Solicitation of Interest (SOI) # 20283

New York State Department of Health

Center for Health Care Policy and Resource Development, Division of Workforce Transformation

Nurses Across New York (NANY)

Questions and Responses

Q #	Category	Question	Responses
1		I am a Nurse Practitioner, working full time as an NP at a hospital XYZ in Brooklyn, NY. Do I qualify to participate in NANY Cycle 1, working as a NP (I have RN license as well)	Applicants must be working as Registered Nurses or Licensed Practical Nurses to qualify for this opportunity. Per the SOI Page 1, I. Introduction, "The New York State Nurses Across New York (NANY) initiative is designed to help train and place registered professional nurses (RN) licensed to practice under section sixty-nine hundred five of the education law and licensed practical nurses (LPN) licensed under section sixty-nine hundred six of the education law in underserved communities, in a variety of settings and specialties, to care for New York's diverse population." Please see page 2. Section II. Minimum Qualifications and the recently published Addendum #1.
2	Who May Apply	I am a FNP, does this count for loan repayment?	Applicants must be working as Registered Nurses or Licensed Practical Nurses to qualify for this opportunity. Per the SOI Page 1, I. Introduction, "The New York State Nurses Across New York (NANY) initiative is designed to help train and place registered professional nurses (RN) licensed to practice under section sixty-nine hundred five of the education law and licensed practical nurses (LPN) licensed under section sixty-nine hundred six of the education law in underserved communities, in a variety of settings and specialties, to care for New York's diverse population." Please see page 2. Section II. Minimum Qualifications
3	Who May Apply	Can we apply for a Nurse Practitioner? And if so, does the allocation of funding to newly licensed nurses apply to just their RN license or can it apply to their NP license?	Applicants must be working as Registered Nurses or Licensed Practical Nurses to qualify for this opportunity. Per the SOI Page 1, I. Introduction, "The New York State Nurses Across New York (NANY) initiative is designed to help train and place registered professional nurses (RN) licensed to practice under section sixty-nine hundred five of the education law and licensed practical nurses (LPN) licensed under section sixty-nine hundred six of the education law in underserved communities, in a variety of settings and specialties, to care for New York's diverse population." Please see page 2. Section II. Minimum Qualifications and the recently published Addendum #1.

4	TVV NA IVISV ANNIV I	Is a Nurse Practitioner eligible to participate? They have a nursing license and loan burden.	Applicants must be working as Registered Nurses or Licensed Practical Nurses to qualify for this opportunity. Per the SOI Page 1, I. Introduction, "The New York State Nurses Across New York (NANY) initiative is designed to help train and place registered professional nurses (RN) licensed to practice under section sixty-nine hundred five of the education law and licensed practical nurses (LPN) licensed under section sixty-nine hundred six of the education law in underserved communities, in a variety of settings and specialties, to care for New York's diverse population." Please see page 2. Section II. Minimum Qualifications and the recently published Addendum #1.
5	I WYDO IWAW ADDIW I	Are Nurse Practitioners eligible to benefit from NANY. Technically, they are Registered Nurses.	Applicants must be working as Registered Nurses or Licensed Practical Nurses to qualify for this opportunity. Per the SOI Page 1, I. Introduction, "The New York State Nurses Across New York (NANY) initiative is designed to help train and place registered professional nurses (RN) licensed to practice under section sixty-nine hundred five of the education law and licensed practical nurses (LPN) licensed under section sixty-nine hundred six of the education law in underserved communities, in a variety of settings and specialties, to care for New York's diverse population." Please see page 2. Section II. Minimum Qualifications, Nurses and Healthcare facilities that meet the criteria in this section are eligible to apply.
6	TVV NA IVISV ANNIV I	Is a Nurse Practitioner eligible to participate? They have a nursing license and loan burden.	Applicants must be working as Registered Nurses or Licensed Practical Nurses to qualify for this opportunity. Per the SOI Page 1, I. Introduction, "The New York State Nurses Across New York (NANY) initiative is designed to help train and place registered professional nurses (RN) licensed to practice under section sixty-nine hundred five of the education law and licensed practical nurses (LPN) licensed under section sixty-nine hundred six of the education law in underserved communities, in a variety of settings and specialties, to care for New York's diverse population." Please see page 2. Section II. Minimum Qualifications and the recently published Addendum #1.
7	Who May Apply	Hello, my name is XYZ and I am an FNP/RN working for XYZ in Canandaigua NY. I have a few questions pertaining to the NANY program. If I am working as a nurse practitioner for the hospital in the emergency department can I still apply for the tuition assistance program?	Applicants must be working as Registered Nurses or Licensed Practical Nurses to qualify for this opportunity. Per the SOI Page 1, I. Introduction, "The New York State Nurses Across New York (NANY) initiative is designed to help train and place registered professional nurses (RN) licensed to practice under section sixty-nine hundred five of the education law and licensed practical nurses (LPN) licensed under section sixty-nine hundred six of the education law in underserved communities, in a variety of settings and specialties, to care for New York's diverse population." Please see page 2. Section II. Minimum Qualifications and the recently published Addendum #1.
8	Who May Apply	Hello, my name is XYZ and I am an FNP/RN working for XYZ in Canandaigua NY. I have a few questions pertaining to the NANY program. Is there an increase to the student loan forgiveness amount for those working as nurse practitioners above the nursing max of 25,000?	Applicants must be working as Registered Nurses or Licensed Practical Nurses to qualify for this opportunity.
9	Who May Apply	Hello, my name is XYZ and I am an FNP/RN working for XYZ in Canandaigua NY.: If I leave the hospital that I am under contract for and go to another hospital that qualifies, do I not qualify or am I contractually obligated to pay the state for money that I did not receive?	Applicants must be working as Registered Nurses or Licensed Practical Nurses to qualify for this opportunity.

