

Wyoming Healthcare Professional Loan Repayment Program Survey



April 2010

Office of Rural Health
Rural and Frontier Health Division
Wyoming Department of Health



Executive Summary

On January 27, 2010, Wyoming Office of Rural Health (ORH) sent a survey to 183 participants in the Wyoming Healthcare Professional Loan Repayment Program (Program or WHPLRP). The purpose of the survey was to: 1) improve the Program; and 2) use data from the survey to educate policy makers on the impact of the Program in Wyoming. The survey was sent via e-mail and first class mail. Survey participants had to be in good standing or graduated from the Program to receive the survey. The survey closed March 1, 2010, with 150 completed surveys (82%). Confidentiality was maintained by assigning each participant a five digit random number to use as their identifier on the survey.

100% of survey responses identified they were currently practicing in Wyoming

100% of the physicians who considered practicing in another state (n=25) identified the Program as Very Important or Important (68% and 32% respectively) in their initial decision to

“I wanted to return to Wyoming to practice. I was offered another opportunity in Colorado. The opportunity in Colorado would have completely paid off my school loans. Had the WHPLRP not been available, we would not have returned to Wyoming. However, I will still have some of my loans remaining despite WHPLRP.”

practice in Wyoming. Twenty-four of the 25 physicians who considered practicing in another state answered Question 21, concerning how long they had been practicing in Wyoming when they applied for the Program: 92% responded less than three years, and 50% one year or less. These physicians considered 37 other states before deciding on Wyoming. The most common were: *Colorado* (33), *Montana* (29), *Idaho* (16), *Utah*, (11), *Nebraska* (9), *South Dakota* (6), Washington (5), California and Oregon (4), and Florida, Minnesota, New Mexico, North Dakota, and Ohio (3). *Italics* indicate a border state; all border states have a healthcare professional loan repayment program; Colorado has multiple programs.

#1 consideration for all participants in their decision to continue practicing in Wyoming (53.1% Very Important and 30.1% Important; 83.2% combined) was the Program. Other factors are identified under Question 7.

#1 way to improve the Program – Nearly 49% of the 374 comments on Questions 13, 14, and 28 referenced increasing funding, developing a process to allow for more years/money, and continuing the Program. Question 13 asked how ORH could attract more healthcare professionals to the counties with the most need; Question 14 asked what ORH could do to improve the Program; and Question 28 asked what is the weakest aspect of the Program. The National Health Service Corps Loan Repayment Program allows extensions for continued service and additional funding; WHPLRP currently does not.

Recruitment vs. Retention:

- 92% of physicians who considered practicing in another state (n=25) were awarded in their first three years practicing in Wyoming (**54.2% one year or less**); **100%** said the Program was Very Important or Important in their initial decision to practice in Wyoming.
- 77% of all physicians (n=39) were awarded in their first three years of practice in Wyoming (**36% one year or less**); **72.2%** said the Program was Very Important or Important in their initial decision to come to Wyoming.
- 62% of the awards for all professions (n=150) went to participants in their first three years of practicing in Wyoming (**31% one year or less**); **58.9%** said the Program was Very Important or Important in their initial decision to practice in Wyoming.
- The importance of recruiting and retaining healthcare professionals in their first three years of practice is highlighted by a *New England Journal of Medicine* December 2007 article that stated physicians were most likely to leave a practice in their first three years at that practice. If the physicians stay at least three years, they are more likely to remain long term. This is discussed in more detail under Question 21.

“The offers come across my desk nearly every day and many at least appear sweet. The sign-on offers alone could make a generous dent in my debt and have certainly been considered.”

Friends and Family was the most common response (50), followed by Other (44; Employer and co-worker had 15 each), on Question 11 which asked how participants heard about the Program. Despite newspapers being the third most common response, advertising received 35 comments identifying what ORH could do to attract more healthcare professionals to counties of greatest need (Question 13), 14 comments concerning Program weaknesses (Question 28), and in four general comments (Question 32). The Program does not receive funding to advertise. Historically, the ORH has identified a limited amount of funds to advertise once in every Wyoming newspaper (\$10,000), but does not have available funds to advertise in national or regional publications or venues. This is discussed more under Question 11.

Conclusions:

1. The Program is critical to resolving Wyoming’s need for healthcare professionals as all states bordering Wyoming have healthcare loan repayment programs (Colorado has several different programs; Utah, like Wyoming, was not funded in 2009). The Program impacts both recruitment and retention of healthcare professionals. Without the Program, Wyoming will become less competitive with neighboring states that were considered as practice sites by 65% of survey participants.
2. The Program cannot attract healthcare professionals if funding is not consistent and adequate.
 - a. A consistent and adequate funding level each biennium is needed for healthcare professionals and Wyoming communities to communicate better with each other during the recruiting process. Funding for the 2009-2010 biennium was minimal, and left qualified professionals in high need areas unable to participate in the Program. ORH

will evaluate the Program and develop educational material for policy makers concerning adequate funding level.

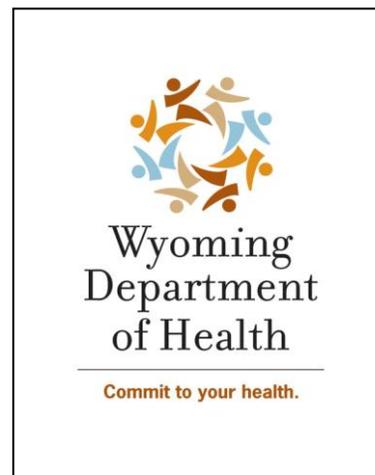
- b. Funding for advertising, both in-state and out, is needed to provide a greater impact on recruitment and emphasize the areas of greatest need for the Program to better meet Wyoming's needs. Investing a great deal of time and money to promote/advertise the Program without an adequate budget for awards is not wise stewardship of state funds.

Numerous survey comments such as the one below are scattered throughout the document in a similar format.

“I believe firmly that without this program Wyoming has no hope of meeting their healthcare provider needs. Our malpractice insurance rates, harsh physical environment and lack of employment opportunities for physician family members make our beautiful state a hard place to recruit to. The Wyoming Healthcare Professional Loan Repayment Program helps offset these disadvantages.”

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Wyoming Healthcare Professional Loan Repayment Program Survey Data

On January 27, 2010, the Office of Rural Health (ORH) sent a survey to 183 participants in the Wyoming Healthcare Professional Loan Repayment Program (Program or WHPLRP). The purpose of the survey was to: 1) improve the Program; and 2) use data from the survey to educate policy makers on the impact of the Program in Wyoming. The survey was sent via e-mail and first class mail to award recipients and graduates of the Program in good standing (those who withdrew, were in default, or not current with required documentation were not included in the survey). The survey closed March 1, 2010, with 150 completed surveys (82%). Confidentiality was maintained by assigning each participant a five digit random number to use as their identifier on the survey. Surveys were completed through www.surveymonkey.com.

