

Application Instructions Doctors Across New York (DANY) Physician Practice Support (PPS) and Physician Loan Repayment (PLR) Programs

General Eligibility

A physician is eligible for this program ONLY if ALL 8 of the following pertain:

1. A U.S. citizen or permanent resident alien holding an I-155 or I-551 card;
2. Licensed to practice in New York State by the time the service obligation begins;
3. Not currently working in, or serving, an underserved area in New York State where the current service to the underserved area began prior to July 1, 2013;
4. Not fulfilling an obligation under any state or federal loan repayment program where the obligation periods of the state or federal loan repayment program would overlap or coincide with the DANY obligation period, including any current DANY obligation;
5. Not a past recipient of DANY Physician Practice Support or Physician Loan Repayment funding;
6. In good standing with the Department of Health;¹
7. Not be in breach of a health professional service obligation to the federal, state, or local government, or have any judgment liens arising from federal or state debt; and must not be delinquent in child support payments; and
8. Working or plan to work in an eligible employment site listed below.

If any of the 8 conditions above DO NOT pertain to the physician, STOP -- the physician is NOT eligible for DANY funding.

Those who are eligible to apply include:

- General hospitals licensed by the New York State Department of Health;
- Other health care facilities licensed by the New York State Department of Health;
- Other health care facilities operated or licensed by the New York State Office of Mental Health;
- Municipal or county governments within New York State;
- Medical practices located within New York State; and
- Individual physicians.

¹ i.e., not excluded from, or terminated by, the federal Medicare or Medicaid programs (see <http://www.omig.ny.gov/fraud/medicaid-terminations-and-exclusions>); not subject to Orders of the State Board for Professional Medical Conduct (see <http://w3.health.state.ny.us/opmc/factions.nsf/physiciansearch?openform>); or under indictment for, or convicted of, any crime as defined by the New York State Penal Code, (see: <http://public.leginfo.state.ny.us/menuf.cgi>). Please note that the physician must have updated his or her mandatory Physician Profile (see: <http://www.nydoctorprofile.com/>) information prior to the time of application.

Physicians currently employed by New York State, other than by the New York State Office of Mental Health, cannot apply for funding.

Applications must be submitted no earlier than July 8, 2015 and no later than July 31, 2015. Submit applications electronically only (PDF) to gme@health.ny.gov. NOTE: Electronic files are limited to 10MB. Larger files will not be accepted.

Please contact the individuals listed below if you have questions about the application or require assistance completing the application:

PHYSICIAN PRACTICE SUPPORT PROGRAM (PPS) (2 year service obligation, including a loan repayment option), contact Lianne Ramos at 518-473-3513 or gme@health.ny.gov.

PHYSICIAN LOAN REPAYMENT PROGRAM (PLR) (5 year service obligation), contact Amy Harp at 518-473-7019 or gme@health.ny.gov.

Physician Practice Support Applicants ONLY

- On the Application form (DOH 5062), at the top of the page, check the box for the Physician Practice Support Program (PPS) and enter a 2 year DANY service obligation period. Applicant may choose the first day of the month in January, February, March or April 2016 for 2 years;
- **Section A** - Applicant Information – complete items 1 – 8; (for facility applicants submit information on the facility, for individual physicians complete on behalf of yourself);
- **Section B** - Physician Information - complete items 1 – 13. On item 7, “Physician’s start date of current employment” is the start date of any position at the time of the application, and may or may not be the same date as item 8, “Expected Start date of position for which applicant is requesting DANY funding.” That latter start date for question 8 cannot be after April 1, 2016.
- **Section C** – Site/Service Area Information – complete items 1 – 8 for EACH SITE FOR WHICH DANY SUPPORT IS REQUESTED. List the name of each site, its street address with number (e.g., 356 Main St., not Main St. at Elm), and the percentage of time spent providing clinical services at this address. In number 4, check whether the site is rural (using the terms in the instructions), inner-city or suburban. For items 5-7, indicate the scope of the area served, e.g. a reasonable estimation as to whether, for example, a whole county or group of counties is served by the site, or only a town or series of towns, or neighborhoods (for NYC sites). For item 8, list the predominant populations served (e.g., Medicaid, uninsured, homeless, women, etc.)

