

**New York State Department of Health
Office of Primary Care and Health Systems Management
Center for Health Care Policy and Resource Development
Division of Workforce Transformation**

Solicitation of Interest

Nurses Across New York Loan Repayment Program – Cycle 2

**ADDENDUM #1
July 25, 2024**

The following are official modifications, which are hereby incorporated into SOI # 20526. Deleted language appears in strikethrough (“xxx”) and added language appears in **red text**. The information contained in this amendment prevails over the original SOI language. Applicants should review all documents in their entirety to ensure all amended language and revised Attachments are incorporated and into their applications.

PLEASE NOTE: Those applicants who already submitted their program application and did not upload the Employment Attestation or another required attachment into the program application should email the completed document to NANY@health.ny.gov no later than 4:00 pm ET on the date and time posted on the cover of this Solicitation of Interest.

IV. How to Apply

The Nurses Across New York Cycle 2 program application is **electronic** and will be completed and submitted using a web-based platform called Alchemer. **For the purposes of this SOI and Alchemer, program application and survey have the same meaning.** Prior to completing the application, applicants must read all instructions as to what is needed to complete the Nurses Across New York Program application. Any required attachments must be completed, **signed** and ready to be uploaded where indicated throughout the **program** application. All program applications and attachments must be submitted electronically through Alchemer.

To access and complete the **electronic** application, applicants must:

1. Open the following link to access the program application:
<https://survey.alchemer.com/s3/7903229/Nurses-Across-New-York-Loan-Repayment-Program-Cycle-2-SOI-20526>
2. Complete all required questions (noted with an asterisk)
3. Upload required documents where indicated throughout the application
 - i. **All required attachments must be uploaded into the program application where indicated. These documents must be completed and signed, if applicable, prior to uploading.**
4. Click the “Submit” button at the end of the program application

Solicitation of Interest #20526

Applications will not be considered complete unless the applicant clicks the “Submit” button at the end of the electronic program application/survey. A summary page and confirmation page will appear on the screen once the program application is submitted.

It is the applicant’s responsibility to ensure that all materials included in the application have been properly prepared and submitted. While applicants will be able to save their progress during the application process, having the required documents ready to upload where indicated will be helpful and is strongly encouraged.

Required documents to be completed and uploaded into the application where indicated include:

- Employment Attestation – Attachment #3 (REQUIRED) – It is a requirement that this attachment be completed, signed by both the employer and the nurse, and uploaded into the program application where indicated in Section 3, Minimum Qualifications section of the program application.
- Loan Statements within 30 days of application submission (REQUIRED)
- Supporting documentation of a name change if name is different than what is on the loan statements (IF APPLICABLE)
- Nurse Applicant Employed by Certified Home Health Agency, Licensed Home Care Services Agency or Hospice Attestation- Attachment #2, Option C Only (IF APPLICABLE)
- Healthcare Facility Default & Nurse Responsibility – Attachment #4 (REQUIRED- FACILITY APPLICANTS ONLY)
- Promissory Note – Attachment #5 (REQUIRED- FACILITY APPLICANTS ONLY)
- Consent to Disclosure- Attachment #6 (REQUIRED)

For uploading, the allowable types include: png, gif, jpg, jpeg, doc, xls, docx, xlsx, pdf, txt, mov, mp3, mp4. Max file size: 50 MB

Sample Documents

The documents listed below are intended for the applicant to use as reference only. Attachment #1 should be reviewed to identify if the applicant’s facility or organization is located in a New York State rural town or county. Applicants will have the ability to choose that town or county, if applicable, within the program application. Attachment #3 outlines all the required information and language that must be included in the Employment Attestation. This Attestation will then be uploaded into the program application where indicated.

- **Attachment #1:** New York State Rural Counties and Towns (REFERENCE ONLY)
- **Attachment #3:** Employment Attestation (TEMPLATE ONLY)

Required Attachments

The following Attachments, if applicable, must be completed, signed and submitted in the

Solicitation of Interest #20526

Nurses Across New York application for this Solicitation of Interest. All Required Attachments must be completed, signed if applicable, and uploaded into the program application where indicated to have your application reviewed for a Nurses Across New York award.