10	Who May Apply	Hello, my name is XYZ and I am an FNP/RN working for XYZ in Canandaigua NY. When the three year contract is completed how is the money dispersed? Do I receive 25k to place towards my student loans or does the hospital receive the money and issue it to me?	Applicants must be working as Registered Nurses or Licensed Practical Nurses to qualify for this opportunity.
11		I am interested in the NANY grant but I think I'm currently fulfilling my obligation for the primary care loan forgiveness round 4 (I think it ends in August) can I apply for the NANY this cycle?	Per the SOI Page 3, Section II. Minimum Qualifications A. Eligible Nurse Applicants #6, "The nurse must not be fulfilling an obligation under any local, state or federal government loan repayment program which overlaps or coincides with the three-year NANY service obligation (except the Public Service Loan Forgiveness Program). Nurses receiving employer sponsored loan repayment funds are eligible to apply."
12	Who May Apply	We are writing to inquire as to whether we are eligible to participate in this SOI. XYZ is a licensed Article 28 facility owned and operated by XYZ Corporation, a public benefit corporation and public board created by the legislature of the State of New York. You had indicated in your instructions that "a health care facility operated by any other New York State agency, other than SUNY, or by the federal government is not eligible under this SOI". We are not clear what your definition is of "state agency" and whether a public benefit corporation such as ours would be permitted to participate or not. Your attention to this is greatly appreciated.	Per the SOI page 4, Section II. Minimum Qualifications B. Eligible Health Care Facility Applicants, 1) The health care facility must be one of the following:  a. A general hospital, D&TC, or a nursing home licensed by the New York State Department of Health pursuant to PHL Article 28; □  b. A facility certified by the New York State Office of Mental Health pursuant to MHL Article 31;  c. A facility certified by the New York State Office of Alcoholism and Substance Abuse Services pursuant to MHL Article 32; or  d. A Certified Home Health Agency or Licensed Home Care Services Agency licensed by the New York State Department of Health pursuant to New York Codes Rules and Regulations, Volume E (Title 10) Subchapter C - State Hospital Code Article 7 / A Home Care Agency licensed by the New York State of Health pursuant to PHL Article 36;  e. A medical practice that is registered with the New York State Department of State as a PC or PLLC at the time of application.
13	Who May Apply	Please confirm that home care agencies (Article 36) can apply for the Nurses Across NY Loan Repayment Program. While this seems to be allowed in the SOI narrative, Article 36 agencies are omitted from Attachment 2, Part 1 (under type of applicant) and Part 3 (f).	Per the SOI page 4, Section II. Minimum Qualifications B. Eligible Health Care Facility Applicants, 1) The health care facility must be one of the following:  a. A general hospital, D&TC, or a nursing home licensed by the New York State Department of Health pursuant to PHL Article 28;  b. A facility certified by the New York State Office of Mental Health pursuant to MHL Article 31;  c. A facility certified by the New York State Office of Alcoholism and Substance Abuse Services pursuant to MHL Article 32; or  d. A Certified Home Health Agency or Licensed Home Care Services Agency licensed by the New York State Department of Health pursuant to New York Codes Rules and Regulations, Volume E (Title 10) Subchapter C - State Hospital Code Article 7 / A Home Care Agency licensed by the New York State of Health pursuant to PHL Article 36;  e. A medical practice that is registered with the New York State Department of State as a PC or PLLC at the time of application.

