



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

Canc: Dec 2015
IN REPLY REFER TO
BUMEDNOTE 1110
NAVMED PDC
20 Jan 2015

BUMED NOTICE 1110

From: Chief, Bureau of Medicine and Surgery

Subj: FISCAL YEAR 2015 GUIDANCE ON USE OF HEALTH PROFESSIONS LOAN
REPAYMENT PROGRAM FOR RETENTION OF NURSE CORPS OFFICERS

Ref: (a) 10 U.S.C. 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 Memo 1110/Ser 14UM10108 of 14 Oct 2014

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 2015 (subject to availability of funding), and to provide information concerning eligibility and application procedures.

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

3. 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 policy and guidance for the HPLRP. Per reference (c), the Surgeon General/Chief, Bureau of Medicine and Surgery (BUMED) (hereinafter Chief, BUMED), designated the Deputy Chief, Total Force (BUMED-M1), the program manager for the HPLRP. Reference (d) delineated the current maximum annual repayment amount for qualified loans.

4. 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.

5. Eligibility Requirements for Fiscal Year 2015 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 2015.
- 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 2015. 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 10.
- 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.

6. 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, disciplinary, 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.

7. HPLRP Award Amount. The Assistant Secretary of Defense for Health Affairs (ASD(HA)) 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.

8. Awards. Nurse Corps will award eight 1-year contracts, worth up to a maximum of \$40,000 each.

9. Active Duty Obligation (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 educational/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.

10. Application Procedures

a. A notice of intent to apply for HPLRP shall be submitted to the designated POC in the Nurse Corps by 20 February 2015. 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. The designated Nurse Corps POC is: CAPT Valerie Morrison, Valerie.A.Morrison4.mil@mail.mil, (703) 681-8922.

b. Applications for HPLRP must be submitted via e-mail to the designated Nurse Corps POC as noted in paragraph 10. A sample application request is contained in enclosure (1). All applications and supporting documentation must be received by 12 March 2015. 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, business address, work, home, and 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 and the current loan balance for which repayment is sought.

(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 PRTs 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.

11. Application Review Process and Selection Notification

a. An Administrative Selection Board (ASB) will convene in April 2015, 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 awards, 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 2015. Selected individuals will receive a contract for the HPLRP from BUMED-M131 delineating the obligations of all parties by 5 June 2015. The original signed contract must be returned to the Navy Medicine (NAVMED) Accessions Program Manager (ATTN: HPLRP), Bureau of Medicine and

Surgery Detachment Bethesda, 8901 Wisconsin Avenue, Bethesda, MD 20889-5611, by close of business 26 June 2015. 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 10.

12. Records Management. Records created as a result of this notice or instruction, regardless of media and format, shall be managed per SECNAV Manual 5210.1 of January 2012.



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BUMEDNOTE 1110
20 Jan 2015

**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
To: FY15 Nurse Corps Health Professions Loan Repayment Selection Board, 7700 Arlington
Boulevard, Falls Church, VA 22042
Via: Commanding Officer

Subj: REQUEST FOR PARTICIPATION IN THE FISCAL YEAR 2015 HEALTH
PROFESSIONS LOAN REPAYMENT PROGRAM (HPLRP)

Ref: (a) BUMEDNOTE 1110 of 20 Jan 2015

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 a one year contract 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 2015, 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 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)

Enclosure (1)

BUMEDNOTE 1110
20 Jan 2015

**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 2015 Nurse Corps Health Professions Loan Repayment Program Selection Board, 7700 Arlington Boulevard, Falls Church, VA 22042

Subj: REQUEST FOR PARTICIPATION IN THE FISCAL YEAR 2015 HEALTH PROFESSIONS LOAN REPAYMENT PROGRAM (HPLRP)

1. Forwarded recommending approval.
2. Per reference (a), 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)