ORH conducted a similar survey in February 2008. Of the 183 participants who received the 2010 survey, only 50 were also included in the 2008 survey.

Questions 1, 5, 8, and 22 asked for a specific entry (five digit number, date of contract, etc.).

Question 2 identified respondents' profession. Percent of professions responding:

Number survey sent to	Profession	Number responses	%
46	Physician	39	85
16	Physician Assistant	12	75
33	Other*	32	97
23	Registered Nurse	18	78
4	CRNA	1	25
35	Mental Health**	27	77
14	Nurse Practitioner	6	43
12	Dentist	10	83
-	Did not answer	5	-
183	TOTAL	150	82

* Other included occupational therapists, physical therapists, optometrists, advanced practice registered nurses (not otherwise identified), radiology technicians, speech language pathologists, and pharmacists. All professions had at least one response.

** Mental Health included psychologists, social workers, counselors, and therapists. All professions had at least one response.

Question 3 asked where each provider was currently practicing. One-hundred percent (100%) of responses stated Wyoming.

147 participants (including physicians) identified 33 communities in which they were currently practicing.

Communities with WHPLRP Participants	
#awards	Community
1	Glenrock
1	Guernsey
1	Jackson
1	Mountain View
1	Newcastle
1	St. Stephen's
1	Saratoga
1	Thayne
1	Wheatland
2	Afton
2	Lander
2	Marbleton
3	Big Piney
3	Douglas
3	Sundance
4	Buffalo
4	Green River
4	Lovell
4	Riverton
5	Pinedale
5	Rawlins
5	Sheridan
5	Thermopolis
5	Torrington
6	Laramie
8	Cody
8	Evanston
8	Gillette
9	Rock Springs
10	Casper
11	Cheyenne
11	Powell
11	Worland

39 physicians identified 18 communities in which they were currently practicing.

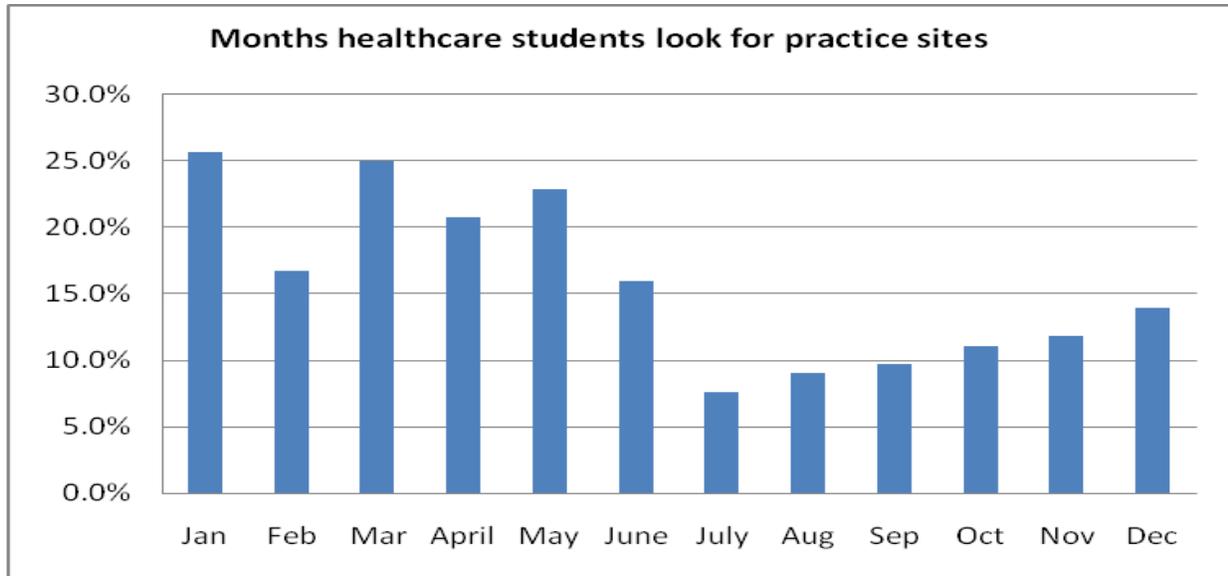
Communities with WHPLRP Physicians	
#awards	Community
1	Afton
1	Cody
1	Douglas
1	Green River
1	Marbleton
1	Torrington
1	Worland
2	Buffalo
2	Evanston
2	Powell
2	Sheridan
2	Thermopolis
3	Casper
3	Pinedale
3	Rock Springs
3	Sundance
5	Cheyenne
5	Gillette

“I cannot express enough my gratitude for being a recipient of this loan repayment program. The program was very effective in accomplishing its purpose with me. It has meant so much to me and my family, and has taken off some financial stress while allowing me to work in a rural community vs. having to look at moving to a more populated area for a job with higher pay.”

Question 4 asked participants what months students in their profession begin looking for their future practice sites. The first graph below reflects responses from all participants; the second reflects physician responses only.

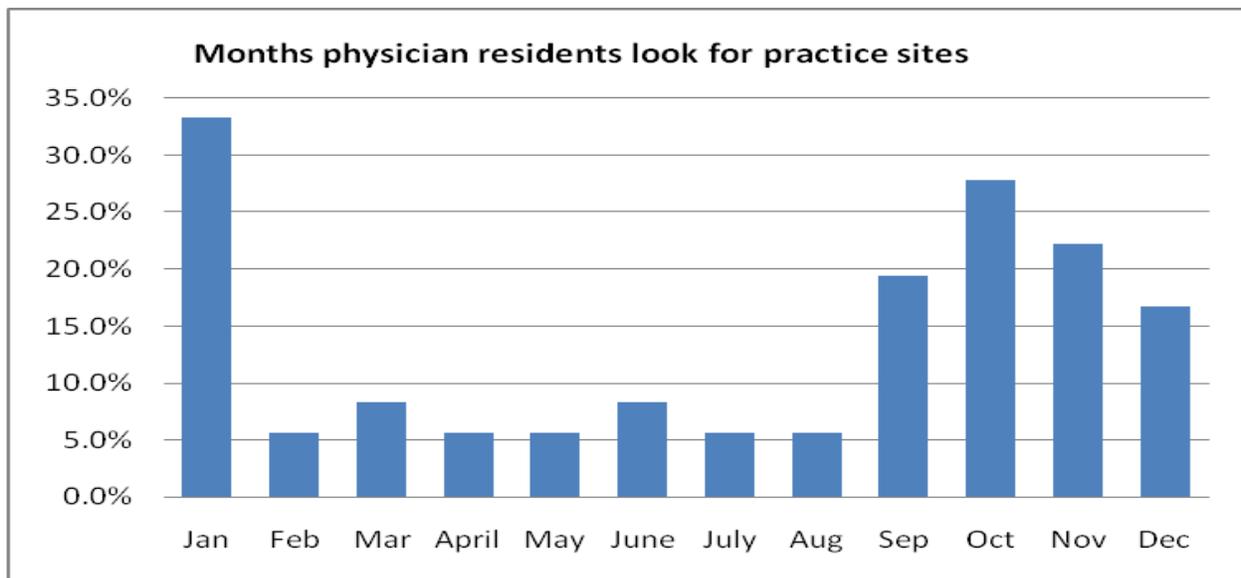
All participants:

There were 84 comments that discussed reasons for looking during these months; 12 stated more than one year in advance of graduation; 16 stated six months or more. **NOTE:** In the February 2008 survey, January was one of four months with zero selections for all participants.