14	Who May Apply	My name is XYZ and I am the CFO & Co-Founder of XYZ staffing. I am writing to request if the agency who recruits International-Educated Nurses will be considered to submit the NANY CYCLE bid.  The mission of XYZ Staffing is to serve the need of United State Healthcare Nurse shortage by placing quality International-Educated nurses to meet the needs of our clients. Through our services we can help New York State with placing RNs and LPNs in medically underserved areas of the state for the three-year period commitment.  Kindly let me know if our organization can participate in NANY Cycle. If you would like to discuss further details, I can be reached at XYZ I look forward to hearing from you.	Per the SOI page 4, Section II. Minimum Qualifications B. Eligible Health Care Facility Applicants, 1) The health care facility must be one of the following: a. A general hospital, D&TC, or a nursing home licensed by the New York State Department of Health pursuant to PHL Article 28; □ b. A facility certified by the New York State Office of Mental Health pursuant to MHL Article 31; c. A facility certified by the New York State Office of Alcoholism and Substance Abuse Services pursuant to MHL Article 32; or d. A Certified Home Health Agency or Licensed Home Care Services Agency licensed by the New York State Department of Health pursuant to New York Codes Rules and Regulations, Volume E (Title 10) Subchapter C - State Hospital Code Article 7 / A Home Care Agency licensed by the New York State of Health pursuant to PHL Article 36 e. A medical practice that is registered with the New York State Department of State as a PC or PLLC at the time of application.
15	Who May Apply	Does a Nurse Educator position qualify or does the RN have to meet specific criteria to be eligible?	Per the SOI page 4, Section II. Minimum qualifications A. Eligible Nurse Applicants #9.
16	Who May Apply	I am a nurse working in NYC and have been working in the time period specified. How do I find out if I qualify?	Individual nurse applicants must meet all of the mandatory requirements listed on pages 2-4, in Section II. Minimum Qualifications A. Eligible Nurse Applicants #1-11.
17	Who May Apply	Do I have to be currently employed to apply? I am just ending maternity leave and applying for a new position.	Per the SOI page 4, section II. Minimum Qualifications A. Eligible Nurse Applicants #10.
18	Who May Apply	I am a nurse that has been doing a local contract in my upstate NY area and prior to this I was traveling in upstate NY to a state hospital. I am wondering if I qualify for this program as I have been in these areas of needs for the past 9yrs.	Per the SOI page 3, Section II. Minimum Qualifications A. Eligible Nurse Applicants #7.
19	Who May Apply	I'm an employee of XYZ RN working here since 2017. Would I be eligible for student loan repayment through the program? I plan on continuing to work here as long as possible.	If you are an individual nurse applicant, in order to be eligible for the NANY grant, you must meet all of the mandatory requirements listed on pages 2-4, in Section II. Minimum Qualifications A. Eligible Nurse Applicants (# 1-11).