- **Attachment #2:** Nurse Applicant Employed by Certified Home Health Agency, Licensed Home Care Services Agency or Hospice Attestation (IF APPLICABLE)
- **Attachment #4:** Healthcare Facility Default & Nurse Responsibility (REQUIRED-FACILITY APPLICANTS ONLY)
- **Attachment #5:** Promissory Note (REQUIRED-FACILITY APPLICANTS ONLY- must be notarized)
- **Attachment #6:** Consent to Disclosure (REQUIRED)

Best practice is that complete applications be submitted as soon as practicable and up to five days prior to the deadline to avoid technical issues. The application consists of the electronic program application using the Alchemer web-based platform and the required attachments. Each attachment must be its own separate document and named accordingly. These attachments must be **completed, signed and** uploaded into the program application where indicated. Applications must be submitted electronically using the **Alchemer Program Application Link: <https://survey.alchemer.com/s3/7903229/Nurses-Across-New-York-Loan-Repayment-Program-Cycle-2-SOI-20526>** no later than 4:00 pm ET on the date and time posted on the cover of this Solicitation of Interest.

**New York State Department of Health
Office of Primary Care and Health Systems Management
Center for Health Care Policy and Resource Development
Division of Workforce Transformation**

Title: Solicitation of Interest #20526 – Nurses Across New York Loan Repayment Program – Cycle 2

Agency: Health, New York State Department of Health/Center for Health Care Policy and Resource Development/Division of Workforce Transformation

Contract Number: TBD

Contract Term: January 1, 2025 – December 31, 2027

Date of Issue: July 10, 2024

Questions Due: July 24, 2024, prior to 4:00 PM

Answers Posted: August 7, 2024 (on or about)

Due Date/Time: August 22, 2024, prior to 4:00PM

County(ies): Statewide

Location: Statewide

Classification: Medical & Health Care

Opportunity Type: Grant or notice of funds availability

I. Introduction

The New York State Nurses Across New York initiative is designed to place registered professional nurses and licensed practical nurses in underserved communities, in a variety of settings and specialties, to care for New York’s diverse population. The Nurses Across New York Loan Repayment Program makes funds available to help recruit and retain registered nurses and licensed practical nurses and encourage them to serve 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.

A procurement for loan repayment programs will be issued for Registered Nurses and Licensed Practical Nurses who work at facilities operated or licensed by the Department of Corrections and Community Supervision, the Office of Addiction Services and Supports, the Office of Children and Family Services, the Office of Mental Health, and the Office for People with Developmental Disabilities.

This Solicitation of Interest seeks to address the nursing shortage and is the second funding opportunity

issued by the New York State Department of Health for the Nurses Across New York Loan Repayment Program. Each new funding opportunity is defined as a new cycle. This Solicitation of Interest application process will be referenced herein as Cycle 2. Cycle 2 awards will provide up to: (1) \$25,000 for a registered nurse or (2) \$10,000 for a licensed practical nurse who agrees to practice in an underserved area for the three-year Nurses Across New York service obligation period. The Nurses Across New York service obligation period is defined as the total service (full time provision of direct patient care) that an individual agrees to serve upon accepting a Nurses Across New York Loan Repayment grant award contract. A maximum of \$3 million is currently available under this Solicitation of Interest. It is expected that eighty (80) percent of the funding will be awarded to registered nurses and twenty (20) percent of the funding will be awarded to licensed practical nurses. Distribution of funding may be amended based on the pool of applications received. If additional funds become available, the New York State Department of Health may make additional awards to qualified applicants until funding is exhausted.

Pursuant to Public Health Law § 2807-AA, Nurses Across New York funds can be awarded to: (1) registered professional nurses licensed to practice under section sixty-nine hundred five of the education law and licensed practical nurses licensed under section sixty-nine hundred six of the education law; or (2) a health care facility or organization to recruit or retain a nurse by providing the nurse funds to repay outstanding qualifying educational debt. In all cases, 100 percent of the funds ultimately must be distributed to the nurse.

Nurses shall be eligible for a loan repayment award to be determined by the Commissioner of Health 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.