Physicians only:

There were 18 comments from physicians; 33% stated one year or more in advance of graduation from residency.



Question 6 asked participants to rate various factors on how important each was in their initial decision to practice in Wyoming. Participants were allowed to select multiple responses for level of importance.

All participants:

Factor	% Very Important	% Important	% No Opinion	% Slightly Important	% Not Important	% Not Applicable	Number of Responses
Family living in area	38.9	29.2	3.5	1.4	10.4	16.7	144
Size of community	27.1	47.2	12.5	9.7	3.5	0	144
Lived there previously	14.7	17.5	16.8	3.5	19.6	28	143
Rural lifestyle	36.8	35.4	10.4	11.1	6.3	0	144
WHPLRP	31.9	27.0	17.7	7.8	5.7	9.9	141
Other	39.6	8.3	12.5	0	0	39.6	48

Physicians only:

Factor	% Very Important	% Important	% No Opinion	% Slightly Important	% Not Important	% Not Applicable	Number of Responses
Family living in area	27.8	30.6	5.6	0	16.7	19.4	36
Size of community	27.8	69.4	0	2.8	0	0	36
Lived there previously	2.8	13.9	25	0	30.6	27.8	36
Rural lifestyle	41.7	36.1	8.3	11.1	2.8	0	36
WHPLRP	47.2	25.0	13.9	2.8	5.6	5.6	36
Other	44.4	11.1	11.1	0	0	33.3	9

Physicians who considered practicing in another state only:

Factor	% Very Important	% Important	% No Opinion	% Slightly Important	% Not Important	% Not Applicable	Number of Responses
Family living in area	24	32	8	0	24	12	25
Size of community	20	76	0	4	0	0	25
Lived there previously	0	8	32	0	32	28	25
Rural lifestyle	44	28	12	16	0	0	25
WHPLRP	68	32	0	0	0	0	25
Other	33.3	0	0	0	0	66.7	3

NOTE: 100% of the physicians who considered practicing in another state identified the Program as Very Important or Important in their initial decision to practice in Wyoming. This is indicated in yellow on the previous table.

The Program was a tremendous consideration for physicians who considered working in another state. The comment that seems to capture the sentiment of most comments received on this question is: *“I wanted to return to Wyoming to practice. I was offered another opportunity in Colorado. The opportunity in Colorado would have completely paid off my school loans. Had the WHPLRP not been available, we would have not returned to Wyoming. However, I will still have some of my loans remaining despite WHPLRP.”*

Question 7 asked participants to rate various factors on how important each was in their decision to continue practicing in Wyoming. Participants were allowed to select multiple responses for level of importance.

All participants:

Factor	% Very Important	% Important	% No Opinion	% Slightly Important	% Not Important	% Not Applicable	Number of Responses
Family living in area	38.2	32.6	3.5	4.2	7.6	13.9	144
Size of Community	26.4	55.6	9.7	6.3	2.1	0	144
Lived there previously	21.4	25.7	15.7	1.4	15.7	20	140
Rural lifestyle	39.9	39.9	9.1	7.7	3.5	0	143
WHPLRP	53.1	30.1	8.4	2.8	2.8	2.8	143
Other	38.2	30.1	8.4	2.8	2.8	2.8	34

Physicians only:

Factor	% Very Important	% Important	% No Opinion	% Slightly Important	% Not Important	% Not Applicable	Number of Responses
Family living in area	19.4	36.1	2.8	5.6	13.9	22.2	36
Size of Community	22.2	66.7	2.8	8.3	0	0	36
Lived there previously	5.9	26.5	23.5	2.9	17.6	23.5	34
Rural lifestyle	36.1	44.4	11.1	5.6	2.8	0	36
WHPLRP	61.1	30.6	5.6	0	2.8	0	36
Other	33.3	0	16.7	0	0	50.0	6

Physicians who considered practicing in another state only (n=25):

Factor	% Very Important	% Important	% No Opinion	% Slightly Important	% Not Important	% Not Applicable	Number of Responses
Family living in area	20	32	4	4	20	20	25
Size of Community	16	72	4	8	0	0	25
Lived there previously	0	17.4	34.8	4.3	17.4	26.1	23
Rural lifestyle	36	40	16	8	0	0	25
WHPLRP	76	24	0	0	0	0	25
Other	33.3	0	0	0	0	66.7	3

NOTE: 100% of the physicians who considered practicing in another state identified WHPLRP as very important or important in their decision to continue practicing in Wyoming (identified by yellow highlight on above table). This is an improvement from the 2008 survey. A comment that seems to capture the sentiment of most comments received on this question was:

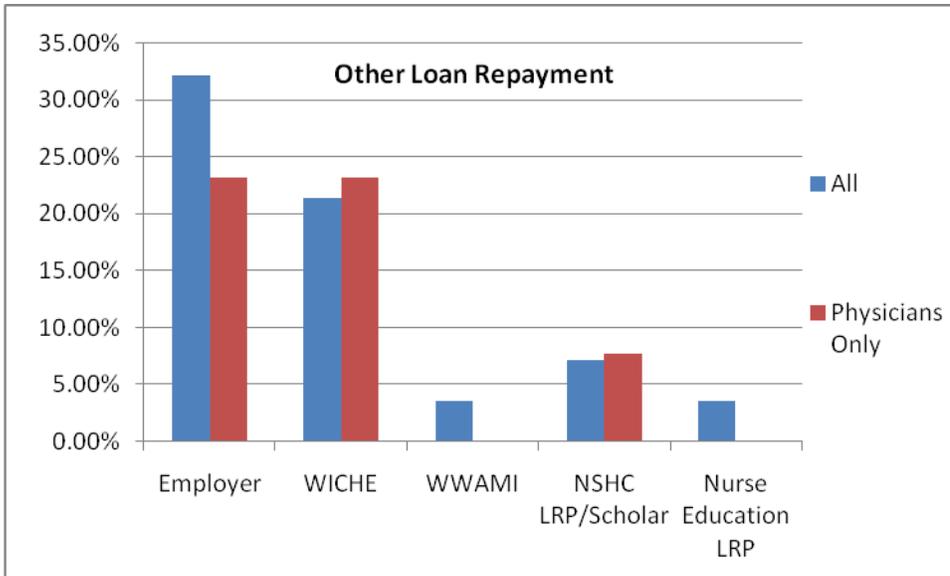
“My husband could have found a more lucrative job outside of the community at one time, but the student loan program played a major part in our decision to stay.”

