a Reserve Component on extended active duty or mobilized to perform active duty.

b. Must have completed initial active duty obligation as a commissioned officer by 30 September 2014.

c. Must hold an unrestricted license, if required to perform duties in the Navy.

d. Must have 3 years of commissioned service but less than 12 years of total active duty service (enlisted and officer service combined) by 30 September 2014. Nurse Corps officers currently in a Full-time Duty Under Instruction (DUINS) status or under a DUINS obligation can apply for HPLRP but the service obligation for each will be served consecutively.

e. Questions should be directed to the designated Corps point of contact (POC) noted in paragraph 11.

f. Additional requirements:

(1) Must sign an agreement to incur an Active Duty Obligation (ADO) in exchange for loan repayment.

(2) Must meet all height/weight and physical readiness requirements.

(3) Must have a qualifying debt.

7. Ineligibility Factors for HPLRP Applicants

a. Must not be a student or graduate of the Uniformed Services University of the Health Sciences (USUHS).

b. Must not be subject to a court judgment/lien against personal property arising from a civil or criminal proceeding in which there is debt owed to the United States (to include Federal student loans).

c. Must not be in default or delinquent on loans for which requesting repayment, or have any other Federal debt.

d. Must not be in a "non-select" promotion status.

e. Must not have a punitive discharge or any other adverse personnel or administrative action pending or in effect.

f. Must not have received HPLRP previously, either upon recruitment or for retention, or currently receiving Registered Nurse Incentive Specialty Pay (RN-ISP). If selected to receive HPLRP, the officer cannot apply for RN-ISP until the completion of the HPLRP obligated service.

8. HPLRP Award Amount. The Assistant Secretary of Defense for Health Affairs sets the maximum annual award amount of loan repayment, currently established at $40,000. Funds used in the HPLRP are taxable income and approximately 25 percent federal income tax will be deducted prior to disbursement of funds to each lending institution.

9. Awards. Nurse Corps will distribute 12 (1 year contract) quotas, at a maximum of $40,000.

10. ADO. Participants in the HPLRP shall incur an ADO consisting of 2 years for the 1 year benefit. The ADO for HPLRP shall be served in addition to (consecutive with) any education/ training ADO. No portion of the ADO for HPLRP shall be fulfilled by prior active service. In addition, the member may not be relieved of his or her ADO solely because of willingness and ability to refund all payments made by the Government, pursuant to Title 10, U.S.C.

11. Application Procedures

a. A notice of intent to apply for HPLRP shall be submitted to the designated POC in the Nurse Corps by 15 February 2014. Intent should be submitted by e-mail and include the following information: Rank, Last Name, First Name, Middle Initial (MI), Specialty/Code, telephone number, estimated total health professions loan balance, and degree attained with the loan for which repayment is being sought. Notices of intent will not be accepted after the deadline and applications will not be accepted without a notice of intent. The designated Nurse Corps POC is: CDR Valerie Morrison, e-mail: Valerie.Morrison@med.navy.mil, or call (703) 681-8922 or DSN 761-8922.

b. Applications for HPLRP, sample in enclosure (1), must be submitted via e-mail to the designated Nurse Corps POC as noted in paragraph 11. All applications and supporting documentation must be received by 1 March 2014. Applications received after this date will not be considered. Due to network system constraints, attachments must not be larger than 5MB per e-mail. Each application must contain the following:

(1) Name, rank, corps, last four digits of the SSN, business address, work/home/cell telephone numbers, facsimile (FAX) number, and work and/or home e-mail address.

(2) Complete loan information with supporting documentation (e.g., copy of original loan document(s), current monthly statement(s), or printout(s) from lender web site) that contains lender contact information, account number, balance, and non-delinquent status of each loan for which repayment is requested. If educational loans were consolidated, all documents related to the consolidation must be included. The applicant is responsible for providing a clear paper trail of the educational loans in the consolidation. The BUMED-M131 HPLRP Program Manager reserves the right to disqualify a recipient on the basis of an incomprehensible loan. The applicant must state the total loan obligation for the health professions degree, the current loan balance for which repayment is sought, and the number of years of HPLRP benefit desired.

(3) Current active duty status, years of commissioned service, years of active service, and accession program.

(4) The following certification statement: "I certify that I have not incurred any prior or current active duty obligation as a result of being a student or graduate from the USUHS."

(5) Copy of licensure and board certification/eligibility documents, if applicable to the applicant's specialty.

(6) A brief motivational statement regarding the applicant's desire for continued military service, no longer than one page, double-spaced.

(7) Copy of Physical Readiness Information Management System (PRIMS) Member Report Physical Fitness Assessment (PFA) listing. (Summary of all physical readiness test (PRT's) taken.)

(8) Copy of Officer Summary Record.

(9) Copy of Performance Summary Record.

(10) Copies of fitness reports covering the last 5 years or all fitness reports since commissioning, if less than 5 years.

(11) Commanding officer's endorsement, sample in enclosure (2), to include verification that no punitive or other adverse personnel or administrative action is pending or in effect and that the applicant meets height/weight and physical readiness requirements.