20	Who May Apply	I have a question regarding the eligible site types for the Nurses Across New York LRP. Is an LLC considered the same as a PLLC for this program. The site I am inquiring about is XYZ Oswego, NY - it is a limited liability corporation, but it is not listed as a professional limited liability corporation. Would this site be eligible? Any assistance you can provide would be greatly appreciated. Thank you!	No. Per the SOI page 4, Section II. Minimum Qualifications B. Eligible Health Care Facility Applicants, 1) The health care facility must be one of the following:  a. A general hospital, D&TC, or a nursing home licensed by the New York State Department of Health pursuant to PHL Article 28;  b. A facility certified by the New York State Office of Mental Health pursuant to MHL Article 31;  c. A facility certified by the New York State Office of Alcoholism and Substance Abuse Services pursuant to MHL Article 32; or  d. A Certified Home Health Agency or Licensed Home Care Services Agency licensed by the New York State Department of Health pursuant to New York Codes Rules and Regulations, Volume E (Title 10) Subchapter C - State Hospital Code Article 7 / A Home Care Agency licensed by the New York State of Health pursuant to PHL Article 36;  e. A medical practice that is registered with the New York State Department of State as a PC or PLLC at the time of application.  See Addendum #1.
21	Who May Apply	Can an outside agency apply for a NANY award on behalf of an eligible health care facility?	Health Care Facility must meet all of the mandatory requirements listed on pages 4-5, in Section II. Minimum Qualifications B. Eligible Health Care Facility Applicants #1-7.
22	Who May Apply	What is the benefit of an employer pursuing a NANY award for a nurse?	Please see the SOI page 1, Introduction Paragraph 1: The New York State Nurses Across New York (NANY) initiative is designed to help train and place registered professional nurses (RN) licensed to practice under section sixty-nine hundred five of the education law and licensed practical nurses (LPN) licensed under section sixty-nine hundred six of the education law in underserved communities, in a variety of settings and specialties, to care for New York's diverse population. The NANY Loan Repayment Program makes funds available to help recruit RNs and LPNs and encourage them to remain in medically underserved areas of the state. Funding is provided in exchange for a nurse's commitment to work in an underserved area for a three-year period (NANY service obligation period).
23	How to Apply		The Application can be found within Attachments 1-12 in the Solicitation of Interest (SOI). It is posted on both of the following websites: <a href="https://www.health.ny.gov/funding/soi/20283/">https://www.nyscr.ny.gov/funding/soi/20283/</a> <a href="https://www.nyscr.ny.gov/business/adsPubView.cfm?ID=FAE4B076-18B6-462F-BA64-9C1253161130">https://www.nyscr.ny.gov/business/adsPubView.cfm?ID=FAE4B076-18B6-462F-BA64-9C1253161130</a>
24	How to Apply	How do I apply? Can I request to be notified of exact application instructions and updates?	The Application can be found within Attachments 1-12 with the Solicitation of Interest (SOI). It is posted on both of the following websites:  https://www.health.ny.gov/funding/soi/20283/ https://www.nyscr.ny.gov/business/adsPubView.cfm?ID=FAE4B076-18B6-462F-BA64-9C1253161130

25	How to Apply	Please confirm the submission type of the RFP (Email / Hardcopy).	Per the SOI page 7, Section IV. How to Apply, You must submit ONE EMAIL with each required Attachment as its own pdf file attachment. Make sure to name each document accordingly (i.e., Attachment 1, Attachment 2). Applications must be submitted via email to NANY@health.ny.gov no later than 4:00 pm ET on the date and time posted on the cover of this SOI. Again, all application documents should be submitted together as attachments in ONE EMAIL.
26	How to Apply	How do I download attachment forms 1-12?	Per the SOI page 7, Section IV. How to Apply, You must submit ONE EMAIL with each required Attachment as its own pdf file attachment. Make sure to name each document accordingly (i.e., Attachment 1, Attachment 2). Applications must be submitted via email to NANY@health.ny.gov no later than 4:00 pm ET on the date and time posted on the cover of this SOI. Again, all application documents should be submitted together as attachments in ONE EMAIL.
27	How to Apply	I have the application filled out . I do not have access of scanner to email this . Is there alternative way to forward this ?	Per the SOI page 7, Section IV. How to Apply, You must submit ONE EMAIL with each required Attachment as its own pdf file attachment. Make sure to name each document accordingly (i.e., Attachment 1, Attachment 2). Applications must be submitted via email to NANY@health.ny.gov no later than 4:00 pm ET on the date and time posted on the cover of this SOI. Again, all application documents should be submitted together as attachments in ONE EMAIL.
28	Questions addressed by Attachment #1	I am a fulltime employee with the XYZ. I do not know how to answer questions #6 and #9 in Attachment 1.	Questions #6 and #9 in Attachment 1 please refer to the following: Page 3, Section II. Minimum Qualifications A. Eligible Nurse Applicants, #7 "A nurse who seeks a NANY award to repay educational debt must have an employment contract or offer letter with a health care facility requiring the nurse to provide services for at least the entire NANY service obligation period." As stated on page 4, in Section II. Minimum Qualifications, A. Eligible Nurse Applicants, #10, The date on which the nurse's employment contract begins must be no later than August 1, 2023. All applicants must complete Attachment 5 for the NANY grant consideration. This includes both a copy of the current Employment Contract or offer letter and an Addendum Letter and must be dually signed by the employer and the nurse applicant.
29	Questions addressed by Attachment #2	This question is in regard to Attachment 2: If I am applying as an individual nurse, am I my own contact?	If the applicant is an individual nurse, enter the contact information for that nurse
30	Questions addressed by	I am attempting to complete the application for the loan repayment program. The contract from my employer is for the term of 3 years, that needs to be signed by them and myself, correct? My employer thinks that the 3 year contract is supposed to be with NYS DOH.	All applicants must complete Attachment 5 for the NANY grant consideration. This includes both a copy of the current Employment Contract or Offer Letter and an Addendum Letter and must be dually signed by the employer and the nurse applicant.
31	Questions addressed by Attachment #5	If we currently have LPN's working for us, what letter would need to be submitted for them, their original employment letter or would you need a new more current one?	All applicants must complete Attachment 5 for the NANY grant consideration. This includes both a copy of the current Employment Contract or Offer Letter and an Addendum Letter and must be dually signed by the employer and the nurse applicant.

