
ILLINOIS REGISTER

DEPARTMENT OF PUBLIC HEALTH

NOTICE OF ADOPTED AMENDMENTS

- 1) Heading of the Part: Family Practice Residency Code
- 2) Code Citation: 77 Ill. Adm. Code 590
- 3)

<u>Section Numbers:</u>	<u>Adopted Action:</u>
590.10	Repeal
590.20	Amendment
590.30	Amendment
590.40	Amendment
590.60	New
590.100	Amendment
590.120	Amendment
590.130	Amendment
590.140	Amendment
590.150	New
590.160	New
590.170	New
590.200	Amendment
590.210	Amendment
590.220	Amendment
590.230	Amendment
590.240	Amendment
590.300	Amendment
590.310	Amendment
590.320	Amendment
590.330	Amendment
590.400	Amendment
590.410	Amendment
590.420	Amendment
590.APPENDIX A	Repeal
590.APPENDIX B	Repeal
590.APPENDIX C	Repeal
590.APPENDIX D	Repeal
- 4) Statutory Authority: Family Practice Residency Act [110 ILCS 935]
- 5) Effective Date of Rulemaking:
- 6) Does this rulemaking contain an automatic repeal date? No

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- 7) Does this rulemaking contain incorporations by reference? No
- 8) A copy of the adopted amendments, including any material incorporated by reference, is on file in the agency's principal office and is available for public inspection.
- 9) Notice of Proposed Amendments Published in Illinois Register: April 22, 2011; 35 Ill Reg. 6802
- 10) Has JCAR issued a Statement of Objections to these rules? No
- 11) Difference(s) between proposal and final version:

No comments were received during the first notice or public comment period.

The following changes were made in response to comments and suggestions of JCAR:

In Section 590.420(a), after “of” add “the”. Also, after “Scholarships” add “authorized in Subpart C”.

In addition, various typographical, grammatical, and form changes were made in response to the comments from JCAR.

- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR? Yes
- 13) Will this rulemaking replace an emergency rule currently in effect? No
- 14) Are there any amendments pending on this Part? No
- 15) Summary and Purpose of Rulemaking:

The amendments clarify scholarship repayment terms; requires repayment from those recipients who fail medical school, withdraw from medical school or graduate from medical school but fail to obtain a medical license; and expands practice opportunities with underserved populations. The rulemaking also incorporates requirements of the Illinois Grant Funds Recovery Act as it pertains to grants issued to family practice residency programs. Also, the proposal incorporates certification requirements for grantees from Public Act 96-1064. The rulemaking removes the Department’s obligation

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to annually provide paper copies of a list of designated shortage areas in the State by providing Internet access to listings of designated shortage areas and populations.

- 16) Information and questions regarding these adopted amendments shall be directed to:

Susan Meister
Division of Legal Services
Department of Public Health
535 West Jefferson, 5th Floor
Springfield, Illinois 62761
e-mail: dph.rules@illinois.gov

The full text of the adopted amendments begins on the next page:

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TITLE 77: PUBLIC HEALTH

CHAPTER I: DEPARTMENT OF PUBLIC HEALTH

SUBCHAPTER g: GRANTS TO DENTAL AND MEDICAL STUDENTS

PART 590

FAMILY PRACTICE RESIDENCY CODE

SUBPART A: GENERAL PROVISIONS

Section

590.10	Applicability (Repealed)
590.20	Definitions
590.30	Incorporated <u>and Referenced</u> Materials
590.40	Administrative Hearings
590.60	Advisory Committee for Family Practice Residency Programs

SUBPART B: GRANTS TO FAMILY PRACTICE RESIDENCY PROGRAMS

Section

590.100	Eligibility for Grants
590.110	Limitations on Use of Grant Funds
590.120	Project Requirements
590.130	Application for Grants
590.140	Selection Criteria
590.150	Grant Awards, Terms and Conditions
590.160	Grant Funds Recovery
590.170	Reporting Requirements

SUBPART C: MEDICAL STUDENT SCHOLARSHIPS

Section

590.200	Limitations on Use of Scholarship Funds
590.210	Eligibility for Application
590.220	Criteria for Selecting Scholarship Recipients
590.230	Terms of Performance
590.240	Scholarship Repayment

SUBPART D: EDUCATIONAL LOAN REPAYMENT FOR PHYSICIANS

Section

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590.300	Limitations on Use of Loan Repayment Funds
590.310	Eligibility for Application
590.320	Selection Criteria for Distribution of Loan Repayment Funds
590.330	Terms of Performance

SUBPART E: DESIGNATION OF SHORTAGE AREAS

Section

590.400	Data Elements Used in Designation Process
590.410	Criteria for Designating Shortage Areas
590.420	Distribution of Lists of Designated Shortage Areas

590.APPENDIX A	Sample Contract for Medical Student Scholarship (Student Contract) (Repealed)
590.APPENDIX B	Sample Contract for Scholarship Service Obligation (Repealed)
590.APPENDIX C	Sample Contract for Monetary Repayment of Scholarship Obligation (Repealed)
590.APPENDIX D	Sample Contract for Educational Loan Repayment (Repealed)

AUTHORITY: Implementing and authorized by the Family Practice Residency Act [110 ILCS 935].

SOURCE: Filed June 8, 1978; amended at 4 Ill. Reg. 38, p. 185, effective September 10, 1980; codified at 8 Ill. Reg. 4509; Part repealed, new Part adopted at 15 Ill. Reg. 1833, effective January 25, 1991; amended at 35 Ill. Reg. _____, effective _____.

SUBPART A: GENERAL PROVISIONS

Section 590.10 Applicability (Repealed)

(Source: Repealed at 35 Ill. Reg. _____, effective _____)

Section 590.20 Definitions

"Accredited family practice residency" means a training program meeting the requirements of the Accreditation Council for Graduate Medical Education of the American Medical Association, or the Committee on Postdoctoral Training of the American Osteopathic Association.

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"Act" means the Family Practice Residency Act.

"Authorized representative" means a person who has authority to act on behalf of the legal entity or person that is an applicant or grantee. Authorized representatives are: for a corporation, any of its officers or members of its board of directors; for a limited liability company, any of its managers or members; for a partnership, any of its general partners; and for a sole proprietor, the individual who is the sole proprietor.

"Board certified physician" means a physician who has taken and passed a medical specialty examination.

"Board eligible physician" means a physician who has completed the requirements for admission to a medical specialty board examination but has not yet taken and passed the examination.

"Business day" means Monday through Friday. It does not include a federal or State government declared holiday, Saturday or Sunday.

"Calendar day" means all days in a month or prescribed time frame. It includes weekends and federal or State government declared holidays.

"Center" means the Center for Rural Health of the Illinois Department of Public Health.

