

## Maryland Higher Education Commission

### HEALTH PERSONNEL SHORTAGE INCENTIVE GRANT

#### FY 2016 Request for Applications



#### Introduction

The Health Personnel Shortage Incentive Grant, established in the Annotated Code of Maryland, Education Article §18–803, is funded through a portion of the fees collected by the Board of Physicians. This formula based grant program, which is managed by the Maryland Higher Education Commission (MHEC), provides funds to Maryland postsecondary education institutions to enhance or expand academic programs that produce graduates eligible for national licensure, certification, or registration in health personnel shortage areas certified by the Maryland Department of Health and Mental Hygiene (DHMH). Per statute, an eligible institution may obtain a grant in the amount of \$1,500 per graduate based on the following computation: Number of current graduates (FY 2015) less the number of graduates from lowest graduate output year greater than zero commencing in FY 1991. Graduation numbers are based on the data provided to MHEC via the annual Degree Information System (DIS) data collection. If there are insufficient funds to award the full \$1,500 per graduate, the per graduate award amount is prorated based on available funding.

#### Eligible Institutions

In accordance with the Annotated Code of Maryland, Education Article, §18-803, an institution may participate in the grant if:

- 1) the institution is approved to operate by the Maryland Higher Education Commission;
- 2) offers one or more education programs that produce graduates as described above;  
and
- 3) has funded the program producing graduates at a level no less than the preceding fiscal year.

#### Eligible Academic Programs

Academic programs are eligible for grant funds if they have been approved to operate by the Maryland Higher Education Commission, and produce graduates eligible to sit for the appropriate national examination for certification, licensure, or registration in one of the current shortage areas identified by DHMH.

DHMH certified the following health personnel shortage areas for the FY 2016 disbursement of the HPSIG funds.

Physical Therapist  
Medical & Clinical Laboratory Technician  
Medical & Clinical Laboratory Technologist  
Licensed Practical Nurse  
General & Family Medicine Physician (Code 12)  
Pediatrics (Code 38)

### Grant Schedule

Request for Application (RFA) Issued	December 17, 2015
Applications Due	February 1, 2016
Preliminary Notification of Award	March 1, 2016
Grant Begins	March 1, 2016
Full Payment Issued (after graduate verification)	March 2016
Interim Report Due	November 1, 2016
Grant End Date	February 28, 2017
Final Report Due	May 31, 2017

A one-time no cost six-month extension may be approved if justified. A request for extension must be submitted in writing one month prior to the grant end date.

**APPLICATION DUE DATE: February 1, 2016 by 4:00 P.M.**

Submit electronic copy to: [priscilla.moore@maryland.gov](mailto:priscilla.moore@maryland.gov)

Submit one signed original and two paper copies to:

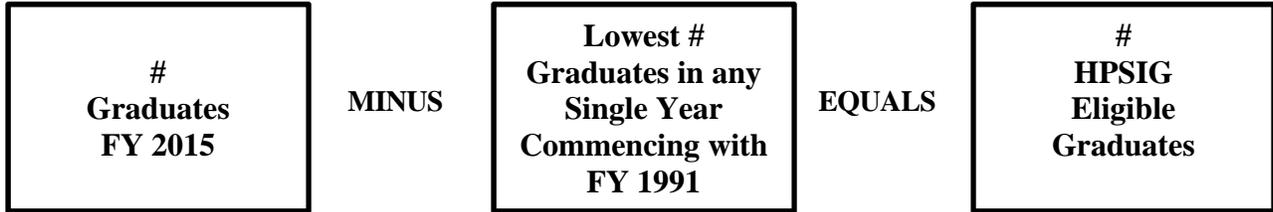
Priscilla Moore, HPSIG Coordinator  
Office of Outreach and Grants Management  
Maryland Higher Education Commission  
6 N. Liberty Street, 10<sup>th</sup> Floor,  
Baltimore, MD 21201

### Award Amount

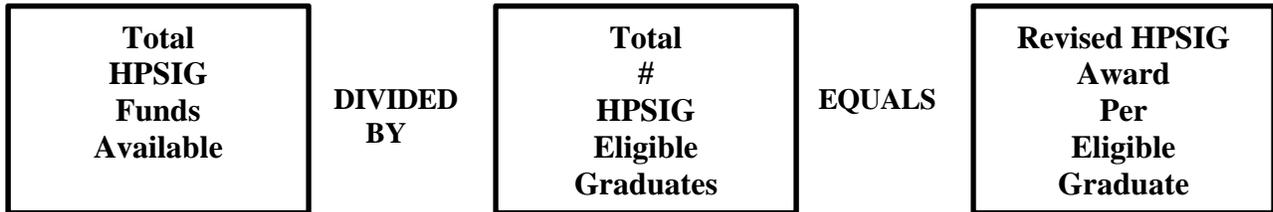
HPSIG is a formula based award made to institutions to enhance or expand eligible academic programs. The total institutional award is the sum of all funds calculated per applicant program per eligible graduate up to \$1,500 per eligible graduate. Generally, funds must be expended by each academic program in the amount awarded for graduates in that program and may not be transferred for other programs. Questions about spending authority should be directed to the HPSIG Coordinator.