- **Section D** – Proposed Specialty – check items a – c as applicable. If items (a) and (b) OR (a) and (c) are checked, i.e.,
 - (a) The applicant physician provides PRIMARY CARE or GENERAL PSYCHIATRY in the geographic area served by the site(s) listed in Section C, **and**
 - (b) the area or site encompasses one or more federally-designated Primary Care or Mental Health Professional Shortage Area(s) (HPSA) or Medically Underserved Area(s) (MUA) **or**
 - (c) the area or site is located in a rural town defined in this document;

then skip section E. For specific HPSA/MUA documentation instructions see page 12.

If the applicant cannot check (a) and (b) OR (a) and (c) then check item (d) and complete Section E.

- **Section E** – Identification of an Underserved Area - choose 6 items and submit documentation for the site where the physician will be working where DANY funding is requested (see page 12) below for specific documentation instructions.
 - **Section F** - Employment Contract or Business Plan²
 - **Section G1 or G2 - submit EITHER:**
 - G1 Budget Request for Individual Physician Applicants (individual physicians may utilize funds for loan repayment and other startup practices costs, etc.) **OR**
 - G2 Budget Request for Facility or Practice Applicants.
- Funding requests must not exceed \$100,000 for the full two-year period.

For Physician Loan Repayment Applicants ONLY

- On the application form (DOH form 5062) at the top of the page, check the box for the Physician Loan Repayment Program (PLR) and enter a 5 year DANY service obligation period. Applicant may choose the first day of the month in January, February, March or April 2016 for 5 years;
- **Section A** - Applicant Information – complete items 1 – 8; (for facility applicants submit information on the facility, for individual physicians

² Guidance on writing business plans for specific types of businesses can be found on many websites, including the following: <http://www.clpgh.org/research/business/bplansindex.html#H>. The signed employment contract/agreement must be between an eligible physician and an eligible hospital, health care facility or medical practice; or, if the applicant is an individual physician planning to set up a practice using Physician Practice Support program funding, a business plan must be included. The plan should include the following items, mission statement, goals, ownership structure, clinical/professional profiles, external influences on the practice, demographics, marketing initiatives, fee schedule, financial analysis, administrative overview, capital needs and medical records protocol.

complete on behalf of yourself);

- **Section B** - Physician Information - complete items 1 – 13. On item 7, “Physician’s start date of current employment” is the start date of any position at the time of the application, and may or may not be the same date as item 8, “Expected Start date of position for which applicant is requesting DANY funding.” That latter start date in question 8 cannot be after April 1, 2016.

- **Section C** - Site/Service Area Information – complete items 1 – 8 for EACH SITE FOR WHICH DANY SUPPORT IS REQUESTED. List the name of each site, its street address with number (e.g., 356 Main St., not Main St. at Elm), and the percentage of time spent providing clinical services at this address. In number 4, check whether the site is rural (using the definitions in the instructions), inner-city or suburban. For items 5-7, indicate the scope of the area served, e.g. a reasonable estimation as to whether, for example, a whole county or group of counties is served by the site, or only a town or series of towns, or neighborhoods (for NYC sites). For item 8, list the predominant populations served (e.g., Medicaid, uninsured, homeless, women, etc.).

- **Section D** – Proposed Specialty – check items a – c as applicable. If items (a) and (b) OR (a) and (c) are checked, i.e.,
 - (a) The applicant physician provides PRIMARY CARE or GENERAL PSYCHIATRY in the geographic area served by the site(s) listed in Section C, **and**

 - (b) the area or site encompasses one or more federally-designated Primary Care or Mental Health Professional Shortage Area(s) (HPSA) or Medically Underserved Area(s) (MUA), **or**

 - (c) the area or site is located in a rural town defined in this document;

then skip Section E. For specific HPSA/MUA documentation instructions, see page 12.

If the applicant cannot check (a) and (b) OR (a) and (c) then check item (d) and complete Section E.

- **Section E** – Identification of an Underserved Area - choose 6 items and submit documentation for the site where the physician will be working where DANY funding is requested (see page 12) below for specific documentation instructions.

- **Section F** - Employment Contract or Business Plan³

³ Guidance on writing business plans for specific types of businesses can be found on many websites, including the following: <http://www.clpgh.org/research/business/bplansindex.html#H>. The signed employment contract/agreement must be between an eligible physician and an eligible hospital, health care facility or medical practice; or, if the applicant is an individual physician planning to set up a practice using Physician Practice Support program funding, a business plan must be included. The plan should include the following

Terms of this Application

For purposes of this application, the following terms will apply:

- Applicant: An entity or individual physician submitting an application who will be responsible for executing and implementing the contract(s) with New York State. The term “applicant” encompasses: 1) any or all sites with the same New York State Department of Health operating certificate; 2) a single physician practice organization, such as an LLC, which may have one or more practice sites; or 3) an individual physician. See Eligibility Criteria document for further information.
- Current Employment: For the purposes of *eligibility* for DANY awards, if the applicant is currently working in an area designated as a HPSA, MUA or is a county defined below as a specialty shortage area AND the current employment commenced BEFORE July 1, 2013, then that applicant is *ineligible* for awards. For the purposes of the *application* (see item 7 in DOH-5062, Section B, Physician Information, “State Date of Current Employment” is the start date of any position at the time of the application, and may or may not be the same date as item 8, “Expected Start date of position for which you are requesting DANY funding.” The latter start date for question 8 cannot be after April 1, 2016.
- Employment Contract: The employment contract must follow the standard protocols within the applicant organization, be fully executed by the physician and the site and explicitly state, at a minimum, the physician’s specialty, annual salary, work hours and duration of the contract.

For Physician Practice Support and Physician Loan Repayment Program Awards where the start date at the facility is prior to January 1, 2016, the end date of the employment contract for Physician Practice Support must be no sooner than December 31, 2017; for Physician Loan Repayment, the end date of the employment contract must be no sooner than December 31, 2020.

For Physician Practice Support Awards where the start date at the facility is after January 1, 2016, the end date of the contract must be no sooner than 2 years after the start date of the DANY contract; for Loan Repayment, the end date of the contract must be no sooner than 5 years after the start date of the DANY contract. As the start date of the DANY contract may not be known at the time of submission of the DANY application, which includes the employment contract, it may be necessary for the site to submit an amendment to the employment contract upon receiving a DANY award.

- Full-Time Clinical Practice: Providing at least 40 hours of service (with a minimum of 32 clinical hours) per week for at least 45 weeks per year. Physicians providing surgical or interventional procedures must be available and responsible for post-operative care of patients. Unless otherwise approved in writing by the Department,

items, mission statement, goals, ownership structure, clinical/professional profiles, external influences on the practice, demographics, marketing initiatives, fee schedule, financial analysis, administrative overview, capital needs and medical records protocol.

the 40 hours per week may be compressed into no less than four days per week, with no more than 12 hours of work performed in any 24-hour period. Time spent in on-call status should not be applied toward the 40-hour week. Hours worked in excess of 40 hours per week shall not be applied to any other workweek.

The physician shall provide health services to individuals in the area without discriminating against them because (a) of their inability to pay for those services or (b) payment for these health services shall be made under part A or B of title XVIII of the Social Security Act (42 U.S.C. 1395) ("Medicare") or under a State plan for medical assistance approved under titles XIX and XXI of that ACT ("Medicaid" and "State Children's Health Insurance Program");

The physician shall accept assignment under section 1842(b)(3)(B)(ii) of the Social Security Act (42 U.S.C. section 1395u (b)(3)(B)(ii)) for all services for which payment may be made under Part B of Title XVIII of such Act. He/she shall enter into an appropriate agreement with the State agency which administers the State plan for medical assistance under titles XIX and XXI of the Social Security Act to provide services to individuals entitled to medical assistance under the plan or work under current agreement of employing facility;

- Identified or obligated physician: The individual physician who is applying for an award or the physician joining or being recruited by a facility or physician practice organization and who ultimately commits to the service obligation.
- NYSDOH: The New York State Department of Health, its agents, vendors, partners, contractors, subcontractors or any State entity authorized to assist in the administration of the Doctors Across New York Program.
- Obligated Service/Service Obligation: Two (Physician Practice Support Program) or five (Physician Loan Repayment Program) consecutive years providing medical services in or to an underserved area. The service obligation runs concurrent with the term of the New York State contract resulting from the DANY award. In no circumstance shall the start date of the contract with the Department (i.e., the start date of the service obligation) be prior to January 1, 2016 or later than April 1, 2016.
- Physician: Any graduate of an osteopathic or allopathic medical school who possesses an MD or DO degree, who has been licensed to practice medicine in New York State, and who is board-eligible or board-certified in primary care or a medical specialty.
- Qualified educational loans/debt: Any student loan that was used to pay graduate or undergraduate tuition or related educational expenses, 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.
- Regions:
 - *New York City (NYC)*: The boroughs of Manhattan, Queens, Brooklyn, Bronx, and Staten Island.
 - *Rest-of-State (ROS)*: Any area outside the five boroughs of New York City.
- Resident: An individual enrolled in a graduate medical education program that is

accredited by a nationally recognized accreditation body and/or an individual enrolled in a medical or osteopathic residency program that is approved by any other nationally recognized organization (i.e., specialty board). This definition includes fellows, chief residents, and residents.