Question 9 asked if the participants had Loan Repayment Program (LRP) opportunities other than WHPLRP. A resounding 79% of the 147 responses were no. **NOTE:** This indicates that ORH needs to educate healthcare professionals eligible for various National Health Service Corps programs.

Question 10 asked those that answered yes to Question 9 in which program they participated.

All Professions N=150	%	Which other LRP opportunities did you have if any?	Physicians only N=39	%
9	29	Employer	3	8
6	4	WICHE	3	8
1	0.6	WWAMI*	0	0
1	0.6	NHSC LRP	1	3
1	0.6	NHSC Nurse Education LRP	0	0
1	0.6	NHSC Scholar	0	0
12	8	Other	6	15
119	79	None	26	67

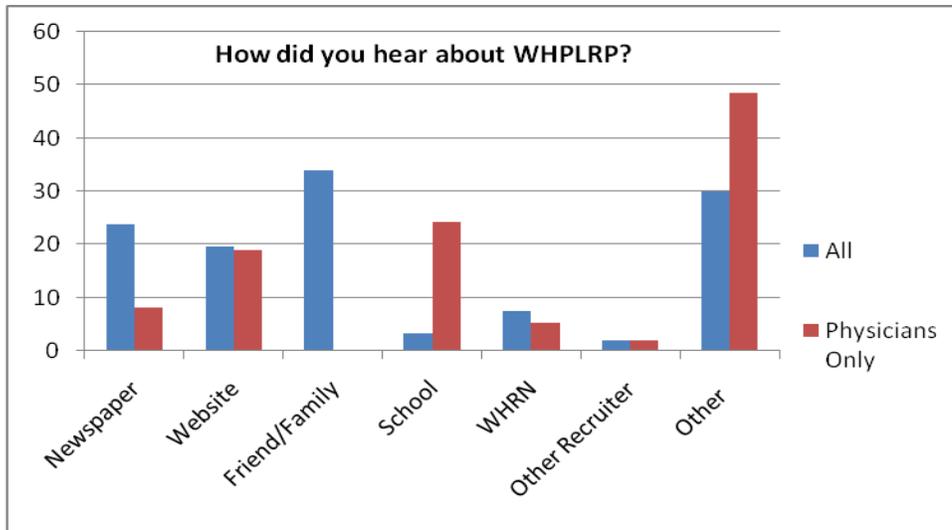
*WWAMI is a physician program. This survey participant must not have answered question 2.



“After getting assistance from the Wyoming Loan Repayment Program, it was harder for me to consider leaving Wyoming without a VERY GOOD reason out of loyalty to Wyoming for how the state has assisted me.”

Question 11 asked participants how they heard about the Program.

All Professions N=150	%	How did you hear about the Program?	Physicians only N=37	%
35	23	Newspaper	3	8
29	19	Website	7	19
50	33	Friend/Family member	8	22
5	3	School	0	0
11	7	WHRN	9	24
3	2	Other recruiter	2	5
44	29	Other	18	49
3	2	Did not answer	2	5



Lack of advertising was a common comment on several of the open-ended questions, specifically Questions 13, 14, 28, and 32 (53 combined comments). **NOTE:** ORH has not advertised outside of Wyoming due to budget constraints, but does try to place one ad in every Wyoming newspaper (\$10,000) during each application period.

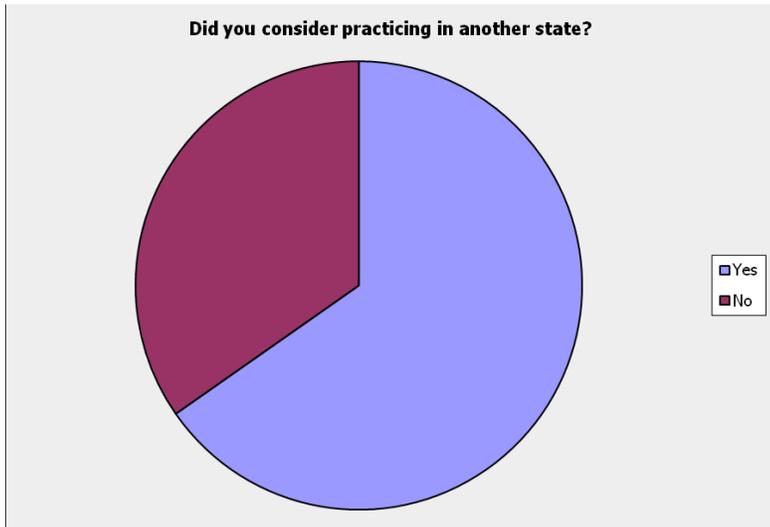
Word of mouth (Other and Friend/Family) was the primary way most participants found out about the Program.

Employer and co-worker tied for the most comments (15) under Other. **NOTE:** One focus of Wyoming Health Resources Network, Inc. (WHRN) is physician recruitment (WHRN also recruits Nurse Practitioners and Physician Assistants), and 24% of physicians learned of the Program from WHRN. WHRN is not involved in every physician hire in Wyoming, so this is a good indication of WHRN’s critical assistance in physician recruitment in Wyoming.

The number of responses is greater than the number of survey participants because survey participants were allowed to check one selection as well as the Other block (checking the Other block allowed respondent to provide comments).

“I love my job! But I know I could make more money in another state. Loan repayment was a big factor in staying in the community. It helped to even out the disparity.”

Question 12 asked participants if they considered practicing in another state; 65.3% said yes.



Border States Considered		
2010	State	2008
33	Colorado	22
29	Montana	22
16	Idaho	8
11	Utah	6
9	Nebraska	5
6	South Dakota	7

Thirty-seven states were considered as practice sites in the 2010 survey. The most common states considered were Washington (5), California and Oregon (4), and Florida, Minnesota, New Mexico, North Dakota, and Ohio (3).

“It is a great recruiting tool! With the high cost of medical education, it is what allows me to practice in the county where I grew up. It is the tool whereby healthcare providers with a passion for rural medicine can practice in areas where they are needed and suited.”

Other states considered prominently in the 2008 survey were Arizona and Washington (7 each).