"Certified mail" means mail for which proof of delivery is obtained.

"Committee" means the Advisory Committee for Family Practice Residency Programs. (Section 3.03 of the Act).

"Community-Based Organization" means a locally organized and locally recognized group of individuals whose goals include efforts to maintain or increase the availability of primary health care in their community.

"Department" means the Illinois Department of Public Health. (Section 3.01 of the Act)

"Designated Shortage Area" means an area designated by the Director as a physician shortage area, a medically underserved area, or a critical health manpower shortage area as defined by the United States Department of Health

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and Human Services, *or as further defined by the Department to enable it to effectively fulfill the purpose stated in Section 2 of the Act. Such areas may include the following:*

An urban or rural area which is a rational area for the delivery of health services;

A population group; or

A public or nonprofit private medical facility (Section 3.04 of the Act).

"Director" means the Director of the Illinois Department of Public Health. (Section 3.02 of the Act)

"Disabled" shall have the meaning ascribed in Section (2)(A)(2.1) of the Business Enterprise for Minorities, Females and Persons with Disabilities Act.

"Disability" shall have the meaning ascribed in Section 1-103(I) of the Illinois Human Rights Act.

"Due diligence" means action taken toward the completion of a project with the diligence and foresight that persons of ordinary prudence and care would exercise under similar circumstances.

"Data Universal Numbering System" or "DUNS" is a system that assigns a unique numeric identifier, referred to as a DUNS number, to a single business entity.

"Eligible medical student" means a person who meets all of the following qualifications:

he or she is an Illinois resident at the time of application for a scholarship;

he or she is studying medicine in a medical school located in Illinois;

he or she exhibits financial need as determined by the Department; and

he or she agrees to practice full-time in a Designated Shortage Area as a primary care physician one year for each year he or she is a scholarship recipient. (Section 3.07 of the Act)

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"Family practice residency program" means a program accredited by the Accreditation Council for Graduate Medical Education, or the Committee on Postdoctoral Training of the American Osteopathic Association. (Section 3.06 of the Act)

"Federally Qualified Health Center" or "FQHC" means a health center funded under section 330 of the Public Health Service Act (42 USC 254b).

"Federally Qualified Health Center Look-Alike" or "FQHC Look-Alike" means an organization that meets the requirements for receiving a grant under section 330 of the Public Health Service Act but does not receive federal grants under that authority.

"Federal poverty level as published in the Federal Register" means the poverty level population figures published annually in the Federal Register. The Federal Register may be found at the website: www.gpoaccess.gov/fr/Index.html.

"Fellowship" means optional medical training, usually one year, completed after the residency training required for each of the primary care specialties.

"Fiscal year" means the financial operating year of Illinois State government. It begins on July 1 and ends on June 30 of the next calendar year.

"Full-time practice for physicians with active staff privileges" means maintaining office hours for patient care that equal or exceed the mean number of office hours per week reported by physicians, by specialty, and published in the American Medical Association's "Socioeconomic Characteristics of Medical Practice".

"Full-time practice for primary care physicians without active staff privileges" at a hospital means maintaining office hours or being employed for patient care for an amount of time at least equal to the mean number of office hours per week reported by family practice physicians in the American Medical Association's "Socioeconomic Characteristics of Medical Practice".

"Funding period" means the time frame during which grant funds are to be expended by the grantee (usually corresponding with the Department's fiscal year).

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"Grantor agency" means *any agency of State government which dispenses grant funds*. (Section 2(a) of the Illinois Grant Funds Recovery Act)

"Grant agreement" means the agreement entered into between the Department and any person or entity for obligation, capital expenditure or use for a specific purpose.

"Grantee" means a *person or entity which may use grant funds*. (Section 2(c) of the Illinois Grant Funds Recovery Act)

"Grant funds" means *public funds dispensed by the Department to any person or entity for obligation, expenditure or use for a specific purpose*. (Section 2(b) of the Illinois Grant Funds Recovery Act)

"Good academic standing" means a student is matriculating with the rest of his or her class as determined by the student's medical school.

"Health Professional Shortage Area" or "HPSA" means a designation provided by the U.S. Department of Health and Human Services, Health Resources and Services Administration. The HPSA designation indicates the shortage of primary medical care, dental or mental health providers. The designation may be geographic (a county or service), demographic (low income population) or institutional (comprehensive FQHC or other public facility). All FQHCs and Rural Health Clinics that provide access to care regardless of an individual's ability to pay receive HPSA designations. (For a map of HPSAs, see <http://bhpr.hrsa.gov/shortage/hpsacrit.htm>.)

"Illinois resident" means a person who has been a resident of Illinois for at least one year prior to application for a Medical Student Scholarship and is a citizen or lawful permanent resident of the United States.

"Lawful permanent resident" means a person who is not a citizen of the United States but who resides in the United States under legally recognized requirements and lawfully recorded permanent residence as an immigrant.

"Legal holiday" means a holiday set by statute, during which government and business working hours are suspended.

"Local health department" means a county, multi-county, municipal or district public health agency certified by the Department.

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"Matriculation fees" means educational expenses charged to all students by the various medical schools. These fees are charged to offset the expenses incurred by the school in areas such as the application and enrollment processing, library use, mandatory health insurance, and student activities.

"Medical school" means any private or public nonprofit school in Illinois that provides education leading to a doctor of medicine or doctor of osteopathy degree, and that is approved by the Illinois Department of Financial and Professional Regulation, pursuant to the Medical Practice Act of 1987.

"Medical student" means a resident of Illinois *studying medicine in a medical school located in Illinois*. (Section 3.07 of the Act)

"Medically underserved population" means individuals who live in a designated shortage area or who, because of special health needs or low income, experience difficulty receiving health care.

"Metropolitan Statistical Area" means one or more adjacent counties that have at least one urban core area of at least 50,000 population, plus adjacent territory that has a high degree of social and economic integration with the core, as measured by commuting ties.

"Number of live births in Illinois" means the number of live births in Illinois as provided by the Department's Center for Health Statistics.

"Number of obstetricians providing care in Illinois" means the number of obstetricians providing care in Illinois as found in the American Medical Association's Survey Data as provided to the Department as a Primary Care Organization Grantee by the U.S. Department of Health and Human Services, Bureau of Health Professions. These data are provided for the designation of HPSAs in Illinois.

"Obstetrical service area" means the geographic area surrounding a hospital with an obstetrical unit and that is defined by an imaginary boundary determined by the shortest distance, either in time or miles, for a citizen or equivalent to travel to one hospital rather than another.

"Obstetrical unit" means an entire facility or a distinct part of a facility that provides both maternity and obstetric care and that is designed, equipped,

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organized and operated in accordance with the requirements of the Hospital Licensing Act.

