



DEPARTMENT OF THE NAVY
BUREAU OF MEDICINE AND SURGERY
2300 E STREET NW
WASHINGTON DC 20372-5300

Canc: Oct 2012
IN REPLY REFER TO
BUMEDNOTE 1110
NAVMED PDC
24 Jan 2012

BUMED NOTICE 1110

From: Chief, Bureau of Medicine and Surgery

Subj: FISCAL YEAR 2012 GUIDANCE ON USE OF HEALTH PROFESSIONS LOAN
REPAYMENT PROGRAM FOR RETENTION

Ref: (a) 10 U.S.C. Section 2173
(b) ASD(HA) Policy Memo 02-013 of 14 Jan 2002
(c) OPNAVINST 1110.1A
(d) ASD(HA) Policy Memo 08-008 of 29 Jul 2008
(e) ASD(HA) Policy Memo 08-006 of 8 Apr 2008

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 2012 (subject to availability of funding), and to provide information concerning eligibility and application procedures.

2. Cancellation. BUMEDNOTE 1110 of 24 Nov 2010 and BUMED-M1 ltr 1110 Ser M1/11UM1247 of 29 Nov 2011.

3. Scope. Applies to all Medical Department personnel.

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 policy and guidance for the HPLRP. Per reference (c), the Surgeon General/Chief, Bureau of Medicine and Surgery (BUMED) (hereinafter referred to as Chief, BUMED), designated the Commanding Officer, Navy Medicine Professional Development Center (NAVMED PDC) (previously known as Navy Medicine Manpower Personnel Training and Education (NAVMED MPT&E) Command) 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 Medical Corps, Dental Corps, Medical Service Corps, or 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 degree in allopathic or osteopathic medicine, dentistry, Baccalaureate of Science in Nursing, and other health care professions as requested by the Medical Service Corps.

6. Eligibility Requirements for Fiscal Year 2012 Active Duty HPLRP Applicants

a. Must be a commissioned officer on active duty in the Nurse Corps, Dental Corps, or Medical Service Corps. Must not be a member of a Reserve Component on extended active duty or mobilized to perform active duty. The Medical Corps uses other incentive programs for accession and retention.

b. Must have completed initial active duty obligation (ADO) as a commissioned officer by 30 September 2012.

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

d. Must have less than 12 years of commissioned service as of 30 September 2012 (time as a Warrant Officer counts toward the 12 years) and/or must meet additional Corps requirements as specified:

(1) Dental Corps. Officers currently in a Duty Under Instruction (DUINS) status or under a DUINS obligation may apply for HPLRP, but the service obligation for both will be served consecutively.

(2) Medical Service Corps. Officers must have less than 12 years of total active duty service (officer and enlisted service combined) by 30 September 2012.

(3) Nurse Corps. Officers are eligible with 3 years of commissioned service but less than 12 years of total active duty service (officer and enlisted service combined) by 30 September 2012. Nurse Corps officers currently in a DUINS status or under a DUINS obligation can apply for HPLRP but the service obligation for both will be served consecutively.

e. Questions regarding supplemental guidance issues should be directed to the designated Corps point of contact (POC) noted in paragraph 12. Application Procedures:

(1) Must sign an agreement to incur an 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. Additional Corps ineligibilities as specified:

(1) Dental Corps. Officers who have received a 4-year Health Professions Scholarship (HPSP) are ineligible to receive the HPLRP.

(2) Medical Service Corps. Officers who have received a 4-year HPSP are ineligible to receive the HPLRP.

(3) Nurse Corps. Officers are ineligible if they have received HPLRP previously, either upon recruitment or for retention, or if 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 (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.*

9. Awards by Corps. Per reference (e), the maximum number of years of benefit that may be requested is determined by dividing the total value of qualified loans by the annual benefit and rounding up to the nearest whole number of years. However, the amount and number of years of benefit that will be offered to applicants is determined by each Corps.

a. Dental Corps will distribute 6 (3-year) quotas at a maximum of \$40,000 per year for General Dentists.

b. Medical Service Corps will distribute 13 quotas, at a maximum of \$40,000 per year in the following specialties:

- (1) Clinical Psychology
- (2) Entomology
- (3) Microbiology
- (4) Pharmacy
- (5) Physical Therapy
- (6) Physician Assistant
- (7) Podiatrist
- (8) Radiation Health
- (9) Social Worker

c. Nurse Corps will distribute 21 quotas, at a maximum of \$28,000 each.