Question 13 asked what ORH could do to attract more healthcare professionals to the counties with the most need. This generated 131 comments. The most frequent themes were:

- 1 Advertise (35 comments)
- 2 Continue to fund WHPLRP (33)
- 3 More money for more awards and options for additional years/money (31)

4 Assist with employment. These responses ranged from establishing/increasing residency/practicum sites to helping employers better understand desires of healthcare professionals looking for jobs. (11)

5 Tort Reform and Perks (9 comments each)

Adding comments from Questions 13 and 14 to continue WHPLRP, taxes, and more money to the comments for Tort reform and perks, reflects on an underlying issue: **working in rural areas is not as profitable as working in urban areas so all efforts to reduce losses assist with recruitment and retention.**

Question 14 asked what ORH could do to improve WHPLRP. This generated 129 comments. The most frequent themes were:

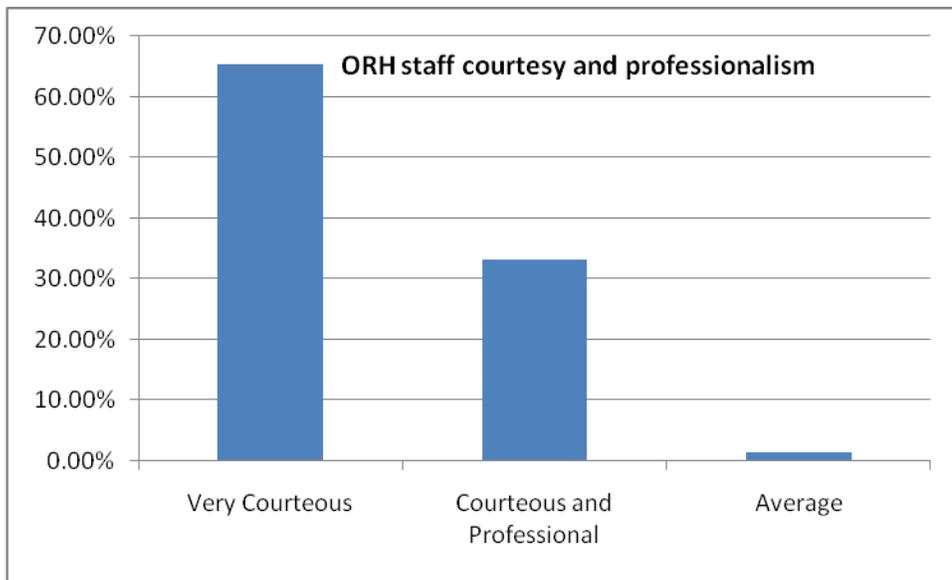
1 Improve the Program processes (24). Three comments recommended paying the loan companies directly every month to make the money tax free. **NOTE:** Many comments have already been addressed by ORH, such as making the process more electronic. The Wyoming government payment process prevents paying the lenders directly.

2 More money for more years (21)

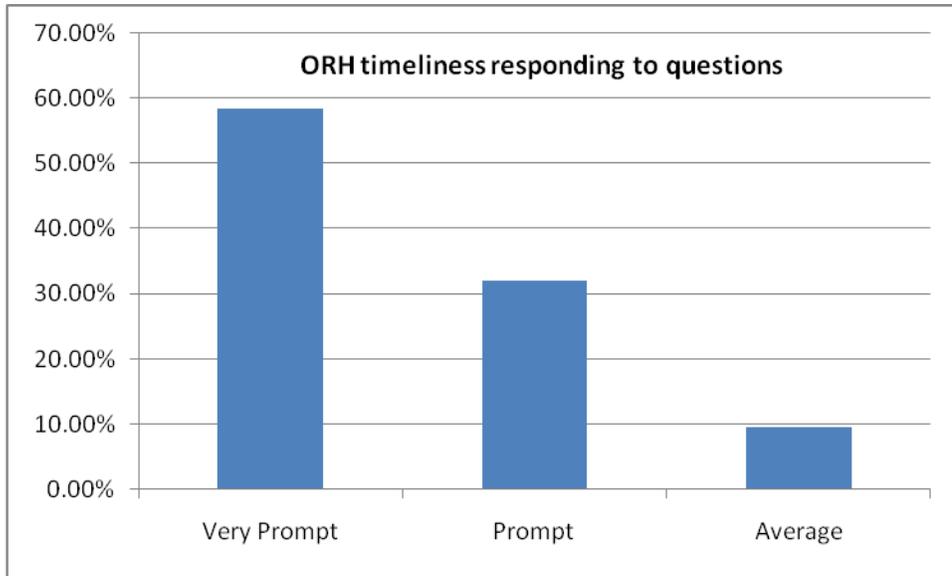
3 Make the money tax free (16). **NOTE:** The Healthcare Reform bill that was signed into law in March 2010 made all Program payments tax exempt effective December 31, 2008. All program participants paid in 2009 were notified and amended tax information was sent out in April 2010.

4 Continue WHPLRP (11)

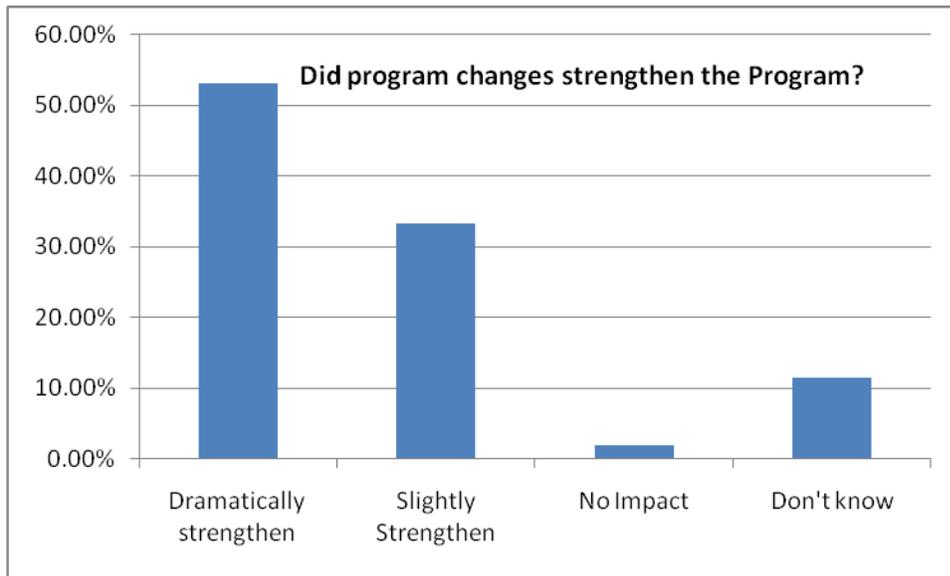
Question 15 asked participants to rate staff courtesy and professionalism; 65.3% said very courteous, 33.3% said courteous and professional, and 1.4% said average.



Question 16 asked participants to rate the timeliness of the Program in response to questions, contract issues, and general correspondence. Over 58% said very prompt, 32% said prompt, and 9.5% said average.