"Primary care physician" means a person licensed to practice medicine in all of its branches under the Medical Practice Act of 1987 with a specialty in Family Practice, Internal Medicine, Obstetrics and Gynecology, or Pediatrics as defined by recognized standards of professional medical practice. (Section 3.05 of the Act)

"Rational area" means the geographic area surrounding a physician's office, a hospital or a clinic, from which the residents of the geographic area may be reasonably expected to seek health care from the physician, hospital or clinic located within that geographic area.

"Residency matching process" means the National Resident Matching Program that coordinates the matching of medical students with the hospitals and residency training programs in the medical students' selected specialty. The matching application process usually lasts from June through September of one year, with match announcements made in March of the following year.

"Residency training" means the years of graduate medical education that follow medical school and that train the new physician in his or her chosen specialty (e.g., family practice, pediatrics).

"Rural" means any geographic area not located in a U.S. Bureau of the Census Metropolitan Statistical Area; or a county located within a Metropolitan Statistical Area but having a population of 60,000 or less; or a community located within a Metropolitan Statistical Area but having a population of 2,500 or less.

"Urban" means any geographic area that does not meet the definition of "rural" in this Section.

(Source: Amended at 35 Ill. Reg. _____, effective _____)

Section 590.30 Incorporated and Referenced Materials

The following materials are incorporated or referenced in this Part:

- a) Illinois Statutes

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- 1) Family Practice Residency Act [110 ILCS 935]
- 2) Medical Practice Act of 1987 [225 ILCS 60]
- 3) Hospital Licensing Act [210 ILCS 85]
- 4) Illinois Administrative Procedure Act [5 ILCS 100]
- 5) Department of Public Health Powers and Duties Law [20 ILCS 2310/2310-200]
- 6) Illinois Grant Funds Recovery Act [30 ILCS 705]
- 7) Illinois Human Rights Act [775 ILCS 5]
- 8) Business Enterprise for Minorities, Females and Persons with Disabilities Act [30 ILCS 575]
- 9) State Finance Act [30 ILCS 105]
- b) Illinois Rules
 - 1) Practice and Procedure in Administrative Hearings (77 Ill. Adm. Code 100)
 - 2) Government Contracts, Procurement and Property Management (44 Ill. Adm. Code 750)
- c) Federal Regulations

U.S. Department of Health and Human Services, designation of Health Professional Shortage Areas (HPSAs) pursuant to section 332 of the Public Health Service Act (42 USC 254e) (as amended by the Health Care Safety Net Amendments of 2002, P.L. 107-251); 42 CFR 5 (Designation of health professional shortage areas), October 1, 2005 and 51c (Grants for community health services), October 1, 2005. Source: 45 FR 76000, November 17, 1980. Nomenclature changes to Part 5 appear at 57 FR 2480, January 22, 1992, Procedures and Criteria for Designation of HPSAs (see Section 590.410(b)).

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d) Other Guidelines –

"Socioeconomic Characteristics of Medical Practice, 1989", prepared by the American Medical Association's Center for Economic and Health Policy Research, 515 North State Street, Chicago, Illinois 60654.

e) All incorporations by reference of federal regulations and the standards of nationally recognized organizations refer to the regulations or standards on the date specified and do not include any amendments or editions subsequent to the date specified.

(Source: Amended at 35 Ill. Reg. _____, effective _____)

Section 590.40 Administrative Hearings

Administrative hearings conducted by the Department concerning the provisions of this Part shall be governed by the Department's Practice and Procedure in Administrative Hearings.

(Source: Amended at 35 Ill. Reg. _____, effective _____)

Section 590.60 Advisory Committee for Family Practice Residency Programs

The Advisory Committee for Family Practice Residency Programs consults with the Director in the administration of the Act. (Section 5 of the Act) The Department is required to consult with the Committee in the determination of Designated Shortage Areas, eligibility criteria for the allocation of grants and the awarding of scholarships. (Section 4.09 of the Act)

a) The Committee shall consist of nine members with the following composition:

- 1) Four members shall be *family practice physicians*;
- 2) One member *shall be a dean or associate dean or deputy dean of a medical school in Illinois*; and
- 3) Four members shall represent *the general public*. (Section 5 of the Act)

b) Committee appointment:

- 1) The Director shall appoint individuals to the committee.

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- 2) Membership on the committee shall be for a term of *four years*.
 - 3) *No person shall serve more than two terms.*
 - 4) *A committee member shall continue to serve after the expiration of his or her term until his or her successor has been appointed.* (Section 5 of the Act)
- c) Committee structure:
- 1) The Committee shall elect a chairperson *from among the family practice physician members.*
 - 2) The Committee shall elect *such* officers as *may be required.* (Section 5 of the Act)
- d) *The Committee shall meet as frequently as the Director deems necessary.* (Section 5 of the Act) However, the committee shall meet at least annually.

(Source: Added at 35 Ill. Reg. _____, effective _____)

SUBPART B: GRANTS TO FAMILY PRACTICE RESIDENCY PROGRAMS

Section 590.100 Eligibility for Grants

The following educational entities are eligible to apply for grants through this Part:

- a) Any accredited family practice residency program located in Illinois; or
- b) Any school of medicine or school of osteopathy located in Illinois with a department of family medicine or family practice; or
- c) Any accredited preventive medicine residency program located in Illinois.

(Source: Amended at 35 Ill. Reg. _____, effective _____)

Section 590.120 Project Requirements

- a) Applicants for projects to be funded through this Part shall respond to requests for proposals distributed by the Department and delineating project requirements.

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- b) Requests for proposals prepared by the Department shall address one or more of the following goals:
- 1) *to increase the number of family practice physicians in Designated Shortage Areas;*
 - 2) *to increase the percentage of obstetricians establishing practice within the State upon completion of residency;*
 - 3) *to increase the number of accredited family practice residencies within the State;*
 - 4) *to increase the percentage of family practice physicians establishing practice within the State upon completion of residency; and*
 - 5) *to provide funds for rental of office space, purchase of equipment and other uses necessary to enable family practitioners to locate their practices in communities located in designated shortage areas.*
(Section 4.01 of the Act)
- c) Projects shall have a director who is a board certified family practice physician who oversees the educational and professional components of the program and who is eligible to be a faculty member of a school of medicine or a school of osteopathy.
- d) Project directors shall annually submit fiscal and program objective progress reports to the Department.
- e) The applicant shall also demonstrate *local support for the program*. Local support can be demonstrated through *funds, services or other resources*. *The ratio of State support to local support shall be determined by the Department in a manner that is consistent with the purpose of the Act.* (Section 6 of the Act)

(Source: Amended at 35 Ill. Reg. _____, effective _____)

Section 590.130 Application for Grants

- a) The Department shall prepare and distribute applications to eligible applicants (see Section 590.100).