The allocation of funding is anticipated to be as follows:

1. Approximately 50 percent of funding will be allocated to newly licensed nurses (i.e., those that have been licensed for two years or less).
2. Approximately 50 percent of funding will be allocated to nurses who have been licensed two to five years.
3. Nurses licensed for five or more years may be eligible if funding is available after initial awards are made.

II. Minimum Qualifications

Nurses and health care facilities and organizations must meet the criteria set forth below to be eligible to apply for the Nurses Across New York funding through this Solicitation of Interest. **Nurse practitioners are not eligible for this Solicitation of Interest.**

A. Eligible Nurse Applicants

A nurse is eligible for a Nurses Across New York award for the period January 1, 2025 through December 31, 2027 to repay qualified educational debt if the following requirements are met:

1. The nurse must be a citizen of the United States or a permanent resident alien holding an I-155 or

I-551 card.

2. By the time the three-year Nurses Across New York service obligation begins, the nurse must be licensed and in good standing by the New York State Education Department to practice as:
 - A registered nurse licensed to practice under section sixty-nine hundred five of the education law; or
 - A licensed practical nurse licensed under section sixty-nine hundred six of the education law.
3. The nurse must not be in breach of a health professional service obligation to the federal government, any state government, or a local government.
4. The nurse must not have any judgment liens arising from debt to the federal or any state government.
5. The nurse must not be delinquent in child support payments.
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 Nurses Across New York service obligation. The exceptions are the participation in the Public Service Loan Forgiveness Program and individual nurses receiving employer sponsored loan repayment funds.
7. A nurse who seeks a Nurses Across New York award to repay educational debt must have an attestation from the health care facility or organization requiring the nurse to provide services for at least the entire Nurses Across New York service obligation period. For these purposes, a “health care facility or organization” means:
 - A general hospital, diagnostic and treatment center, or a nursing home licensed by the New York State Department of Health pursuant to Public Health Law Article 28;
 - A Certified Home Health Agency, Long Term Home Health Care Program or Licensed Home Care Services Agency licensed by the New York State Department of Health pursuant to Public Health Law Article 36.
 - A certified Hospice licensed by the New York State Department of Health pursuant to Public Health Law Article 40.
 - A medical practice that is registered with the New York State Department of State as a Professional Corporation or Professional Limited Liability Corporation at the time of application;
 - A hospital or nursing home operated by the New York State Department of Health, meaning Helen Hayes Hospital, the New York State Veterans Home at Batavia, the New York Veterans Home at Montrose, the New York State Veterans Home at Oxford, or the New York State Veterans Home at St. Albans;
 - A health care facility operated by the State University of New York;

- Federally funded non-for-profit health centers or clinics that serve medically underserved areas and populations (Federally Qualified Health Centers).

A nurse employed by a health care facility operated by the federal government is not eligible to apply under this Solicitation of Interest.

8. The health care facility, practice, or setting where the nurse will be employed must be located in an underserved area or primarily serve an underserved population. The United State Health Services Administration determines whether an area, population, or facility experiences a shortage of health care services. Each State in conjunction with the United State Health Services Administration follows a defined shortage designation process utilizing population data of individuals within a geographic region which has either a: large elderly population, a high infant mortality rate and/or a high level of poverty. These underserved areas are defined as a Health Professional Shortage Area (HPSA), a Medically Underserved Area (MUA), or a Medically Underserved Population (MUP). To identify if a facility or organization is located in an HPSA, MUA, or MUP, go to: <https://data.hrsa.gov/tools/shortage-area/by-address>. In addition, for purposes of this Solicitation of Interest, underserved areas also include rural areas, and a list of New York State rural counties and towns can be found on Attachment # 1 of this Solicitation of Interest. If the applicant is employed by a Certified Home Health Agency, Licensed Home Care Services Agency, or Hospice, an attestation (Attachment # 2) is required outlining required hours and population served.
9. The services that the nurse will provide under the service obligation must constitute full time direct clinical patient care and must be indicated as such in the attestation (Attachment # 3). The calculation of full-time employment is based on working a minimum of 144 hours of service per month for 12 months of the year providing direct clinical patient care. Time spent in “on-call” status shall not be applied toward the 144 hours.
10. The original start date of the nurse’s employment with the health care facility or organization which is required to be included in the employment attestation must be no later than January 1, 2025.
11. The start date of the nurse’s Nurses Across New York service obligation under this contract will be January 1, 2025.
12. The original employment start date, which is to be included on the employment attestation, must be no later than January 1, 2025. A nurse or facility applicant that applied for Cycle 1 but was disapproved, may submit a new application for consideration in Cycle 2. A facility applicant from Cycle 1 must identify the same nurse whose application was disapproved in Cycle 1 to be eligible to apply again for Cycle 2.