	Questions addressed by Attachment #5	What paperwork do you need stating a 3-year commitment?	All applicants must complete Attachment 5 for the NANY grant consideration. This includes both a copy of the current Employment Contract or Offer Letter and an Addendum Letter and must be dually signed by the employer and the nurse applicant.
33	Questions addressed by Attachment #6	I work for a FQHC in Buffalo NY. As an RN am I eligible for the Nurses Across NY Loan Repayment Plan?	The SOI requires that applicants use Attachment 6 of the SOI to demonstrate that a work location is in an underserved area. A nurse may apply if the facility is a HPSA at the time of the application.
34	Questions addressed by Attachment #6	Hello, is our hospital included for our nurses to be eligible for these funds? XYZ Hospital, Buffalo NY.	The SOI requires that applicants use Attachment 6 of the SOI to demonstrate that a work location is in an underserved area. A nurse may apply if the facility is a HPSA at the time of the application.
35	Questions addressed by Attachment #6	I have an employee who is inquiring about NANY information from my office. I reviewed Solicitation of Interest #20283 -Nurses Across New York Loan Repayment Program- Cycle I. Section 2 Minimum Qualifications #8 states "The health care facility or practice where the nurse will be employed must be located in an underserved area, as defined in Attachment 6 (Tool to Identify an Underserved Area) of this SOI." I ran our address and got the below "  Dental HPSA NO Mental Health HPSA No Primary Care HPSA No MUA/P No  I just want to confirm that our employees will not be eligible for NANY based on the fact that they do not meet criteria set forth by minimum qualification #8, thank you!	The SOI requires that applicants use Attachment 6 of the SOI to demonstrate that a work location is in an underserved area. A nurse may apply if the facility is a HPSA at the time of the application.
36		I received an email notice in regards to the NANY Loan Repayment Program. Our organization, XYZ by address is not in a medically underserved area, but parts of our service area are. We thought it was worth reaching out to see if this would qualify us as an employer, and how and/or what documentation you would need from our staff for support. We look forward to hearing from you. Thank you in advance	The SOI requires that applicants use Attachment 6 of the SOI to demonstrate that a work location is in an underserved area. A nurse may apply if the facility is a HPSA at the time of the application.