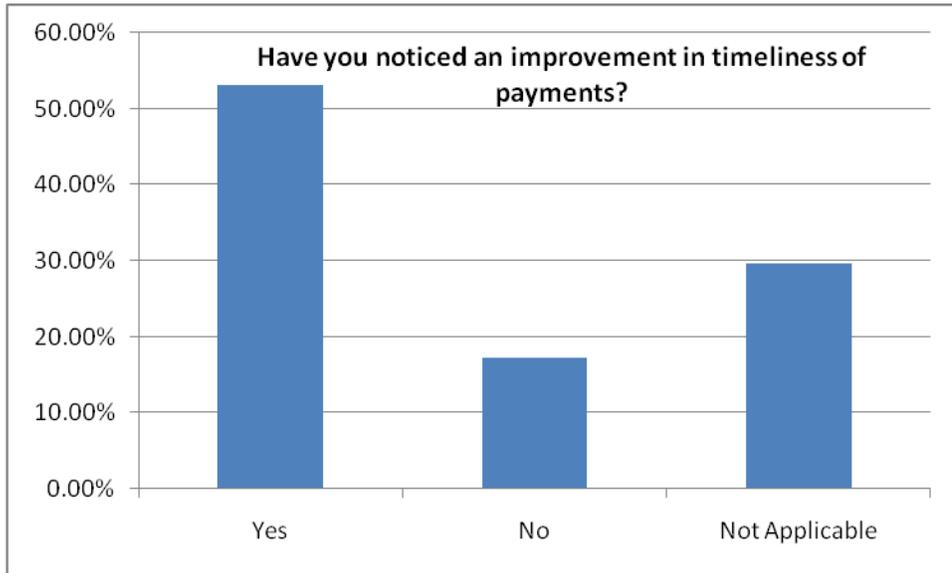


Question 17 asked if Program changes made as a result of the previous survey made an impact on the Program; 53.1% said it dramatically strengthened the Program, 33.3% said it strengthened the Program slightly, and 2% said it had no impact.



Question 18 asked if communication between participants and the Program was adequate; 98% said yes. **NOTE:** While 98% is a great response, ORH is considering opportunities to improve communication.

Question 19 asked if there had been an improvement in timeliness of Program payments; 53.1% said they had noticed improvement; 17.2% said they had not; and 29.7% stated not applicable. Of those who thought it applicable, 75% noted an improvement (77 of 102). Question 14 had 24 comments about WHPLRP process, and many of these suggested improvement in the timeliness of payments.



NOTE: The electronic application system and database implemented in 2008 identifies upcoming payments 60 days in advance, and the new fiscal manager in the Rural and Frontier Health Division developed a spreadsheet with all the recipients' payment schedules and payments made. This allows ORH staff to notify participants to submit documents required for payment. As a result, payments are much timelier than in the past.

Question 20 asked if participants had a good understanding of their requirements while participating in this Program; 96.5% said they did. **NOTE:** While this is a great response, ORH is considering opportunities to improve participant understanding.

“That it no longer requires a 25% employer match. Rural facilities often do not have the resources to meet that requirement. Removing that gives the window of opportunity for more professionals to apply.”

Question 21 asked how long participants had been practicing in Wyoming prior to applying for the Program.

All Professions N=145	%	How long had you been practicing in WY when you applied?	Physicians Only N=36	%
15	10	Did not practice in WY prior to applying	4	11
24	17	Less than one year	8	22
6	4	1 year	1	3
18	12	More than 1 year; less than 2	4	11
27	19	More than 2 years; less than 3	11	31
10	7	More than 3 years; less than 4	2	6
7	5	More than 4 years; less than 5	0	0
38	26	More than 5 years	6	17
5	3	Did not answer question	3	8

NOTE on the above table: 31% of the awards for all professions went to participants practicing in Wyoming one year or less (36% for physicians).

Sixty-two percent of the awards for all professions went to participants in their first three years in Wyoming. For physicians only, 78% of physician awards went to participants in their first three years of practice in Wyoming (highlighted in yellow on the previous table). The importance of this is documented by a *New England Journal of Medicine* December 2007 article that stated physicians were most likely to leave a practice in their first three years at that practice. If the physicians stay at least three years, they are more likely to remain long term. The majority of the remaining 38% who were practicing in Wyoming more than 3 years are in high need areas/professions where retention of those healthcare professionals is vital to healthcare delivery for Wyoming residents.

Responses from Registered Nurses are considerably different from all other groups participating in this survey. Less than 28% practiced in Wyoming three years or less at the time they applied; 55.6% were practicing in the state over five years. Eighteen nurses participated in the survey and identified the following communities as work sites: Laramie, Casper, Rawlins, Pinedale, Torrington, Rock Springs, Powell, Douglas, and Cody.

NOTE: Due to a lack of funding for advertising the Program, especially out-of-state, it is very understandable that healthcare professionals from outside Wyoming do not know about the Program. Advertising was mentioned as a Program weakness in 14 comments on Question 28, and in four general comments (Question 32). To address this, ORH is working closely with WHRN to promote the Program to physicians via various methods and events that WHRN is already performing or attending. ORH has developed brochures to send to colleges (both in and outside Wyoming) but still requires funding for advertising in media that targets healthcare professionals throughout the U.S.

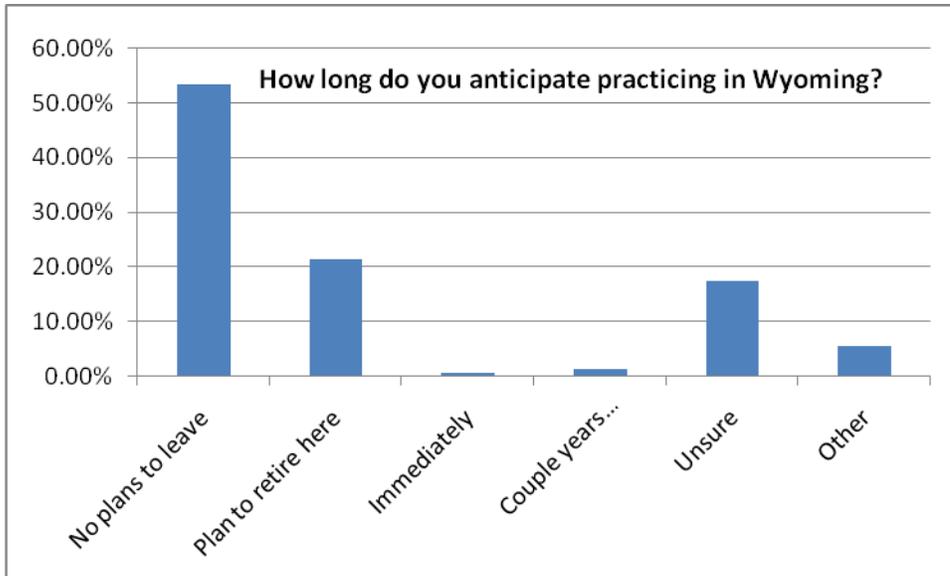
Every application period except the most recent (Fall 2008) required physicians and dentists to have 25% matching funds from an individual or group within their service area (sponsors from out of state were not allowed). This required the community to pay up to \$7,500 annually. A new physician or dentist's first action in town was to ask for funding and the match may have prevented a considerable number of physicians and dentists from choosing to practice in Wyoming. When the 25% community match was eliminated by legislative action in 2008, ORH noted an increase in physician and dentist applications of over 100%.