B. Eligible Health Care Facility/Organization Applicants

A health care facility or organization is eligible for a Nurses Across New York award for the period January 1, 2025 through December 31, 2027 to provide a nurse with funds to repay outstanding educational debt if the following requirements are met:

1. The health care facility or organization must be one of the following:

- A general hospital, diagnostic and treatment center, or a nursing home licensed by the New York State Department of Health pursuant to Public Health Law Article 28;
- A Certified Home Health Agency, Long Term Home Health Care Program or Licensed Home Care Services Agency licensed by the New York State Department of Health pursuant to Public Health Law Article 36;
- A certified Hospice licensed by the New York State Department of Health pursuant to Public Health Law Article 40;
- A medical practice that is registered with the New York State Department of State as a Professional Corporation or Professional Limited Liability Corporation at the time of application;
- A hospital or nursing home operated by the New York State Department of Health, meaning Helen Hayes Hospital, the New York State Veterans Home at Batavia, the New York Veterans Home at Montrose, the New York State Veterans Home at Oxford, or the New York State Veterans Home at St. Albans;
- A health care facility operated by the State University of New York;
- Federally funded non-for-profit health centers or clinics that serve medically underserved areas and populations (Federally Qualified Health Centers).

A note to Health Care Facility Applicants:

Health care facilities operated by the State University of New York including a hospital or nursing home operated by the New York State Department of Health, meaning Helen Hayes Hospital, the New York State Veterans Home at Batavia, the New York Veterans Home at Montrose, the New York State Veterans Home at Oxford, or the New York State Veterans Home at St. Albans can NOT apply for a Nurses Across New York award.

Nurses who work in the above referenced facilities ARE eligible to apply for a Nurses Across New York award DIRECTLY. Facilities, please provide this opportunity to eligible nursing staff and instruct eligible nursing staff to complete and submit applications as individual applicants according to the application instructions outlined in this Solicitation of Interest.

2. The health care facility, practice, or setting where the nurse will be employed must be located in an underserved area or primarily serve an underserved population. The United State Health Services Administration determines whether an area, population, or facility experiences a shortage of health care services. Each State in conjunction with the United State Health Services Administration follows a defined shortage designation process utilizing population data of individuals within a geographic region which has either a: large elderly population, a high infant mortality rate and/or a high level of poverty. These underserved areas are defined as a Health Professional Shortage Area (HPSA), a Medically Underserved Area (MUA), or a Medically Underserved Population (MUP).

To identify if a facility or organization is located in an HPSA, MUA, or MUP, go to: <https://data.hrsa.gov/tools/shortage-area/by-address>. In addition, for purposes of this Solicitation of Interest, underserved areas also include rural areas, and a list of New York State rural counties and towns can be found on Attachment # 1 of this Solicitation of Interest. If the applicant is employed by a Certified Home Health Agency, Licensed Home Care Services Agency, or Hospice, an attestation (Attachment # 2) is required outlining required hours and population served.