12. Application Review Process and Selection Notification

a. An Administrative Selection Board (ASB) will convene in April 2014 to review all completed applications and provide selection recommendations to Chief, BUMED. Chief, BUMED will provide final approval of individuals for participation in the HPLRP.

b. As it is likely there will be many more requests for enrollment in the HPLRP than available participation openings, the selection process will be very competitive. The ASB will be governed by a precept approved by Chief, BUMED. The following criteria, while not encompassing all details of the precept, will be considered by the ASB in making approval recommendations:

(1) Potential for future naval service and leadership.

(2) Individual assignments, including operational assignments (past and future).

(3) Individual accomplishments and awards.

c. Individuals will be notified of their selection for enrollment in the HPLRP by May 2014. Selected individuals will receive a contract for the HPLRP from BUMED-M131 delineating the obligations of all parties by 2 June 2014. The original signed contract must be returned to the Navy Medicine Accessions Program Manager (ATTN: HPLRP), U.S. Navy Bureau of Medicine and Surgery Detachment Bethesda, 8901 Wisconsin Avenue, Bethesda, MD 20889-5611, by close of business 23 June 2014. BUMED-M131 will coordinate loan repayments with the appropriate lending institution(s) for those officers signing HPLRP contracts.

d. For questions concerning application procedures and/or eligibility requirements, contact the designated Nurse Corps POC noted in paragraph 11.

13. Records. Records created as a result of this instruction, regardless of media and format, shall be managed per SECNAV M-5210.1 of January 2012.

M. L. NATHAN

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SAMPLE REQUEST FOR HEALTH PROFESSIONS LOAN REPAYMENT PROGRAM FOR RETENTION
(To be submitted via e-mail)

Date:

From: Rank, First Name, MI, Last Name, USN, Designator
To: Fiscal Year 2014 Nurse Corps Health Professions Loan Repayment Selection Board, 7700 Arlington Boulevard, Suite 5135, Falls Church, VA 22042
Via: Commanding Officer

Subj: REQUEST FOR PARTICIPATION IN THE FISCAL YEAR 2014 HEALTH PROFESSIONS LOAN REPAYMENT PROGRAM (HPLRP)

Ref: (a) BUMEDNOTE 1110 of _____

Encl: (1) Personal motivational statement
(2) Loan information (e.g., lender monthly statement for each loan)
(3) Copy of licensure and board certification documents
(4) Copy of Officer Summary Record
(5) Copy of Performance Summary Record
(6) Copies of last 5 years of Fitness Reports, or all, if less than 5 years of service
(7) Copy of PRIMS member Report PFA listing

1. I respectfully request participation in the HPLRP. Request consideration for up to (fill in) years of benefit to repay current outstanding loans totaling $ (fill in). I attained a _____ degree with the loan for which I am requesting repayment.

2. I am regular active duty, not a member of the Reserve Component on extended active duty or mobilized to perform active duty. As of 30 September 2014, I will have completed (fill in) years of commissioned service and (fill in) years of total active service. I was commissioned via (fill in program, examples include Direct Accession, the Medical Enlisted Commissioning Program, the Nurse Candidate Program, etc., along with the number of years in that program), with a current specialty of (fill in specialty/code).

3. I certify that I have not incurred any prior or current active duty obligation as a result of being a student or graduate of the Uniformed Services University of the Health Sciences.

4. Per reference (a), enclosures (1) through (7) are submitted.

5. I understand that I must sign and return the original HPLRP contract if approved for participation in the HPLRP. I also understand that HPLRP funds are taxable income and income tax withholding will be deducted prior to disbursement of funds to each lending institution. I further understand that failure to satisfy all Department of Defense and Service

Subj: REQUEST FOR PARTICIPATION IN THE FISCAL YEAR 2014 HEALTH PROFESSIONS LOAN REPAYMENT PROGRAM (HPLRP)

specific HPLRP requirements, to include provision of necessary loan documentation, could result in forfeiture of any loan repayments that may be awarded. I can be reached at DSN (number); commercial (number); FAX (number), e-mail (address), and my command mailing address is (fill in address).

(Signature Block)

SAMPLE FIRST ENDORSEMENT OF HEALTH PROFESSIONS LOAN REPAYMENT PROGRAM FOR RETENTION

1110
Ser 00/
Date

FIRST ENDORSEMENT on (rank, name, USN) ltr of (date)

From: Commanding Officer,
To: Fiscal Year 2014 Nurse Corps Health Professions Loan Repayment Program Selection Board, 7700 Arlington Boulevard, Suite 5135, Falls Church, VA 22042

Subj: REQUEST FOR PARTICIPATION IN THE FISCAL YEAR 2014 HEALTH PROFESSIONS LOAN REPAYMENT PROGRAM (HPLRP)

1. Forwarded recommending approval.

2. I verify that no punitive or other adverse personnel or administrative action is pending or in effect and that (name of applicant) meets height/weight and physical readiness requirements.

3. Additional comments.

(Signature Block)

Copy to:
(Individual)