10. Active Duty Obligation (ADO). Participants in the HPLRP shall incur an ADO consisting of a minimum of 2 years, or 1 year of ADO for each annual repayment, whichever is greater. The ADO for HPLRP shall be served in addition to (consecutive with) any education/ training ADO, special pay ADO, or medical/dental officer multi-year retention bonus 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. HPLRP Distribution within the Medical Department Officer Corps. On a yearly basis, the Medical Department Corps Chiefs/Directors will determine the number of new loan repayments to be awarded based on available program funding and the specialties from which applications will be accepted. Officers who previously signed multi-year loan repayment contracts will not be affected by this process.

12. Application Procedures

a. A notice of intent to apply for HPLRP shall be submitted to the designated POC in the respective Corps by 15 February 2012. 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. Designated Corps POCs can be contacted at: Dental Corps, commercial (202) 762-3825, DSN 762-3825, or Medical Service Corps, commercial (202) 762-3406, DSN 762-3406, or Nurse Corps, commercial (202) 762-3415, DSN 762-3415.

b. Applications for HPLRP, sample in enclosure (1), must be submitted via e-mail to the designated Corps POC as noted in paragraph 12a. To protect personal information, all except the last four digits of the social security number (SSN) should be masked on application documents. All applications and supporting documents must be received by 1 March 2012. 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 NAVMED PDC 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.

(8) Copy of Officer Summary Record.

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(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.

13. Application Review Process and Selection Notification

a. An Administrative Selection Board (ASB) will convene in April 2012 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. The respective Corps Chiefs/Directors will notify individuals of their selection for enrollment in the HPLRP by 18 May 2012. Selected individuals will receive a contract for the HPLRP from NAVMED PDC delineating the obligations of all parties by 1 June 2012. The original signed contract must be returned to the Commanding Officer, Navy Medicine Professional Development Center (Code O1S), 8901 Wisconsin Avenue, Bethesda, MD 20889-5611, by close of business 22 June 2012. NAVMED PDC 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 designated Corps POC noted in paragraph 12a.



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, XXXX (Last 4 digits of SSN)/Designator
To: Commanding Officer, Navy Medicine Professional Development Center (Code 01S)
8901 Wisconsin Avenue, Bethesda, MD 20889-5611
Via: (Commanding Officer)

Subj: REQUEST FOR PARTICIPATION IN THE FISCAL YEAR 2012 HEALTH
PROFESSIONS LOAN REPAYMENT PROGRAM

Ref: (a) BUMEDNOTE 1110 of 24 Jan 2012

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 Health Professions Loan Repayment Program (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 2012, 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 In-Service Procurement Program, the Medical Enlisted Commissioning Program, the Health Professions Scholarship 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.

Enclosure (1)

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 commercial (number), DSN (number), FAX (number), e-mail (address), and my command mailing address is (fill in address).

(Signature Block)

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**SAMPLE FIRST ENDORSEMENT OF HEALTH PROFESSIONS
LOAN REPAYMENT PROGRAM FOR RETENTION**

1110
Ser 00/
Date

FIRST ENDORSEMENT on (rank, name, USN, last 4 digits of SSN/Designator) ltr of (date)

From: Commanding Officer

To: Commanding Officer, Navy Medicine Professional Development Center (Code O1S),
8901 Wisconsin Avenue, Bethesda, MD 20889-5611

Subj: REQUEST FOR PARTICIPATION IN THE FISCAL YEAR 2012 HEALTH
PROFESSIONS LOAN REPAYMENT PROGRAM

Ref: (a) BUMEDNOTE 1110 of 24 Jan 2012

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)

Enclosure (2)