3. The health care facility or organization must complete an employment attestation (Attachment #3) requiring the nurse's provision of services for the Nurses Across New York service obligation period.
4. The nurse with whom the health care facility or organization has an employment attestation for the Nurses Across New York service obligation period must meet the following criteria:
 - a. The nurse must be a citizen of the United States or a permanent resident alien holding an I-155 or I-551 card.
 - b. The nurse must be a graduate of an accredited nursing school.
 - c. By the time the three-year Nurses Across New York service obligation begins, the nurse must be licensed and in good standing to practice as:
 - A registered nurse licensed to practice under section sixty-nine hundred five of the education law; or
 - A licensed practical nurse licensed under section sixty-nine hundred six of the education law.
 - d. The nurse must not be in breach of a health professional service obligation to the federal government, any state government, or a local government.
 - e. The nurse must not have any judgment liens arising from debt to the federal or any state government.
 - f. The nurse must not be delinquent in child support payments.
 - g. 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 Nurses Across New York service obligation. The exceptions are the participation in the Public Service Loan Forgiveness Program and individual nurses receiving employer sponsored loan repayment funds.
5. The services that the nurse will provide under the service obligation must constitute full time direct clinical patient care and must be indicated as such in the attestation (Attachment # 3). The calculation of full-time employment is based on working a minimum of 144 hours of service per month for 12 months of the year providing direct clinical patient care. Time spent in "on-call" status shall not be applied toward the 144 hours.
6. The original start date of the nurse's employment with the health care facility or organization which is required to be included in the employment attestation must be no later than January 1, 2025.

7. The start date of the nurse's Nurses Across New York service obligation under this contract will be January 1, 2025.
8. The original employment start date, which is to be included on the employment attestation, must be no later than January 1, 2025. A nurse or facility applicant that applied for Cycle 1 but was disapproved, may submit a new application for consideration in Cycle 2. A facility applicant from Cycle 1 must identify the same nurse whose application was disapproved in Cycle 1 to be eligible to apply again for Cycle 2.

III. Project Narrative

Funding for this project is contingent on the availability of state funds and the number of eligible applicants that respond to this Solicitation of Interest. Available funding to support this initiative will be limited to the amount(s) appropriated in the enacted state Fiscal Year budgets for this purpose. **This advertisement is not a guarantee or promise of funding.**

Department of Health staff will review responses to this solicitation in the order in which they are received. Eligible awardees will be selected on a first-come first-served basis if their response meets the requirements of the Solicitation of Interest. When funding has been depleted to a level such that an applicant's total requested funding amount cannot be met, the eligible awardee will be offered a reduced award amount. If the eligible awardee accepts that amount, no further awards will be made. If the eligible awardee declines that amount, the next eligible awardee will be offered an award until funds are completely exhausted.

A. Use of Funds

Nurses Across New York loan repayment funds can be awarded to: (1) a nurse to pay qualified educational debt; or (2) a health care facility or organization to help recruit and retain a nurse by providing that nurse funds to repay outstanding educational debt. In all cases, 100 percent of the funds must ultimately be distributed to the nurse. No facility/employer should reduce a nurse's compensation package because of receiving a Nurses Across New York grant contract. Accordingly, funding awarded under this Solicitation of Interest can be used only as follows:

1. Repaying qualified educational debt: For purposes of this Solicitation of Interest, "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. An applicant seeking to use Nurses Across New York funds for loan repayment must include educational loan statements dated no more than 30 days prior to submission. **These statements must be uploaded into the electronic Nurses Across New York program application where indicated.** Such statements will be forwarded to the New York State Higher Education Services Corporation to verify the existence and amount of qualified education debt. Applicants must give consent for the New York State Higher Education Services Corporation to disclose any loan information to the New York State Department of Health. **The nurse ultimately receiving award funds must complete Attachment #6 to give consent for HESC to disclose any loan information to the Department.**

The Nurses Across New York grant contract shall NOT be made in excess of the outstanding amount of educational debt as verified by the New York State Higher Education Services Corporation. Where a Nurses Across New York award is made for this purpose, the nurse will be required to submit educational loan statements on an annual basis to ensure payments are being applied to the loans.