Question 23 asked participants how long after the application deadline did they receive their contract. Over 34% said 1-2 months; 43.1% said 3-6 months; and 22.6% said more than 6 months. **NOTE:** ORH identified this problem, and for the Fall 2008 application period, ORH implemented a new application and award process. The new process resulted in contracts being sent to selected applicants within two weeks of the close of the application period, despite a record number of applicants. This application and award process will continue once the Program is funded again. This response was not unexpected as 82% of all awards were made prior to the implementation of the new application system. This change was the basis for Question 17 in which 86% of responses said it improved the Program.

“It is the only thing that makes it economically feasible to attract new physicians to rural areas where the hours are long and the pay is not what they could make in metropolitan areas.”

Question 24 asked how long participants anticipate practicing in Wyoming. For all professions, 53.5% and 21.5% said they had no plans to leave, or planned to retire in Wyoming (75% combined). Three indicated they intended to leave once their obligation was complete (2%). For physicians only, 54.2% and 20% respectively, said they had no plans to leave, or planned to retire in Wyoming (74.2% combined); 17.3% said they were unsure and 5.5% said Other.

All Professions N=144	%	How long do you anticipate practicing in Wyoming?	Physicians only N=35	%
77	53	No plans to leave	19	54
31	22	Plan to retire here	7	20
1	1	The day my obligation is completed	1	3
2	1	Within a couple of years of my obligation being completed	1	3
25	17	Unsure	4	11
8	6	Other	3	9
6	4	Did not answer question	4	11



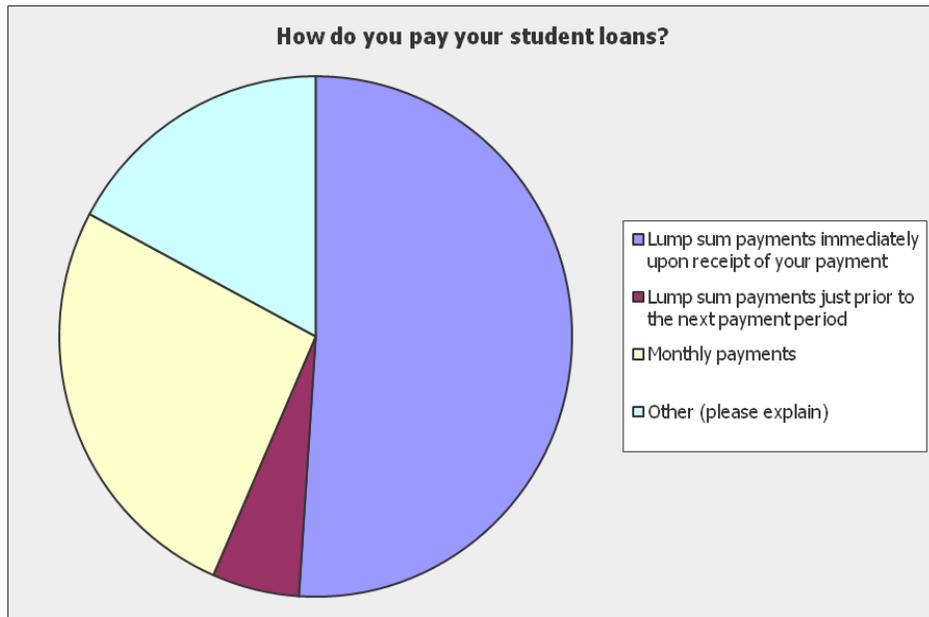
Comments on this question indicated those that said Unsure or Other based this upon their ability to provide for their families, satisfaction with their work environment (satisfaction with employer or co-workers were common comments), and considerations for better pay in other states. A comment from the survey that typifies this is: *“Tough call... the ability to continue to support my family is first and foremost. We want to remain in Wyoming, I'd like to retire here, but I will do what I have to do to support my kids.”*

Question 25 asked if participants were aware that new applicants no longer required community matching funds; 64.6% said no.

Question 26 asked if participants had spoken to other healthcare professionals about the Program; 85.5% said yes. Combining Questions 25, 26, and 11 (How did you find out about WHPLRP) together, one of our primary sources of information/advertising about the Program (co-workers) didn't know a vital new piece of information (no community match) and may have passed on misinformation. **NOTE:** ORH will seek opportunities to improve participants' knowledge of the Program in the future.

“In my case, the loan repayment program allowed me to not only remain in Wyoming to practice, but to start my own business and hire employees during an economic downturn. This only happened because all of my resources were not just going towards student loan payments.”

Question 27 asked how participants paid their student loans.

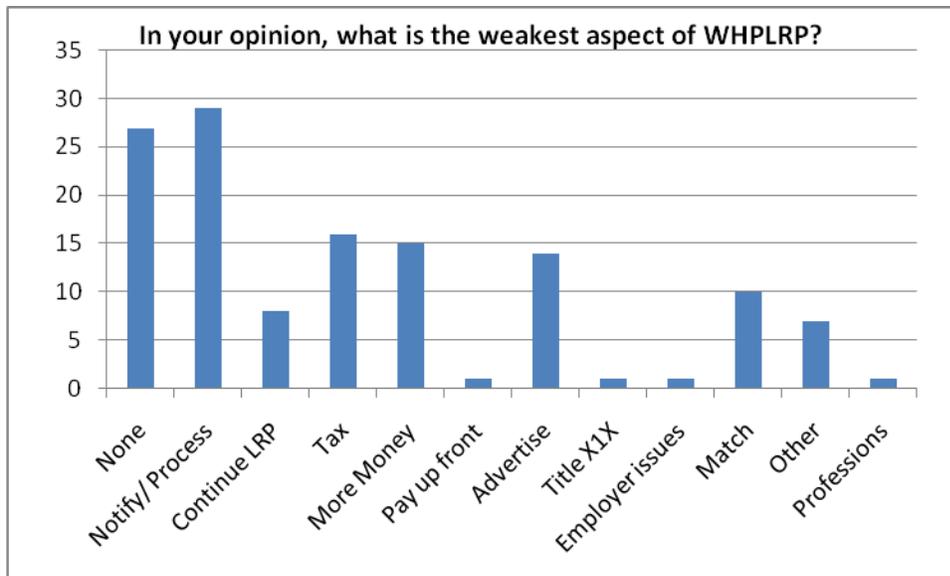


This question was asked due to ORH considering a policy that would require a particular payment method to make the Program easier to administer. However, the 25 comments and the various answers indicate allowing the participants to do what is best for them, while it may not be easier for Program administration, is in the Program’s best interest. Many of the comments indicated payments were made monthly and in lump sums to meet the participants loan requirements and the Program’s requirements. **NOTE:** The statute and Rules only require that proof of payment to the loan company be supplied to ORH prior to the subsequent payment being made, and all these payment options meet the requirement.