37	Questions addressed by	My question is regarding how the State is defining the service area for eligible Nurse Applicants. Per the RFA page 3 "8. The health care facility or practice where the nurse will be employed must be located in an underserved area, as defined in Attachment 6 (Tool to Identify an Underserved Area) of this SOI." Per Attachment 6, "Select Option A if: 2. The area or site where the nurse will be practicing is in, or serves one or more of the following". Please clarify does the nurse applicant need to practice in a clinical site that is a HRSA designated HPSA or MUA or MUP?, OR Does the nurse applicant need to serve patients who reside in zip codes that are HRSA designated HPSAs or MUAs or MUPs?	The SOI requires that applicants use Attachment 6 of the SOI to demonstrate that a work location is in an underserved area. A nurse may apply if the facility is a HPSA at the time of the application.
38	Questions addressed by	I am the nurse recruiter at XYZ Canandaigua, NY, Ontario County. I am trying to figure out if our hospital and physician practice nurses would qualify for the NANY Loan Repayment program. I did search the map and it states:  In a MUA/P: YES Service Area Name: XYZ ID: XXXXX I am looking for some clarification that our hospital would be eligible since it is in that location.	The SOI requires that applicants use Attachment 6 of the SOI to demonstrate that a work location is in an underserved area. A nurse may apply if the facility is a HPSA at the time of the application.
39	addressed by	We are very interested in having our nurses apply for this Nurses Across NY grant. When I entered our address XYZ, Brooklyn it said designation proposed for withdrawal. I would appreciate if you let me know if XYZ qualifies before I have our nurses take the time to fill out applications.	The SOI requires that applicants use Attachment 6 of the SOI to demonstrate that a work location is in an underserved area. A nurse may apply if the facility is a HPSA at the time of the application.
40	Questions addressed by Attachment #6	Can you please confirm that XYZ Hospital is in an underserved area or explained what proposed for withdrawal means?	The SOI requires that applicants use Attachment 6 of the SOI to demonstrate that a work location is in an underserved area. A nurse may apply if the facility is a HPSA at the time of the application.
	Questions addressed by Attachment #6	Facility vs. population served: If facilities that our nurses work for do NOT show up as qualifying but nurses regularly serve medically underserved populations, can that still count? Or does it go based on the facility that the nurse is affiliated with?	The SOI requires that applicants use Attachment 6 of the SOI to demonstrate that a work location is in an underserved area. A nurse may apply if the facility is a HPSA at the time of the application.
42	Questions addressed by Attachment #6	Home Health / Care nurses: If department HQ is located in a non-qualifying zip-code, but can attest to serving MUA/P, is that all that is necessary? Would like to confirm that the address of their department HQ will not effect the attestation.	The SOI requires that applicants use Attachment 6 of the SOI to demonstrate that a work location is in an underserved area. A nurse may apply if the facility is a HPSA at the time of the application.
43	Questions addressed by Attachment #6	Does XYZ Hospital in NYC qualify for the NANY program?	The SOI requires that applicants use Attachment 6 of the SOI to demonstrate that a work location is in an underserved area. A nurse may apply if the facility is a HPSA at the time of the application.
44	Questions addressed by Attachment #8	In regard to Attachment 8: Am I my own contact and am I signing that I am duly authorized to subscribe and submit this report on behalf of myself?	If the applicant is an individual nurse, enter the contact information for that nurse

	Questions addressed by Attachment #11	Can you tell me if the loan repayment amounts are taxable? My loans are on pause related to the pandemic. I do not get loan statements at this time. How would I submit current loans information? The federal loans were just transferred to Nelnet. Also can you send me the link for the application?	The SOI requires that applicants utilize Attachment 11 of the SOI to address tax questions. Please contact your loan service provider for current loan statements.
	Questions addressed by Attachment #11	Hello – the NANY Cycle I program states that approved employees can receive payments to repay student loan debt of up to \$25K over three years. How will these payments be taxed? Right now, our organization, XYZ, reimburses tax-free up to the IRS limit of \$5,250 for employees who successfully complete college courses. Will a similar tax-free limit be applied for these NANY payments? Also, if our own payroll makes the payments after receiving government funding, will instructions for taxation be supplied?	The SOI requires that applicants utilize Attachment 11 of the SOI to address tax questions.
47	Use of Funds	If the healthcare facility provides tuition reimbursements will that disqualify the nurse applicant?	Per the SOI page 6, Section III. A Use of Funds "Repaying qualified educational debt: For purposes of this SOI, "qualified educational debt" means any outstanding amounts remaining on student loans that were used by the nurse to pay tuition or related educational expenses, where such loans were made by or guaranteed by the federal or state government or made by a lending or educational institution approved under Title IV of the federal Higher Education Act."
48	Use of Funds	Can the application be used toward debt incurred in pursuit of advance nursing degree?	Applicants must be working as Registered Nurses or Licensed Practical Nurses to qualify for this opportunity. Per the SOI Page 1, I. Introduction, "The New York State Nurses Across New York (NANY) initiative is designed to help train and place registered professional nurses (RN) licensed to practice under section sixty-nine hundred five of the education law and licensed practical nurses (LPN) licensed under section sixty-nine hundred six of the education law in underserved communities, in a variety of settings and specialties, to care for New York's diverse population." Please see page 2. Section II. Minimum Qualifications.
49	Application Limits	Can an unlimited number of nurses complete the application on their own from the same facility? Or is each facility limited to 5 applicants regardless of who completed the application?	Per the SOI page 6, Section III. B. Application Limits #2 "No more than five applications will be accepted from a health care facility with the same operating certificate number or health care facility that is a medical practice with the same Department of State Identification Number. If a health care facility or employed nurse of that health care facility, in aggregate, submit more than five applications, the sixth award (and any subsequent awards) may be considered only if there are additional funds left over after all other eligible applications are funded."