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- b) Applications shall describe the applicant's proposed methods to achieve the goals specified in the Department's request for proposals (see Section 590.120).
- c) Applications shall be in two formats – one for new projects and one for the subsequent years of a continuing project.
 - 1) New project applications shall include:
 - A) The legal name of the applicant;
 - B) The name and title of the applicant's officers and managers;
 - C) The applicant's legal address;
 - D) A general description of the applicant, including its business and business experience;
 - E) The applicant's telephone number, fax number, federal employer identification number (FEIN), DUNS number, and Illinois Department of Human Rights number;
 - F) The project director's name and e-mail address;
 - G) A description of the project for which grant funds are requested, including a summary statement of the applicant's plan of action to address the goals described in the Department's request for proposals;
 - H) A description of the geographic area or special population group to be served by the applicant's project, a statement of the special needs of the area or group (e.g., lack of health care providers, high incidence of disease, economic barriers to care) and an explanation of the manner in which the proposed project would meet those needs;
 - I) A statement of measurable and relevant objectives the applicant proposes to achieve in the first year of the project as well as its longer term goals, including appropriate measuring metrics;

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- J) A work plan and time table for achievement of the objectives;
 - K) An evaluation plan that will document the project's progress in meeting the particular needs of the geographic area or special population group described in subsection (c)(1)(H);
 - L) A description of the medical student or family practice resident involvement in the project, including numbers participating, level of training, amount of academic time involved, and whether involvement will be a required or an optional experience for the student or resident;
 - M) A description of the educational benefits the project would offer students or residents, which would not be available to them without the project;
 - N) A description of the project's relationship to other activities and goals of the school or the residency program;
 - O) A detailed budget with narrative explanation of the request, including cost estimates of developing, constructing, operating or completing the project; and
 - P) For residency program applicants, a summary report, for the most recent five-year period, of the percentage of its graduates who have established practices in designated shortage areas in Illinois and, if available, a count of those who have established practices in underserved areas of Illinois.
- 2) Continuing project applications shall include:
- A) The legal name of the applicant;
 - B) The name and title of the applicant's chief officers and key employees;
 - C) The applicant's legal address;
 - D) A general description of the applicant, including its business and business experience;

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- E) The applicant's telephone number, fax number, FEIN and DUNS number;
- F) The project director's name and e-mail address;
- G) A progress report on the prior project year's activities, including accomplishments in meeting all stated objectives, impact on the needs of the area or population group served, amount of student and/or resident involvement, and educational benefits achieved;
- H) A summary statement of all changes in the plan of action;
- I) A description of all changes in the geographic area or special population group being served;
- J) A statement of measurable objectives for the new project year, measured with previously identified metrics;
- K) A work plan and time table to meet the objectives;
- L) An evaluation plan for the new objectives, including appropriate measuring metrics;
- M) A detailed budget with a narrative description, including cost estimates of developing, constructing, operating or completing the project; and
- N) For residency program applicants, a report on the practice locations of the most recent graduates.

(Source: Amended at 35 Ill. Reg. _____, effective _____)

Section 590.140 Selection Criteria

- a) Priority in the selection of applicants for funding shall be given to those projects that demonstrate the greatest impact on availability of health care for designated shortage areas or for population groups with special needs. The impact shall be demonstrated in the following manner:

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- 1) Applicants that are located in a designated shortage area or can demonstrate that a significant percentage of patients served at their existing clinic sites reside in designated shortage areas;
 - 2) Applicants that have presented a plan to significantly increase the number of individuals residing in designated shortage areas who will become patients at the proposed project;
 - 3) Applicants that can demonstrate that a significant number of patients to be seen at the proposed project will be members of a population group with special needs (see Section 590.130(c)(1)(H)).
- b) Applicants that demonstrate the greatest level of residents' involvement in the proposed project shall receive priority consideration.
 - c) Applicants that demonstrate that the proposed project meets an educational need not available or insufficient in scope at the main residency location will receive priority consideration.
 - d) Applicants that demonstrate the lowest ratio of Family Practice Residency Act grant funds to total proposed project costs will receive priority consideration.
 - e) Applicants that demonstrate a commitment to training family physicians to meet the health care needs of designated shortage areas or population groups with special needs will receive priority consideration. A commitment can be demonstrated by the following:
 - 1) Specific projects or activities targeted at population groups with special needs and/or populations residing in designated shortage areas, which were supported by sources other than Family Practice Residency Act grant funds;
 - 2) Evidence of residency support, either financial or peer, for its graduates who have established practices in designated shortage areas; and
 - 3) A higher percentage of residency graduates who have established practices in Illinois within designated shortage areas.
 - f) Additional consideration shall be given for those projects meeting any of the following guidelines:

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- 1) *Those which are to be established at locations which exhibit potential for extending family practice physician availability to;*
 - 2) *Those which are located away from communities in which medical schools are located; and*
 - 3) *Those which are located in hospitals having affiliation agreements with medical schools located within the State.*
(Section 4.02 of the Act)
- g) Selection criteria shall be applied with advice and review of the Advisory Committee.
- h) Once the Department determines that applications are complete, grant proposals will be forwarded to the Department's grant review committee for consideration.
- i) Applicants shall be allowed to amend the application or provide additional supporting documentation during the evaluation process if requested by the Department's grant review committee.
- j) Upon completion of the grant review committee's evaluation, the Department will award grants to the applicants that meet all of the applicable requirements of the Act and this Part.

(Source: Amended at 35 Ill. Reg. _____, effective _____)

Section 590.150 Grant Awards, Terms and Conditions

To issue a grant award, the Department and grantee will enter into a written grant agreement. This agreement will describe the requirements the grantee must fulfill (based on the goals and objectives in the application) and how the grantee will ensure compliance with all applicable stipulations and conditions.