For a given academic program, the award is based on eligible graduates. The number of eligible graduates is computed as demonstrated in the diagrams below. The base fiscal year is the year commencing with FY 1991 that the academic program had the lowest number of program graduates greater than zero.

The maximum grant is \$1,500 per eligible graduate.



If sufficient funds are not available to fully fund all approved academic programs, the grant allocation is prorated as follows:



**Funding is contingent upon the availability of funds.**

### **Allowable Expenditures**

Funds are to be used to enhance or expand approved shortage area academic programs. There is a wide range of allowable expenditures including recruitment of faculty, equipment purchases, capital expenses (e.g. computer lab wiring, conversion of classroom space), and any other reasonable expenditures that enhance or increase academic program capacity in order to produce more graduates in the desired fields. *Funds may not be used to support student scholarships or any other form of student financial aid.* If the awardee is uncertain whether the expenditure is allowable they should contact the HPSIG Coordinator for clarification.

### **Reporting Requirements**

Reports are required in accordance with the grant timetable indicated on page two.

The required interim report includes a narrative and budget report indicating the amount of funds expended, the nature of the expenditures, and how the expenditures to date contribute to enhancing or expanding the capacity of the academic programs served. The information provided by awardees will be incorporated in the annual legislative program report that is provided to the Governor and the Legislature.

A final report is due at the end of the grant period. All unexpended funds must be returned to MHEC at the time of the final report.

Any academic department awardee that has failed to submit a report from a prior HPSIG award may be excluded from new funding. Any grantee who has unexpended funds from a prior HPSIG award that has ended but that has not returned unexpended funds may be excluded from new funding.

## **Application Instructions**

The application for funding includes two parts: 1) an institutional cover page / request to participate, and 2) an academic program request to participate (one form completed per academic program fund application). The total application package is comprised of one institutional cover page/ request to participate and all the individual academic programs' requests to participate. Further application details are provided below.

### Institutional Cover Page/ Request to Participate

The cover page requires the signature, printed name, and title of an institution-wide academic official (Dean, Director or Provost as Applicable), chief executive officer, or an official designee of one of those officials. In addition, the cover page requires the signature and printed name of the institution's designated HPSIG grant program manager (e.g. grants office contact, academic department contact).

### Academic Program Request to Participate and Certification of Eligibility

Complete one academic program request per program. Please note that the data reported in this part of the application should be drawn from data submitted to the MHEC Degree Information System and may be audited by MHEC staff upon receipt of application.

Documentation must be submitted verifying that the graduates of the programs indicated are "eligible to take the appropriate national examination for licensure, certification, or registration in the relevant health occupation determined to be in short supply" (*Annotated Code of Maryland, Education Article §18-803*). Proof must be submitted that the program is currently accredited.

Applicants must certify that the institutional program level of funding is not less than in the preceding fiscal year, and that the funds will be used to enhance or expand the approved education program's receiving the funds.

Awards will be distributed after all submissions and data have been verified and award amounts computed by MHEC. Awardees should refer to the grant schedule on page two of this application package for due dates.



**Maryland Higher Education Commission**  
**HEALTH PERSONNEL SHORTAGE INCENTIVE GRANT**  
**FY 2016 Request for Applications**  
**ACADEMIC PROGRAM APPLICATION**



**ACADEMIC PROGRAM Request to Participate**  
 (complete one form per academic program)

Name of Institution:

Academic Program Name:

Program Chair:

Program Chair Email Address:

**Academic Program Number of Graduates**

Please provide the number of graduates for each of the items indicated below. These numbers should come from the institutional research data provided in the MHEC Degree Information System (DIS) submission. If the graduate numbers submitted in this application are different from what appears on the DIS report, the institution must attach an explanation for the difference. MHEC reserves the right to compute the award based on DIS submission data.

**Definitions**

**Base Fiscal Year** – the fiscal year with the fewest program graduates—but more than zero—commencing with FY 1991 (July 1, 1990 – June 30, 1991).

**Eligible Graduates** – the difference between the number of base year graduate minus the number of graduates in FY 2015 (July 1, 2014 – June 30, 2015).

**HPSIG Graduation Data**

Base Fiscal Year	
Number of Base Year Graduates	
Number of Graduates FY 2015	
Number of Eligible Graduates	

**Program Accreditation Required Documentation**

Indicate the national licensure, certification, or registration body governing the academic program for which funding is requested. Indicate the title of the license, certificate or registration associated with the degree program. Attach documentation verifying that the graduates of the above named program are eligible to take national examinations for licensure, certification, or registration in the health occupation determined to be in short supply by attaching proof that the program is nationally accredited. Attach proof of the programs current accreditation.

**Certification of Eligibility for Academic Program**

I certify that the above-named program is eligible for the Heath Personnel Shortage Incentive Grant Program. I further certify that the academic program applying is funded at an amount not less than the preceding fiscal year and that the grant funds will be used to enhance or expand approved education programs leading to licensure, certification, or registration in health occupations determined to be in short supply.

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Signature of Designated Official (Academic Dean or Financial Officer)

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Typed Name and Title of Designated Official

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Email Address

Telephone Number