50	Employment verification	Can the participant fulfill obligation for one "facility" number in a variety of different "sites"? What if we cannot predict what percentage of time will be performed in a variety of eligible sites in the next two years. (example is covering all of our Urgent Care locations – nurse assignment based on volume and staffing conditions, some seasonality and how to best serve our community.) Can we indicate an approximate apportionment of work? And are there consequences if the predicted apportionment is incorrect?	If the NANY grant contract is held by an individual, the individual can request a change in location during the NANY service obligation period. For a request to be considered, the Department must receive the request in writing prior to any action being taken to change locations. The new location must meet all the requirements under the SOI to be approved. The decision to permit a change of location will be solely at the discretion of the Department. If the nurse makes an unapproved change, the grant may fall into default. If the NANY grant contract is held by a health care facility, a change in location to another site owned by the health care facility is allowed. A change in site to a new or different health care facility is not allowed.
51	Employment verification	In Section III C: "a health care facility with the same operating certificate number or, in the case of a medical practice, the same NYS Department of State registration number". What is the "operating certificate number" or "NYS Department of State registration number"? Is it the Employer Identification Number (EIN) or Taxpayer Identification Number (TIN) or Sam.gov id or New York State Education Department(NYSED) ID (NY Professions online verification)? Which company document will contain this ID?	The New York State Department of Health (DOH), Office of Mental Health (OMH), and Office of Addiction Services and Supports (OASAS) operating certificate number or Department of State identification number pertains to a category of license issued by the state allowing a business to provide a particular type of service for a limited period of time. The operating certificate number and/or the Department of State registration number can be obtained from your employer's Administrative Office.
52	Employment verification	XYZ is a public facility, owned and operated by XYZ County. We provide offer letters to personnel (not typically dually signed) but do not use traditional "employment contracts". For nurse applicants, is the offer letter acceptable, together with addendum?	All applicants must complete Attachment 5 for the NANY grant consideration. This includes both a copy of the current Employment Contract or Offer Letter and an Addendum Letter and must be dually signed by the employer and the nurse.
53	Employment verification	If a nurse applicant uses an offer letter from a facility to satisfy the requirement, can the offer letter be dated for the date the program period begins for current per diem staff? (The employee commits to go full-time as of the date of the start of the program period, and an offer letter is sent proactively so they can still apply for the loan repayment by application deadline but have time to plan ahead and make appropriate adjustments to be full-time as of the August 1).	Per the SOI page 4, section II. Minimum qualifications A. Eligible Nurse Applicants # 9. The services that the nurse will provide under the employment contract or offer letter must constitute full time clinical practice. This is the equivalence of 40 hours of service (with a minimum of 32 clinical hours) per week for at least 45 weeks per year. The calculation of full time employment may also be based on working a minimum of 150 hours of service per month, for 12 months of the year. In addition, #10. The date on which the nurse's employment contract begins must be no later than August 1, 2023.
54	Employment obligation	What happens if during the 3 year commitment, the nurse goes out on maternity leave, FML, or is out due to a work injury?	It is the sole discretion of the Department to approve the deferment of a nurse's service obligation. For a request to be considered, the Department must receive the request in writing prior to any action being taken to change the service obligation. Per this SOI page 7, Section IV. How to Apply, Review and Award Process, Last paragraph "The Department of Health, acting at the discretion of the Commissioner of Health, reserves the right to postpone, change, or waive the service obligation and/or payment amounts in individual circumstances where there is a compelling need or hardship due to circumstances beyond the control of the Contractor which causes or is likely to cause the Contractor to default in the performance/completion of their service obligation under their contract."