- a) The written grant agreement shall contain, at a minimum, the following:
- 1) Identifying information of the grantee, including name, mailing address, phone number, fax number and e-mail address;
 - 2) A description of the grant's purpose;

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- 3) Information on how payments to the grantee will be made;
 - 4) Details on what constitutes permissible expenditure of grant funds;
 - 5) Reporting requirements applicable to the grant, including the filing of quarterly reports, at a minimum (for those grants exceeding \$25,000), that describe the project's progress and a detailed report of funds expended;
 - 6) The time period of the grant;
 - 7) Certification that the grantee will comply with all applicable provisions of the Illinois Grant Funds Recovery Act;
- b) Grant funds that the grantee does not expend or obligate by the end of the grant agreement shall be returned to the Department within 45 calendar days (see Section 4(b)(5) of the Illinois Grant Funds Recovery Act). The 45 calendar day time frame begins the day after the grant agreement expires. Returned funds will be deposited into the fund from which the original grant disbursement to the grantee was made.
- c) Grantees are required to keep proper, complete and accurate accounting records of all grant funds received from the Department.
- d) If a grantee *dispenses any part or all of the grant funds to another person or entity for obligation or expenditure, those dispensed funds shall be treated as grant funds.* (Section 12 of the Illinois Grant Funds Recovery Act) As such, the person or entity that receives the grant funds from the grantee will be subject to all applicable Sections of this Part.
- e) *Each award by grant of State funds of \$250,000 or more for capital construction costs or professional services is conditioned upon the recipient's written certification that the recipient will comply with the business enterprise program practices for minority-owned businesses, female-owned businesses, and businesses owned by persons with disabilities of the Business Enterprise for Minorities, Females, and Persons with Disabilities Act and the equal employment practices of Section 2-105 of the Illinois Human Rights Act.* (Section 45 of the State Finance Act)

(Source: Added at 35 Ill. Reg. _____, effective _____)

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Section 590.160 Grant Funds Recovery

- a) If a grantee fails to comply with this Subpart or any of the terms of the grant agreement, the Department, after notice and opportunity for hearing, shall suspend or revoke the grant and/or recover any grant funds previously disbursed to the grantee.
- b) If the Department believes that a grant should be suspended, revoked or recovered because of a grantee's failure to comply with this Subpart or the terms of the grant agreement, the grantee shall have the *opportunity for at least one informal hearing* before the Department or the Department's designee *to determine the facts and issues and to resolve any conflicts as amicably as possible before any formal recovery action is taken.* (Section 7 of the Illinois Grant Funds Recovery Act)
- c) If, based on the outcome of the informal hearing, the Department believes that a grant should be suspended, revoked or recovered because of a grantee's failure to comply with this Subpart or the terms of the grant agreement, then written notice of the proposed action shall be given to the grantee identifying the action to be taken and specific facts that permit the action. The grantee shall have 35 calendar days after the receipt of the notice to request a formal hearing (see 77 Ill. Adm. Code 100) to show why recovery is not justified or proper.
- d) If a grantee requests a hearing pursuant to subsection (c), the Department shall hold a hearing at which the grantee (if an individual or the grantee's attorney if the grantee is a recognized entity) is permitted to present evidence and witnesses to show why the action should not be taken.
- e) After the conclusion of the hearing, the Department shall issue a written final order setting forth its findings of fact and decision. A copy of the order shall be sent to the grantee.
- f) The Department may suspend payment of grant funds at any time for failure to comply with Section 590.170 or in any situation that constitutes a threat to the public interest, safety or welfare. Notice of opportunity for hearing will be provided with the notice of suspension. If a grantee requests a hearing pursuant to subsection (c), the Department may not take any action of recovery until at least 35 calendar days after the Department has issued a final recovery order pursuant to subsection (e). If a grantee does not request a hearing, the Department may

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proceed with recovery of the grant funds identified in the notice at any time after the expiration of the 35 calendar day request period established in subsection (c).

- g) Any notice or mailing required or permitted by this Part shall be deemed received five business days after the notice or mailing is deposited in the U.S. mail, properly addressed with the grantee's current or last known business address and with sufficient U.S. postage affixed.

(Source: Added at 35 Ill. Reg. _____, effective _____)

Section 590.170 Reporting Requirements

- a) Quarterly Reports. For grants that exceed \$25,000, each grantee shall, at a minimum, submit progress reports to the Department every three months. The reports are due within 10 calendar days after the quarterly reporting period has expired (see Section 4(b)(2) of the Illinois Grant Funds Recovery Act). The report shall include the following:
- 1) Current status of the project, including the percentage of the project finished;
 - 2) Project components finished and project components yet to be finished;
 - 3) Costs and expenditures incurred to date, an itemized listing of the total current project costs and a comparison of those costs to the budget approved in the grant agreement; and
 - 4) Signature of an authorized official of the grantee, stating that this is a true and complete report of the project's status.
- b) Final Report. Grantees shall submit a final report within 60 calendar days after the conclusion of the grant. The degree to which each objective in the proposal has been met shall be fully addressed in this report. The final report shall contain the following:
- 1) A brief narrative summarizing project accomplishments;
 - 2) A description of any new activities or modifications made to the project as presented in the original grant application, including the causes for

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change. The description shall include a narrative on the implementation timetable and expected outcomes;

- 3) A description of problems that developed and how they were addressed;
- 4) A list of all project costs and sources of funds for the grant; and
- 5) A certification in the form of a notarized statement, signed by an authorized representative of the grantee, attesting that:
 - A) All funds attributed to the grant have been expended;
 - B) The costs reported are the final costs required to complete the project and there are no additional or associated costs; and
 - C) Funds used for the project were approved by the Department.
- c) Failure to provide all of the required reports and information in a timely fashion shall result in the withholding or suspension of grant funds and the recovery of previously disbursed grant funds (see Section 590.160 and Section 4.1 of the Illinois Grant Funds Recovery Act).

(Source: Added at 35 Ill. Reg. _____, effective _____)

SUBPART C: MEDICAL STUDENT SCHOLARSHIPS

Section 590.200 Limitations on Use of Scholarship Funds

- a) Scholarships shall cover the cost of tuition and matriculation fees, and shall provide a monthly living stipend for selected medical students.
- b) Scholarship funds shall be expended by the recipient only while enrolled and in good academic standing at a medical school.
- c) Scholarship funds shall not be awarded for expenses incurred when the student must repeat more than once an academic term or terms, if the repetition is necessary because the student has an academic performance below an acceptable level as determined by the student's medical school.
- d) Scholarship funds shall be provided to the recipient's medical school. All funds

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for tuition and fees are to be expended only on the medical student's behalf, and all stipend monies are to be provided directly to the medical student.

(Source: Amended at 35 Ill. Reg. _____, effective _____)

Section 590.210 Eligibility for Application

- a) A student is eligible to apply for a Medical Student Scholarship if the following requirements are met:
 - 1) *He or she is an Illinois resident at the time of application;*
 - 2) *He or she is studying medicine, or accepted for enrollment, in a medical school located in Illinois;*
 - 3) *He or she exhibits financial need as determined by the Department, using financial analysis information provided by the applicant and accepted by his or her medical school. The Department shall find a financial need when the information provided reveals a deficit in available funds for tuition and fees; and*
 - 4) *He or she agrees to practice full-time in a Designated Shortage Area as a primary care physician one year for each year he or she is a scholarship recipient. (Section 3.07 of the Act)*
- b) Students receiving funds from other scholarship or loan funds requiring service commitments that would prevent the applicant from meeting the requirements of the Medical Student Scholarship shall be ineligible for scholarships described in this Subpart.