- Rural Provider:

- A *hospital* as defined in NYCRR Title 10, Section 700.2(21), or Section 2807-w (c) of the New York State Public Health Law; or
 - A *general hospital* with a service area in a county with a population of less than 200,000 persons or in a town with less than 200 persons per square mile (See pages 7-8); or
 - A health care *provider* that provides services in a **county** (See “A” below) with a population of less than 200,000 persons or in a **town** (See “B” below) with less than 200 persons per square mile. These include:

A. Rural New York State Counties

Allegany	Delaware	Lewis	Rensselaer	Tioga
Cattaraugus	Essex	Livingston	Schenectady	Tompkins
Cayuga	Franklin	Madison	Schoharie	Ulster
Chautauqua	Fulton	Montgomery	Schuyler	Warren
Chemung	Genesee	Ontario	Seneca	Washington
Chenango	Greene	Orleans	St. Lawrence	Wayne
Clinton	Hamilton	Oswego	Steuben	Wyoming
Columbia	Herkimer	Otsego	Sullivan	Yates
Cortland	Jefferson	Putnam		

B. New York State Counties with Towns of Fewer than 200 Persons per Square Mile

Albany - Berne, Coeymans, Knox, New Scotland, Rensselaerville, Westerlo.

Broome - Barker, Binghamton, Colesville, Kirkwood, Lisle, Maine, Nanticoke, Sanford, Triangle, Windsor.

Dutchess - Amenia, Clinton, Dover, Milan, North East, Pawling, Pine Plains, Stanford, Union Vale, Washington.

Erie - Brant, Cattaraugus Reservation, Colden, Collins, Concord, Eden, Holland, Marilla, Newstead, North Collins, Sardinia, Tonawanda Reservation, Wales.

Monroe - Clarkson, Mendon, Riga, Rush, Wheatland.

Niagara - Cambria, Hartland, Newfane, Pendleton, Royalton, Somerset,

Tuscarora, Reservation, Wilson.

Oneida - Annsville, Augusta, Ava, Boonville, Bridgewater, Camden, Deerfield, Florence, Floyd, Forestport, Lee, Marshall, Paris, Remsen, Sangerfield, Steuben, Trenton, Vernon, Verona, Vienna, Western, Westmoreland.

Onondaga - Elbridge, LaFayette, Marcellus, Onondaga Reservation, Otisco, Pompey, Skaneateles, Spafford, Tully.

Orange - Crawford, Deerpark, Greenville, Hamptonburgh, Minisink, Tuxedo, Wawayanda.

Saratoga - Charlton, Corinth, Day, Edinburg, Galway, Greenfield, Hadley, Northumberland, Providence, Saratoga, Stillwater.

Suffolk - Shelter Island.

Westchester - Pound Ridge.

- Start Date: The date that the identified physician actually begins working for the employer associated with the DANY program award and begins to see patients.
- State Fiscal Quarters: The periods April 1 – June 30 (first quarter), July 1 – September 30 (second quarter), October 1 – December 31 (third quarter), and January 1 – March 31 (fourth quarter) of any given calendar year. A full State fiscal year is April 1 of a year through March 31 of the following year.

Specialty Shortage Areas: See below:⁴ (as Designated by the New York State Board of Regents)

ANESTHESIOLOGY

Allegany	Delaware	Lewis	Saratoga
Chenango	Essex	Livingston	Schoharie
Columbia	Greene	Orleans	Tioga
Cortland	Hamilton	Oswego	

CARDIOLOGY

Allegany	Greene	Madison	Seneca
Chenango	Hamilton	Orleans	Sullivan
Delaware	Herkimer	Oswego	Tioga
Essex	Jefferson	St. Lawrence	Washington
Franklin	Lewis	Schoharie	Yates
Fulton	Livingston	Schuyler	

DERMATOLOGY

Allegany	Fulton	Montgomery	Steuben
Chautauqua	Greene	Orleans	Tioga
Chenango	Hamilton	Oswego	Washington
Columbia	Herkimer	Rensselaer	Wayne
Cortland	Jefferson	St. Lawrence	Wyoming
Delaware	Lewis	Schoharie	Yates
Essex	Livingston	Schuyler	
Franklin	Madison	Seneca	