Question 28 asked what was the weakest aspect of WHPLRP. There were 114 comments; the most frequent themes were:

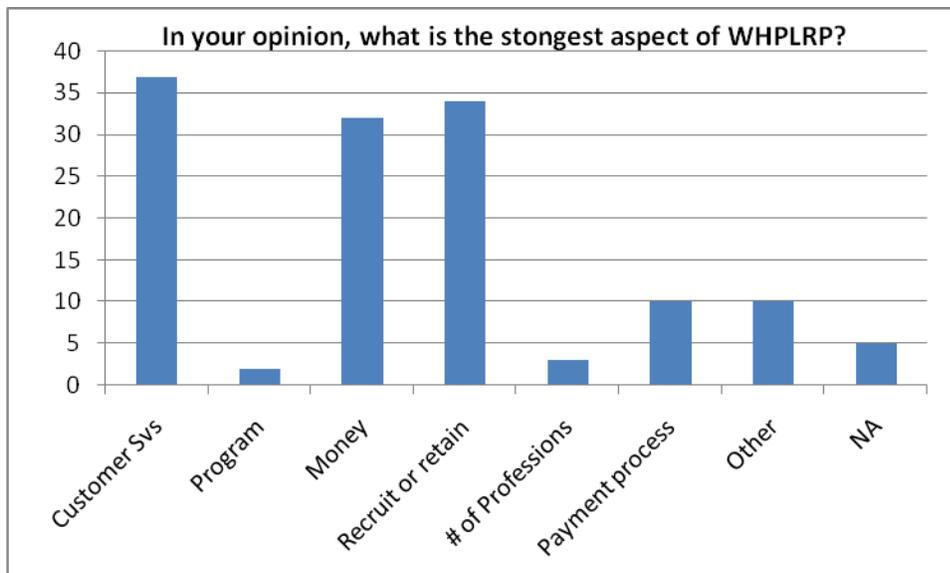
- 1 WHPLRP notification timeliness/processes (29)
- 2 WHPLRP awards are taxed by the federal government (16)
- 3 WHPLRP needs more money to make more awards and lengthen contracts for those already in the Program serving in highest need areas/professions (15)
- 4 WHPLRP needs to advertise more (14)

“Flexibility in your options of where to practice, ease of application process (have you SEEN NHSC’s application????)”



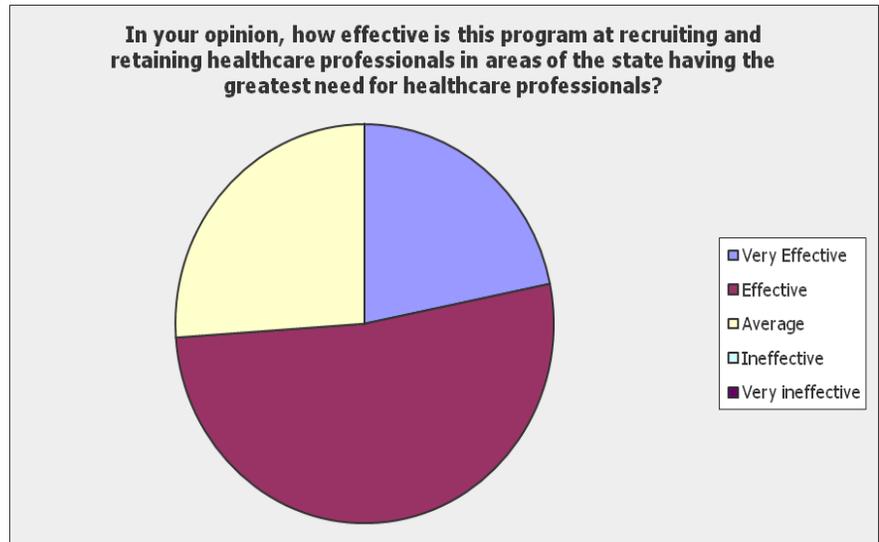
Question 29 asked what was the strongest aspect of WHPLRP. There were 117 comments; the most frequent themes were:

- 1** Customer Service (37)
- 2** WHPLRP helps recruit and retain healthcare professionals (34)
- 3** The money helped reduce their debt (32)



Question 30 asked if WHPLRP was effective in enhancing the ability of underserved Wyoming communities to recruit and retain healthcare professionals. Over 85% said it was very effective (33.8%) or effective (51.4%).

Question 31 asked how effective the Program was at recruiting and retaining healthcare professionals in areas of the state having the greatest need for healthcare professionals; 73.9% said very effective (21.8%) or effective (52.1%).



Question 32 allowed participants to make additional comments about WHPLRP. There were 49 comments; the most frequent themes were:

- 1 WHPLRP helps recruit and retain healthcare professions (13)
- 2 Continue the Program (9)
- 3 More money for more years (7)

Conclusions

The Program is critical to resolving Wyoming's need for healthcare professionals as all states bordering Wyoming have healthcare loan repayment programs (Colorado has several different programs; Utah, like Wyoming, was not funded in 2009). The Program impacts both recruitment and retention of healthcare professionals. Without it, Wyoming would become less competitive with neighboring states that were considered as practice sites by 65% of survey participants.

A consistent and adequate funding level each biennium is needed for healthcare professionals and Wyoming communities to communicate better with each other during the recruiting process. Funding for the 2009-2010 biennium was minimal, and left qualified professionals in high need areas unable to participate in the Program. ORH will evaluate the Program and define an adequate funding level.

Funding for advertising, both in-state and out, is needed to provide a greater impact on recruitment and emphasize the areas of greatest need for the Program to better meet Wyoming's

needs. Yet investing a great deal of time and money to promote/advertise the Program without an adequate budget is not wise stewardship of state dollars.

ORH Take-a-Ways

ORH needs to educate healthcare professionals on various programs that provide loan repayment opportunities, especially National Health Service Corps and Nurse Education Loan Repayment programs.

ORH needs to improve advertising for the Program, especially to students and professionals not practicing in Wyoming. While this is extremely difficult without funding, ORH needs to address this to increase the Program's impact on recruiting, especially in areas of greatest need.

Customer service and communication are very strong. A few comments indicated this could be improved. Additionally, participants are a primary source of information on the Program; ORH needs to ensure they are well informed of current processes and procedures as well as changes to the Program.

“This program has made a huge difference in my decision to stay in Wyoming. I love Wyoming but financially, at one time, was looking at leaving. I appreciate the program tremendously.”

Programmatic changes already incorporated by ORH are appreciated by participants.

ORH needs to work with employers and communities on retention of healthcare professionals. Sponsor site and employer issues were mentioned in numerous comments. A negative work environment negates monetary incentive to continue practicing in Wyoming.

ORH must educate policy makers on opportunities to improve the Program's impact on recruitment. The Program, with its current structure and lack of an advertising budget, has greater impact on retention than recruitment. The inability to advertise nationally or regionally has a considerable negative impact on the Program's ability to recruit healthcare professionals from outside Wyoming. Elimination of the community matching funds requirement and allowing the Program to be used as an additional incentive in the Physician Recruitment Grant Program are steps in the right direction for recruitment.