(Source: Amended at 35 Ill. Reg. _____, effective _____)

Section 590.220 Criteria for Selecting Scholarship Recipients

- a) Preference shall be given to those scholarship applicants who, in written narratives and personal interviews, demonstrate:
 - 1) An interest in pursuing one, or a combination of, the medical specialties of family practice, internal medicine, pediatrics, or obstetrics/gynecology;

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- 2) Previous experience with medically underserved populations;
 - 3) Previous experience in the health care delivery system, with preference given to those whose experience has involved one of the primary care specialty areas;
 - 4) Academic capabilities reported by the applicant's medical school;
 - 5) Financial need as reported by standard financial analysis documentation supplied by the applicant's medical school on the student's behalf;
 - 6) A greater number of years of medical school remaining;
 - 7) A stated interest in providing primary health care to Illinois citizens residing in designated shortage areas of Illinois;
 - 8) The greatest number of years of residence in Illinois; and
 - 9) United States citizenship, or being granted permanent residency in the United States by the United States Department of Homeland Security, Citizenship and Immigration Service.
- b) If applicants qualify equally in all of the criteria referenced in subsection (a), preference will be given to those interested in pursuing the specialty of family practice.
- c) Of all applicants, priority is given to those individuals who have previously received a Medical Student Scholarship, providing that the:
- 1) Recipient requests a continuation of scholarship funds;
 - 2) Recipient would not be repeating the same year of school because of poor academic performance (see Section 590.200); and
 - 3) Recipient has not voluntarily withdrawn from medical school.
- d) Selection criteria will be applied with advice and review of the Advisory Committee.

(Source: Amended at 35 Ill. Reg. _____, effective _____)

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Section 590.230 Terms of Performance

- a) Each scholarship recipient shall sign a written contract. The contract shall contain terms and conditions that ensure compliance with this Part and the laws of the State of Illinois, and enforcement of the contract.
- b) Scholarship recipients who fail to complete medical school because of academic failure (as documented by the recipient's medical school) shall repay to the Department all scholarship monies that were disbursed. This includes monies remitted to the medical school for tuition and fees as well as monies received by the recipient for stipends. Repayment shall be made as agreed to by the recipient and the Department in the recipient's contract.
- c) Scholarship recipients who fail to complete medical school because of voluntary actions (e.g, withdrawal from medical school) on their part shall repay to the Department all scholarship monies that were disbursed. This includes monies remitted to the medical school for tuition and fees as well as monies received by the recipient for stipends. Repayment shall be made as agreed to by the recipient and the Department in the recipient's contract.
- d) Scholarship recipients who complete medical school but fail to place in a primary care residency or fail to become licensed as a physician in Illinois shall repay all scholarship monies to the Department. This includes monies remitted to the medical school for tuition and fees as well as monies received by the recipient for stipends. Repayment shall be made as agreed to by the recipient and the Department in the recipient's contract.
- e) If the scholarship recipient is disabled or is otherwise unable for reasons beyond the recipient's control to perform the scholarship's obligations, these obligations shall be suspended until the scholarship recipient is able to resume the scholarship obligations. However, the suspension shall not exceed two years.
 - 1) To request a suspension of the scholarship obligation, a recipient shall submit a suspension request in writing to the Department. This request shall detail the reasons for the suspension and, if temporary, the duration of the suspension and shall be supported by clear and convincing documentation.

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- 2) The Department shall approve a request for a suspension if the request is supported by a letter from the recipient's licensed physician fully explaining and attesting to the recipient's inability (either temporarily or permanently) to continue either school or the practice of medicine and if the recipient agrees not to continue either his or her medical education or the practice of medicine in any state.
 - 3) If a scholarship recipient suffers total and permanent disability, dies or is adjudicated as incompetent, the recipient shall be discharged from all obligations to the Department in connection with the Family Practice Residency Program.
 - 4) If the Department denies the suspension request, the recipient shall fulfill the scholarship obligation.
 - 5) Based on the information contained in the request, the Department's acceptance or denial of the request will be provided in writing, under the Director's signature.
- f) Scholarship recipients who, in their third year of medical school, seek a residency training program in an area other than a primary care specialty shall have their eligibility for scholarship funds for their final year of medical school suspended until the residency matching process is complete.
- 1) If the recipient is notified by the National Resident Matching Program, or directly by a residency not participating in the National Resident Matching Program, of acceptance into a non-primary care residency, no funds shall be provided for the final year of medical education, and all funds previously provided by the Department to the student shall be due in full, immediately.
 - 2) If the recipient has requested a non-primary care residency but is matched to a primary care residency instead and agrees to the match, scholarship funds for the final year of medical education shall again be made available.
- g) Misrepresentation of any material facts presented in the recipient's scholarship application shall be considered a breach of contract. If the Department determines that a breach of contract occurred, the recipient's medical school shall be notified to halt further disbursements of scholarship funds. In addition, all funds provided

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by the Department to the student shall be due in full, immediately.

(Source: Amended at 35 Ill. Reg. _____, effective _____)

Section 590.240 Scholarship Repayment

- a) Upon the Illinois licensure of the scholarship recipient to practice medicine, the recipient shall provide primary health care in a designated shortage area of Illinois. The term of this service shall be *one year for each academic year he or she is a scholarship recipient*. (Section 3.07 of the Act)
- b) Service as a primary care physician shall begin no later than 30 calendar days after the licensure of the recipient to practice medicine.
 - 1) The Department will defer service until the recipient completes a primary care residency; service shall begin no later than 30 calendar days after completion of the residency.
 - 2) If the recipient leaves the residency program prior to completion, service shall begin within 30 calendar days after leaving the program.
- c) Upon written approval of the Department, service shall be deferred until 30 days following completion of a fellowship in a primary care specialty.
- d) The recipient's internship, residency or other advanced clinical training does not qualify as service repayment of the scholarship obligation.
- e) The scholarship recipient shall submit a written request to the Department for approval for a proposed practice location. The Department will provide approval or disapproval, in the form of a letter, to the scholarship recipient, based on the requirements of subsection (f). A letter of approval shall include a description of the terms of the service obligation.
 - 1) Without approval from the Department, time in practice at the described location shall not meet the scholarship recipient's service obligation.
 - 2) The scholarship recipient may request and receive approval for a practice location up to 18 months preceding the time that practice at the location is to begin.