2. Helping health care facilities and organizations recruit or retain nurses: A Nurses Across New York grant contract made to a health care facility or organization can be used to provide one nurse, who must be identified in the application, with repayment of outstanding qualified educational debt. **In all cases, 100 percent of funding provided under the award must go to the nurse, who must apply the funds to the repayment of qualified educational debt.**

Please note: Awardees are not permitted to hold their Nurses Across New York grant contract payments in private accounts for an extended period of time. All contract disbursements must be applied to the pre-approved outstanding educational debt by the earlier of (a) the first date following grant disbursement upon which an installment payment is owed by the Awardee on the pre-approved educational debt, or (b) sixty (60) days after the date of the grant disbursement, whichever comes first. In any event, Awardees must provide the New York State Department of Health with proof of the application of the full amount of the grant disbursement to the pre-approved educational payment no later than sixty (60) days prior to the next scheduled grant disbursement. If you are not able or willing to apply these funds, you may be required to return all prior disbursements of grant funds not applied to the repayment of eligible student loan debt to the State. The New York State Department of Health will not be able to disburse any future funds until educational loan repayment statements verifying that prior funds have been applied are received.

B. Application Limits

1. **No more than one application will be accepted from a single nurse. If a nurse submits more than one application, only the application received first will be reviewed.**
2. No more than five (5) applications will be accepted from a health care facility or organization with the same operating certificate number or health care facility or organization that is a medical practice with the same Department of State Identification Number. If a health care facility or organization or employed nurse of that health care facility or organization, in aggregate, submit more than five (5) 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.

C. Award Limits

1. As required by Public Health Law § 2807-AA, one-third of funding awarded under this Solicitation of Interest must be allocated to nurses practicing in and health care facilities or organizations located in New York City (comprised of New York, Bronx, Kings, Queens, and Richmond counties) with the remaining two-thirds to individual nurses practicing in and health care facilities or organizations located in the rest of the state.
2. No more than five awards will be made to support a Nurses Across New York service obligation to be carried out at a health care facility or organization with the same operating certificate number or, in the case of a medical practice, the same New York State Department of State registration number, regardless of whether the applications were submitted by a nurses or health care facilities or

organizations. A sixth (and any subsequent awards) award may be considered only if there are additional funds left over after all other eligible applications are funded.

IV. How to Apply

Written questions will be accepted until 4:00 p.m. on July 24, 2024. All questions should be submitted electronically to the email address: NANY@health.ny.gov and with the subject line “Nurses Across New York Cycle 2 Question”. If any updates and/or clarification of information is warranted, information will be posted in the Contract Reporter under the tab “Documents” for this announcement as well as the New York State Department of Health website at the following address: <https://www.health.ny.gov/funding/soi/>. Responses to all questions received by July 24, 2024 will be posted on or about August 7, 2024.

For any technical questions regarding the Alchemer survey, please contact NANY@health.ny.gov

Late Applications Will Not Be Accepted.

The Nurses Across New York Cycle 2 program application will be completed and submitted using a web-based platform called Alchemer. Prior to completing the application, applicants must read all instructions as to what is needed to complete the Nurses Across New York Program application. Any required attachments must be completed and ready to be uploaded where indicated throughout the application.

To access and complete the application, applicants must:

1. Open the following link to access the program application:
<https://survey.alchemer.com/s3/7903229/Nurses-Across-New-York-Loan-Repayment-Program-Cycle-2-SOI-20526>
2. Complete all required questions (noted with an asterisk)
3. Upload required documents where indicated throughout the application
4. Click the “Submit” button at the end of the program application

It is the applicant’s responsibility to ensure that all materials included in the application have been properly prepared and submitted. While applicants will be able to save their progress during the application process, having the required documents ready to upload where indicated will be helpful and is strongly encouraged.

Required documents to be completed and uploaded into the application where indicated include:

- Employment Attestation – Attachment #3 (REQUIRED)
- Loan Statements within 30 days of application submission (REQUIRED)
- Supporting documentation of a name change if name is different than what is on the loan statements (IF APPLICABLE)
- Nurse Applicant Employed by Certified Home Health Agency, Licensed Home Care Services Agency or Hospice Attestation- Attachment #2, Option C Only (IF APPLICABLE)
- Healthcare Facility Default & Nurse Responsibility – Attachment #4 (REQUIRED- FACILITY APPLICANTS ONLY)
- Promissory Note – Attachment #5 (REQUIRED- FACILITY APPLICANTS ONLY)

- Consent to Disclosure- Attachment #6 (**REQUIRED**)

For uploading, the allowable types include: png, gif, jpg, jpeg, doc, xls, docx,xlsx, pdf, txt, mov, mp3, mp4. Max file size: 50 MB

Sample Documents

The documents listed below are intended for the applicant to use as reference only. Attachment #1 should be reviewed to identify if the applicant's facility or organization is located in a New York State rural town or county. Applicants will have the ability to choose that town or county, if applicable, within the program application. Attachment #3 outlines all the required information and language that must be included in the Employment Attestation. This Attestation will then be uploaded into the program application where indicated.