EMERGENCY MEDICINE

Essex	Seneca
Greene	
Tioga	
Livingston	

GASTROENTEROLOGY

Allegany	Delaware	Lewis	Schoharie
Cayuga	Essex	Livingston	Schuyler
Chautauqua	Fulton	Madison	Seneca
Chenango	Greene	Niagara	Tioga
Clinton	Hamilton	Orleans	Washington
Columbia	Herkimer	Oswego	Wayne
Cortland	Jefferson	Saratoga	Yates

GENERAL SURGERY

Columbia	Herkimer	Schoharie	Tioga
Essex	Livingston	Seneca	Washington
Greene	Saratoga	Sullivan	Wyoming
Hamilton			

⁴ See <http://www.highered.nysed.gov/kiap/scholarships/documents/2015PLFShortageBulletin.pdf> pages 29-31.

NEUROLOGY

Allegany	Fulton	Montgomery	Seneca
Chautauqua	Genesee	Orange	Tioga
Chenango	Greene	Orleans	Washington
Columbia	Hamilton	Oswego	Wayne
Cortland	Lewis	Schoharie	Wyoming
Delaware	Madison	Schuyler	Yates
Essex			

OBSTETRICS/GYNECOLOGY

Allegany	Essex	Livingston	Sullivan
Columbia	Greene	Schoharie	Tioga
Cortland	Hamilton	Seneca	

OPHTHALMOLOGY

Delaware	Herkimer	Schoharie	Tioga
Essex	Lewis	Schuyler	Washington
Greene	Livingston	Seneca	Yates
Hamilton	Madison	Sullivan	

ORTHOPEDIC SURGERY

Allegany	Franklin	Jefferson	Schoharie
Cattaraugus	Fulton	Livingston	Seneca
Columbia	Greene	Orleans	Tioga
Delaware	Hamilton	Oswego	Washington
Dutchess	Herkimer	Richmond	Yates

OTOLARYNGOLOGY

Allegany	Hamilton	St. Lawrence	Steuben
Cayuga	Herkimer	Saratoga	Tioga
Columbia	Lewis	Schoharie	Washington
Delaware	Niagara	Schuyler	Wyoming
Essex	Queens	Seneca	Yates
Fulton			

PATHOLOGY

Chenango	Hamilton	Oswego	Tioga
Delaware	Herkimer	Putnam	Tompkins
Essex	Jefferson	Saratoga	Ulster
Fulton	Lewis	Schoharie	Washington
Genesee	Livingston	Schuyler	Wayne
Greene	Madison	Seneca	

PHYSICAL AND REHABILITATIVE MEDICINE

Allegany	Greene	Orleans	Seneca
Cattaraugus	Hamilton	Oswego	Steuben
Cayuga	Herkimer	Otsego	Tioga
Chenango	Jefferson	Putnam	Tompkins
Columbia	Lewis	St. Lawrence	Washington
Delaware	Livingston	Saratoga	Wayne
Essex	Madison	Schoharie	Wyoming
Franklin	Montgomery	Schuyler	Yates
Fulton	Niagara		

PREVENTIVE MEDICINE

Albany	Franklin	Oneida	Schuyler
Allegany	Fulton	Onondaga	Seneca

Bronx	Genesee	Ontario	Steuben
Broome	Greene	Orange	Suffolk
Cattaraugus	Hamilton	Orleans	Sullivan
Cayuga	Herkimer	Oswego	Tioga
Chautauqua	Jefferson	Otsego	Tompkins
Chemung	Kings	Putnam	Ulster
Chenango	Lewis	Queens	Warren
Clinton	Livingston	Rensselaer	Washington
Columbia	Madison	Richmond	Wayne
Cortland	Monroe	Rockland	Westchester
Delaware	Montgomery	St. Lawrence	Wyoming
Erie	Nassau	Saratoga	Yates
Essex	Niagara	Schenectady	

PULMONARY DISEASE

Allegany	Franklin	Madison	Sullivan
Cayuga	Fulton	Orleans	Tioga
Chenango	Greene	St. Lawrence	Tompkins
Cortland	Hamilton	Schoharie	Washington
Delaware	Herkimer	Schuyler	Wayne
Dutchess	Lewis	Seneca	Wyoming
Essex	Livingston	Steuben	Yates

RADIOLOGY

Allegany	Herkimer	Saratoga	Washington
Cattaraugus	Lewis	Schuyler	Wyoming
Greene	Livingston	Tioga	Yates
Hamilton			

UROLOGY

Allegany	Hamilton	Oswego	Tioga
Delaware	Herkimer	Saratoga	Washington
Essex	Lewis	Schoharie	Wyoming
Fulton	Livingston	Schuyler	Yates
Greene	Orleans	Seneca	

Instructions for Submitting Documents to the Application

Section D – Proposed Specialty

Documentation is required for ALL sites at which the physician proposes to provide services.