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- 3) Approval for a practice location is granted for the duration of the scholarship recipient's service obligation.
- f) The scholarship recipient's practice shall meet the following requirements:
 - 1) Be located in a federally designated HPSAs (see Subpart E);
 - 2) Have at least 51% of the patients seen be members of the affected population group, including Medicaid-reimbursed patients and patients qualifying for a reduced fee if their household income is at or below 200 percent of the federal poverty level;
 - 3) Be a full-time, office-based practice providing direct patient care (see Subpart A, Section 590.20 for definition of full-time, by primary care specialty);
 - 4) Be in one of, or in a combination of, the primary care specialties; and
 - 5) Provide continuous service at the rate of 12 months for each academic year of medical school supported by the scholarship.
- g) Scholarship recipients may relocate to another practice location, or practice in more than one location, if prior written approval is granted by the Department.
- h) Scholarship recipients shall enter into a written contract with the Department that describes terms of the service obligation and contains provisions for enforcement of the contract.
- i) *Scholarship recipients who fail to provide service as required shall pay to the Department a sum of money equal to 3 times the amount of the recipient's average annual scholarship award for each year, or portion thereof, that the recipient fails to fulfill the service obligation. (Section 10 of the Act)*
 - 1) To fulfill the repayment requirements of this Section, *the scholarship recipient shall have 30 days from the date the failure begins in which to enter into a contract with the Department. (Section 10 of the Act)*
 - 2) *If the contract is not entered into within that 30 day period or if the contract is entered into but the required payments are not made in the amounts and at the times provided in the contract, the scholarship*

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recipient also shall be required to pay to the Department interest at the rate of 9% per annum on the amount of that sum remaining due and unpaid. (Section 10 of the Act)

- 3) Payment shall be made in equal monthly installments in amounts so that all sums due shall be paid within a period of time equal to the recipient's service term, or remaining portion thereof.
- 4) The contract will contain terms for repayment and provisions for enforcement of the contract.
- 5) *The amounts paid to the Department under this Section shall be deposited into the Community Health Center Care Fund and shall be used by the Department to improve access to primary health care services as authorized under Section 2310-200(a) of the Department of Public Health Powers and Duties Law. (Section 10 of the Act)*
- j) If a scholarship recipient fails to pay monies owed to the Department, the Department shall refer the matter to the Illinois Attorney General, a collection agency, or a licensed attorney.

(Source: Amended at 35 Ill. Reg. _____, effective _____)

SUBPART D: EDUCATIONAL LOAN REPAYMENT FOR PHYSICIANS

Section 590.300 Limitations on Use of Loan Repayment Funds

- a) Funds shall be used *for the repayment of the educational loans of primary care physicians who agree to serve in Designated Shortage Areas for a specified period of time, no less than 2 years.*
- b) *Payments under this program may be made for the principal, interest and related expenses of government and commercial loans received by the individual and used for tuition expenses, and all other reasonable educational expenses incurred by the individual.*
- c) *The maximum annual payment which may be made to an individual under the Act and this Part is \$20,000, or 25% of the total covered educational indebtedness, whichever is less.*

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- d) *Payments made under this Section shall be exempt from Illinois State income tax. (Section 4.10 of the Act)*
- e) Funds shall not be used to monetarily repay a practice obligation resulting from educational loans or scholarships, whether from Illinois based institutions or governments or those in other states.

(Source: Amended at 35 Ill. Reg. _____, effective _____)

Section 590.310 Eligibility for Application

- a) Any Illinois licensed physician who intends to practice or is practicing in a primary care specialty in a designated shortage area of Illinois may apply for educational loan repayment.
- b) Applicants shall document currently existing educational loan indebtedness to a governmental or commercial lending institution incurred for educational expenses in pursuit of the applicant's medical degree. Documentation of indebtedness shall include a photocopy or original copy of promissory notes or other evidence of indebtedness, with disclosure of the lending institution or agency, loan amount, loan period, interest rate, and any amounts repaid prior to the date of application.
- c) Applicants shall be practicing, or be willing to practice, full-time in a designated shortage area in Illinois.
- d) Applicants not yet in practice, or not yet in practice in a designated shortage area of Illinois, shall document intent to do so by written confirmation from a community-based organization or agency, or from other physicians located within the designated shortage area.
- e) Physicians having practice obligations to the National Health Service Corps or the Illinois Medical Student Scholarship Program may apply for educational loan repayment after completion of the practice obligation.

(Source: Amended at 35 Ill. Reg. _____, effective _____)

Section 590.320 Selection Criteria for Distribution of Loan Repayment Funds

- a) When numbers of applications are sufficient to support a geographic separation into urban and rural groupings, an equal number of applicants will be selected

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from each of the groups.

- b) When numbers of applications are sufficient, an equal number of applicants shall be selected from the city of Chicago and from the remaining urban areas in the State.
- c) Preference shall be given to applications from physicians who have been recruited by, or are actively involved with, a community-based organization or group having as one of its goals the improvement or maintenance of the availability and accessibility of primary health care in its area.
- d) When all other selection criteria are equal among a group of applicants, preference will be given to the applicant with the greater educational indebtedness.
- e) The Department will review applications from physicians on a quarterly basis, and the following priority classifications of the location and other characteristics of the practice shall be applied:
 - 1) Rural Selection Priority Classifications, From Highest to Lowest
 - A) Population-to-primary care physician ratio of at least 2400:1, new physician establishing practice in the area, and endorsed by a community-based group or organization.
 - B) Population-to-primary care physician ratio of at least 2400:1, new physician establishing practice in the area, with no endorsement by a community-based group or organization.
 - C) Population-to-primary care physician ratio between 1800:1 and 2399:1 and where at least one-third of the primary care physicians in the area are aged 60 or more, new physician establishing practice in the area, and endorsed by a community-based group or organization.
 - D) Population-to-primary care physician ratio between 1800:1 and 2399:1 and where at least one-third of the primary care physicians in the area are aged 60 or more, new physician establishing practice in the area, with no endorsement by a community-based group or organization.

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- E) Facilities designated under Section 590.410 of this Part, and new physician recruited to the facility.
 - F) Population-to-primary care physician ratio of at least 2400:1, physician with practice in the area for 24 months or less.
 - G) Population-to-primary care physician ratio between 1800:1 and 2399:1 and where at least one-third of the primary care physicians in the area are aged 60 or more, physician with practice in the area for 24 months or less.
- 2) Urban Selection Priority Classifications, From Highest to Lowest
- A) Population-to-primary care physician ratio of at least 3000:1, new physician establishing practice in the area, and endorsed by a community-based group or organization.
 - B) Population-to-primary care physician ratio of at least 3000:1, new physician establishing practice in the area, and no formal endorsement from a community-based group or organization.
 - C) Public and nonprofit private medical facilities that are designated as being in shortage areas under Section 590.410(a)(3), and new physicians recruited to these facilities.
 - D) Population-to-primary care physician ratio of at least 3000:1, physician with practice in the area for 24 months or less.
- f) Applications shall be accepted between July 1 and September 30 and considered for funding according to the criteria described in subsection (e). If all funds appropriated to this program for a specific fiscal year are not expended during the initial submission of applications, subsequent application cycles shall extend from October 1 to December 31, January 1 to March 31, and April 1 to June 30.