- **Attachment #1:** New York State Rural Counties and Towns (**REFERENCE ONLY**)
- **Attachment #3:** Employment Attestation (**TEMPLATE ONLY**)

Required Attachments

The following Attachments, if applicable, must be completed and submitted in the Nurses Across New York application for this Solicitation of Interest. All Required Attachments must be completed, signed if applicable, and uploaded into the program application where indicated to have your application reviewed for a Nurses Across New York award.

- **Attachment #2:** Nurse Applicant Employed by Certified Home Health Agency, Licensed Home Care Services Agency or Hospice Attestation (**IF APPLICABLE**)
- **Attachment #4:** Healthcare Facility Default & Nurse Responsibility (**REQUIRED-FACILITY APPLICANTS ONLY**)
- **Attachment #5:** Promissory Note (**REQUIRED-FACILITY APPLICANTS ONLY- must be notarized**)
- **Attachment #6:** Consent to Disclosure (**REQUIRED**)

Best practice is that complete applications be submitted as soon as practicable and up to five days prior to the deadline to avoid technical issues. The application consists of the electronic program application using the Alchemer web-based platform and the required attachments. Each attachment must be its own separate document and named accordingly. These attachments must be uploaded into the program application where indicated. Applications must be submitted electronically using the **Alchemer Program Application Link: <https://survey.alchemer.com/s3/7903229/Nurses-Across-New-York-Loan-Repayment-Program-Cycle-2-SOI-20526>** no later than 4:00 pm ET on the date and time posted on the cover of this Solicitation of Interest.

Review & Award Process

Applications meeting the guidelines and containing all mandatory Attachments will be reviewed and evaluated by the New York State Department of Health. Applications will be evaluated on a Pass/Fail

basis.

Department of Health staff will review applications in the order in which they are received.

The New York State Department of Health will notify an applicant by e-mail if the application process is complete or incomplete. If the application process is complete, no further action by the applicant is needed. If the application process is incomplete, the New York State Department of Health will provide the applicant a list of outstanding items. The applicant will have one opportunity to supply the missing information within ten (10) calendar days of being notified by the New York State Department of Health via email. All missing information must be emailed to: NANY@health.ny.gov. If the applicant fails to respond to the missing information request within this period, the application will not be processed any further and will not be funded. Therefore, it is advantageous to submit a complete application and to respond to the New York State Department of Health's email regarding any omissions as soon as possible. The due date will be clearly stated in the communication from the New York State Department of Health advising that the application is incomplete. No additional information will be accepted after this due date.

A complete application does not guarantee that the Applicant will be awarded funding.

The pool of complete and eligible applications will be awarded in order of the date and time of receipt of initial application according to the funding allocations established in the paragraph below until available funding is exhausted for that region or provider category. When funding has been depleted to a level such that an applicant's total requested funding amount cannot be met, the applicant will be offered a reduced award amount. If the applicant accepts that amount, no further awards will be made. If the applicant declines that amount, the next eligible applicant will be offered an award until funds are completely exhausted. The New York State Department of Health reserves the right to allocate funding in ways to best serve the interests of the state.

As required by Public Health Law § 2807-AA, funding shall be allocated regionally with one-third of available funds going to applicants who will fulfill their Nurses Across New York service obligation in New York City and two-thirds of available funds going to applicants who will perform their Nurses Across New York service obligations in the rest of the state.

The New York State 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.

The New York State Department of Health anticipates that awards will be announced in the Fall of 2024. Awardees will have a Nurses Across New York contract start date of January 1, 2025.

Contact Information: Erin Fay
New York State Department of Health
Division of Workforce Transformation
Empire State Plaza, Corning Tower Room 1695
NANY@health.ny.gov