For Application Section D, item (b), HPSA/MUA (if checked); attach documentation, labeled D1, including HPSA/MUA number from the appropriate website (e.g., 02372 MUA or 1369993669 HPSA) and showing the printed listing from the below website.

To identify if a facility is located in a federally-designated shortage area (HPSA) or medically underserved area (MUA/P), go to:

<http://datawarehouse.hrsa.gov/GeoAdvisor/ShortageDesignationAdvisor.aspx>. Insert the address of the facility(ies) in which you are interested. The resulting search should yield ALL HPSAs and MUA/Ps, by status, in which the address is located.

Section E. Identification of an Underserved Area

Proposed Service Area:

For **non-NYC information**, see:

<http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml> to determine the statistics for your community; attach documentation as appropriate.

Enter name of Town or county into the box under the “Community Facts” banner, and then click “Go”. (See Figure 1)

For item number 1a, consult the table labeled “Poverty.” For item number 1b, consult the table labeled “Income.” For item number 1c, consult the tables labeled “Income” then click on the table labeled “SELECTED ECONOMIC CHARACTERISTICS 2012 American Community Survey 5-Year Estimates.” check any of the 3 that apply. (Note: item #1 counts as 1 out of 6, irrespective of the number of boxes checked in 1 a-c).

For **NYC information**, follow the instructions above using the zip code(s) for your proposed service area. Make sure to use ALL applicable zip codes, and provide an average for the above data. (See Figure 2), which provides the median household income for the NYC zip code 10009.

FIGURE 1: SCREEN SHOT OF CENSUS DATA DOCUMENTATION PAGE



FIGURE 2: SCREEN SHOT OF DATA DOCUMENTATION PAGE

The screenshot shows the American FactFinder website interface. At the top, there is a navigation bar with the United States Census Bureau logo and the 'AMERICAN FactFinder' title. Below this is a search bar with a magnifying glass icon and a 'GO' button. The main content area is titled 'Community Facts - Find popular facts (population, income, etc.) and frequently requested data about your community.' A search input field contains the ZIP code '10009'. On the left side, there is a vertical menu with various categories: Population, Age, Business and Industry, Education, Governments, Housing, Income (selected), Origins and Language, Poverty, Race and Hispanic Origin, and Veterans. The main content area displays the following information:

- ZIP code: 10009
- Median Household Income: **59,034** (Source: 2008-2012 American Community Survey 5-Year Estimates)
- Buttons: Bookmark, Print
- Section: Popular tables for this geography:
- 2012 American Community Survey
 - Selected Economic Characteristics (Employment, Commute, Occupation, Income, Poverty, ...)
 - Income in the Past 12 Months (Households, Families, ...)
 - Earnings in the Past 12 Months (Sex, Educational Attainment, ...)
 - Employment Status (Age, Race, Sex, Poverty, Disability, Education, ...)
 - Occupation by Sex and Median Earnings in the Past 12 Months
- Census 2000
 - Selected Economic Characteristics (Employment, Commute, Occupation, Income, Health Insurance, ...)
- Want more? Need help? Use Guided Search or visit Census.gov's Quick Facts.

Proposed Site:

For item 6 (indigent care) submit facility-specific visit data for the last YEAR of complete data (e.g., November 1, 2013 – October 31, 2014).

For item 7 (ED visits) submit a statement signed by a principal of the facility attesting to the condition checked. Attach 4 full months of ED data from that facility.

For Item 8 (rural health) see definitions for “rural provider,” pages 6-8. No additional documentation is needed.

For items 9 - 12 (average waiting time, search for a practice partner and referrals), submit a statement signed by a principal of the facility attesting to the condition checked.

If there is more than one site, duplicate the site section pages and provide information for each site.

Proposed Specialty:

For items 13, 15, 16 (no other providers, decrease in the number of physicians, use of locums), submit a statement signed by a principal of the facility attesting to the condition checked.

For item 14 (travel distance) attach documentation including a distance map from <http://maps.google.com/>.

For item 17 (specialty shortage areas) consult terms, pages 8-15. No additional documentation is needed.

For Item 18 (PQI) see:

https://apps.health.ny.gov/statistics/prevention/quality_indicators/mapaction.map for details; attach a web page printout.