(Source: Amended at 35 Ill. Reg. _____, effective _____)

Section 590.330 Terms of Performance

- a) Each physician selected for educational loan repayment shall sign a written

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contract with the Department. The contract shall contain terms and conditions that ensure compliance with the laws of the State of Illinois and this Part, and enforcement of the contract.

- b) Each physician selected for loan repayment shall practice as a primary care physician in a designated shortage area on a full-time basis (see Section 590.20 for definition of full-time physician).
- c) Loan repayment recipients who move their practice from the location described in the recipient's original application shall relocate to an area that qualifies for the same or a higher priority ranking. Relocating to a lower priority area shall result in termination of the loan repayment contract. If a recipient relocates to a lower priority area and has his or her loan repayment contract terminated, the recipient shall be eligible to reapply for the loan repayment program and be considered among all other applicants. If a loan repayment recipient relocates to a lower priority area, has his or her loan repayment contract terminated and either does not reapply for loan repayment assistance or is not selected for loan repayment assistance, the recipient shall immediately remit to the Department all funds that were previously provided to the recipient.
- d) Loan repayment recipients who elect to have payments made on their behalf directly to the financial institution to which they are obligated may have payments made up to six months in advance if the financial institution so agrees. If the physician moves from the designated shortage area during the period for which loan repayment has been made, he or she shall repay any prorated amounts to the Department.
- e) Loan repayment recipients who elect to have payments made directly to themselves shall make loan payments, then present documentation of payment (e.g., cancelled checks) to the Department. Direct payments to recipients will be made on a quarterly basis.
- f) Misrepresentation of any material facts presented in the application will be considered a breach of contract. If the Department determines that a breach of contract has occurred, any funds provided by the Department for the repayment of educational loans shall be due in full immediately.
- g) If the physician does not repay any funds owed to the Department, the Department shall refer the matter to the Illinois Attorney General, a collection agency, or a licensed attorney.

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(Source: Amended at 35 Ill. Reg. _____, effective _____)

SUBPART E: DESIGNATION OF SHORTAGE AREAS

Section 590.400 Data Elements Used in Designation Process

- a) Population counts and demographic information describing a rational area are available in the most recently published decennial population census prepared by the U.S. Department of Commerce, Bureau of the Census.
- b) Information regarding physicians practicing in an area is collected by Department staff. Such information includes specialty, practice locations, amount of time in practice per week, and approximate or exact age of physician.
- c) Full-time-equivalencies for primary care physicians are calculated comparing a physician's office hours per week to that reported nationally by the American Medical Association (see Section 590.20).
- d) The number of obstetricians providing patient care in a particular year in Illinois will be obtained from the American Medical Association's Center for Health Policy Research.
- e) The number of live births in a particular year in Illinois will be obtained from the Department.

(Source: Amended at 35 Ill. Reg. _____, effective _____)

Section 590.410 Criteria for Designating Shortage Areas

- a) Shortage areas may include the following:
 - 1) *An urban or rural area which is a rational area for the delivery of health services;*
 - 2) *A population group; or*
 - 3) *A public or nonprofit private medical facility. (Section 3.04 of the Act)*
- b) Areas and population groups designated by the U.S. Department of Health and

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Human Services (see 42 CFR 5) as having shortages of primary care physicians shall qualify for purposes described in this Part.

- c) Additional areas shall be designated using the following criteria:
- 1) Urban service areas with a population-to-primary care physician ratio of at least 3000:1;
 - 2) Rural service areas with a population-to-primary care physician ratio of at least 2400:1;
 - 3) Rural service areas with a population-to-primary care physician ratio between 1800:1 and 2399:1, and where one-third of the primary care physicians in the area are 60 years of age or older;
 - 4) Urban or rural areas where board certified pediatricians or obstetrician/gynecologists are not practicing within the service area, and where there is sufficient need to support a full-time practice. Sufficient need, for the purposes of this subsection (c)(4), may be documented in the following manner:
 - A) At least 80% of the non-pediatric or obstetric physicians within the service area agree that there is a sufficient need.
 - B) At least 80% of the pediatric or obstetric physicians within the service area agree that there is sufficient need.
 - C) Hospital administrators and local health department administrators within the service area agree that there is sufficient need.
 - 5) Rural service areas where the obstetricians having admitting privileges at a hospital with an obstetrical unit perform more deliveries per year than the statewide average. The statewide average is obtained by dividing the number of obstetricians providing patient care in Illinois in a particular year into the number of births in Illinois in the same year; and when the existing obstetricians and family practice physicians within the service area providing obstetrical care express, in writing, their need for additional obstetricians.
- d) Facilities whose mission is to provide care to underserved populations will be

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designated for purposes of this Part. These facilities include:

- 1) Local health departments that establish primary care clinics, offering direct patient care on either a full or part-time basis;
- 2) Any community health center or its satellite in Illinois that is funded through Section 330 of the Public Health Service Act or is designated a Federally Qualified Health Center Look-Alike;
- 3) Health clinics that can document that at least 51 percent of their patients are a combination of the following:
 - A) Medicaid eligible; or
 - B) Qualify for reduced fees based on a sliding fee scale using as an upper limit 200 percent of the federal poverty level, as published annually in the Federal Register.

(Source: Amended at 35 Ill. Reg. _____, effective _____)

Section 590.420 Distribution of Lists of Designated Shortage Areas

Current listings of State and federally designated shortage areas are available electronically to all recipients of the Medical Student Scholarships authorized under Subpart C, interested individuals, organizations, local health departments, hospitals, primary care physicians and community health organizations at: www.idph.state.il.us/about/rural_health/shortageareas.htm.

(Source: Amended at 35 Ill. Reg. _____, effective _____)

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Section 590.APPENDIX A Sample Contract for Medical Student Scholarship (Student Contract) (Repealed)

(Source: Repealed at 35 Ill. Reg. _____, effective _____)

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**Section 590.APPENDIX B Sample Contract for Scholarship Service Obligation
(Repealed)**

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(Source: Repealed at 35 Ill. Reg. _____, effective _____)

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**Section 590.APPENDIX C Sample Contract for Monetary Repayment of Scholarship
Obligation (Repealed)**

(Source: Repealed at 35 Ill. Reg. _____, effective _____)

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Section 590.APPENDIX D Sample Contract for Education Loan Repayment (Repealed)

(Source: Repealed at 35 Ill. Reg. _____, effective _____)