55		If a healthcare facility is the applicant and the nurse leaves between years 1-3, is there a way to report that to the DOH so payments could be stopped?	The Department must receive notice in writing that a nurse has left their service obligation. As stated in Attachment #9, the most important thing to understand about default is the that the financial penalty is always assessed against the individual or organization that is a party to the NANY grant contract. Therefore, if the grantee is the health care facility, and the named nurse leaves prematurely (electively or is separated for cause), the health care institution is responsible for the repayment of the NANY grant and any/all default penalties.
56	obligation	Typically, nurses who work in a hospital setting work 3 12-hour shifts in a week for a total of 36 hours per week. The week may or may not be a calendar week (Sun-Sat). How closely will the healthcare facility need to monitor hours?	Per the SOI page 5, Section II. B. #5, "The services that the nurse will provide under the employment contract must constitute full time clinical practice. This is equivalent to 40 hours of service (with a minimum of 32 clinical hours) per week for at least 45 weeks per year. The calculation of full time employment may also be based on working a minimum of 150 hours of service per month, for 12 months of the year."
57	Awards	If the healthcare facility receives the maximum of \$25,000 for an RN, the first payment would be \$7,500, the second payment would be \$7,500 and the third would be \$10,000. Is this correct?	Per the SOI page 2, Section I. last paragraph, "Nurses shall be eligible for a loan repayment award to be determined by the Commissioner over a three-year period distributed as follows: thirty percent of total award for the first year; thirty percent of total award for the second year; and any unpaid balance of the total award not to exceed the maximum award amount for the third year."
58	Miscellaneous	I have a few questions regarding the subject mentioned Bid regarding Solicitation of Interest # 20283 Nurses Across New York New York State Department of Health. I would appreciate your assistance on the following queries: Is this a new initiative? If not, please provide the names of the current vendor(s) providing the services.	The Nurses Across New York Loan Repayment Program is a new initiative.
59	Miscellaneous	I have a few questions regarding the subject mentioned Bid regarding Solicitation of Interest # 20283 Nurses Across New York New York State Department of Health. I would appreciate your assistance on the following queries: Can you please let us know the previous spending of this contract?	The Nurses Across New York Loan Repayment Program is a new initiative.
60	Miscellaneous	I have a few questions regarding the subject mentioned Bid regarding Solicitation of Interest # 20283 Nurses Across New York New York State Department of Health. I would appreciate your assistance on the following queries: Please confirm if we can get the proposals or pricing of the incumbent(s).	The Nurses Across New York Loan Repayment Program is a new initiative.
61	Miscellaneous	I have a few questions regarding the subject mentioned Bid regarding Solicitation of Interest # 20283 Nurses Across New York New York State Department of Health. I would appreciate your assistance on the following queries: Are there any pain points or issues with the current vendor(s)?	The Nurses Across New York Loan Repayment Program is a new initiative.
62	Miscellaneous	I have a few questions regarding the subject mentioned Bid regarding Solicitation of Interest # 20283 Nurses Across New York New York State Department of Health. I would appreciate your assistance on the following queries: Please confirm the anticipated number of awards.	The Nurses Across New York Loan Repayment Program is a new initiative. The number of anticipated awards is unknown.

63	Miscellaneous	I am submitting a list of questions based on the NANY SOI #20283 Full-Time vs. Part-Time: On the document, it says full-time required. I would like to confirm that part-time is definitely not qualified for this loan?	Per the SOI page 4, Section II. Minimum Qualifications A. Eligible Nurse Applicants, #9 The services that the nurse will provide under the employment contract must constitute full time clinical practice. This is the equivalent to 40 hours of service (with a minimum of 32 clinical hours) per week for at least 45 weeks per year. The calculation of full time employment may also be based on working a minimum of 150 hours of service per month, for 12 months of the year.
64	Miscellaneous	Iradilirad from the amniovar to effect continuetion of amniovment dilring <-	An annual employment verification is required as part of the payment process if a nurse or health care facility is awarded a New York State Department of Health NANY contract.