

the interest of the public health, or the conservation of grant funds.

[45 FR 51202, Aug. 1, 1980]

Subpart GG—Payment for Tuition and Other Educational Costs

AUTHORITY: Sec. 215, Public Health Service Act, 58 Stat. 690, as amended by 63 Stat. 35 (42 U.S.C. 216); sec. 711, Public Health Service Act, 90 Stat. 2253; section 710, PHS Act, as redesignated by Pub. L. 97-35, 95 Stat. 915 (42 U.S.C. 292k).

§ 57.3201 To which programs do these regulations apply?

The regulations in this subpart establish the criteria to be used in determining allowable increases in tuition and other educational costs for which the Secretary is responsible for payment under the following sections of the Public Health Service Act: The National Health Service Corps Scholarship Program (sec. 338A) (42 U.S.C. 2541) and the Indian Health Scholarship Program (awarded pursuant to sec. 338A-339G of the PHS Act) (25 U.S.C. 1613a). These programs are referred to herein as the "scholarship programs." The regulations apply to increases in tuition and other educational costs occurring after the school year beginning immediately before October 1, 1981.

[57 FR 45745, Oct. 5, 1992]

§ 57.3202 How will allowable increases be determined?

(a) The Secretary is responsible for increases in tuition and other educational costs only if the same increase is charged to all students in the same category (for example, the same class year or place of residence) and without regard to whether the student is receiving support under the scholarship programs. A student participating in the scholarship programs may not be denied eligibility because of this participation for any discounts or rebates in tuition or other educational costs given to all other students in the same category at the institution.

(b) Institutions whose enrollment contains 25 percent or more students participating in the scholarship programs, and whose percentage increase in tuition and other educational costs

in any school year exceeds the previous calendar year's average inflation rate as indicated by the *Consumer Price Index for All Urban Areas*, may be requested to provide the Secretary with detailed cost breakdowns justifying the increase.

(c) In the case of a school which is requested to provide the Secretary with cost increase justification under paragraph (b) of this section, the Secretary will be responsible for increases in tuition and other educational costs charged to students participating in the scholarship programs over the amount charged for the school year immediately preceding the increase only to the extent that they are: (1) Attributable to uncontrollable costs, such as fuel costs, mandated cost-of-living increases in wages, salaries and fringe benefits, (2) attributable to costs of maintaining and improving the quality of the health professions education provided by the institution, such as hiring additional faculty to improve the faculty-student ratio, costs incurred in off-site training of students, and necessary improvements in teaching equipment. Increases in patient care and research costs are allowable as part of an increase in tuition and other educational costs only to the extent that they can be documented as clearly necessary to maintain and improve the quality of the education being supported; or (3) attributable to loss of revenue from other sources which was used solely for the maintenance and improvement of the educational system.

These three categories of valid escalators of tuition and other educational costs are exclusive. However, the examples *within* each category are merely illustrative and not meant to be inclusive.

(d) If the Secretary, after reviewing all available data, information, and justifications submitted by an institution, determines that an increase in tuition and other educational costs is not allowable under the criteria described in paragraph (a) or (c) of this section, the Secretary will provide the affected institution a detailed written explanation of the basis of that determination. The Secretary will be responsible for that portion of tuition

§ 57.3801

42 CFR Ch. I (10–1–00 Edition)

and other educational costs the Secretary determines to be allowable.

[45 FR 71568, Oct. 29, 1980]

Subparts HH–LL [Reserved]

Subpart MM—Area Health Education Center Program

AUTHORITY: Sec. 215, Public Health Service Act, 58 Stat. 690, as amended by 63 Stat. 35 (42 U.S.C. 216); sec. 781, Public Health Service Act, 90 Stat. 2312 (42 U.S.C. 295g-1), as amended.

SOURCE: 48 FR 7446, Feb. 22, 1983, unless otherwise noted.

§ 57.3801 To what programs do these regulations apply?

The regulations of this subpart apply to cooperative agreements entered into by the Secretary under section 781 of the Public Health Service Act (42 U.S.C. 295g-1) with schools of medicine or osteopathy for the planning, development, and operation of area health education center programs.

§ 57.3802 Definitions.

Act means the Public Health Service Act.

Allied health personnel means individuals as defined in 42 CFR 58.502.

Area health education center or *center* means a public or nonprofit private entity which has a cooperative arrangement with one or more schools of medicine or osteopathy for the planning, development, and operation of an area health education center program. A center must be an entity which is recognized under the laws of the State in which it is located and which has as one of its principal functions the operation of the area health education center.

Area health education center program or *project* means a cooperative program among one or more schools of medicine or osteopathy and one or more area health education centers, which is capable of performing the functions described in sections 781(c) and (d) (2) of the Act and § 57.3804 of these regulations, and which is designed to improve the distribution, supply, quality, utilization, and efficiency of health personnel in the health services delivery

system and to encourage the regionalization of educational responsibilities of health professions schools.

Cooperative agreement means a legal instrument that reflects an assistance relationship between the Federal Government and the recipient in which substantial programmatic involvement is anticipated between the Federal agency and the recipient during performance of the contemplated activity.

Clerkship means supervised clinical training.

Continuing medical education or *continuing education* means any education for the purpose of maintaining or enhancing the knowledge, attitudes or abilities of a health professional in his or her field which does not lead to any formal advanced standing in the profession.

Health professional means any physician, dentist, optometrist, podiatrist, pharmacist, nurse, nurse practitioner, physician assistant or allied health personnel.

Nurse practitioner means an individual as defined in 42 CFR 57.2402.

Physician assistant means an individual as defined in 42 CFR 57.802.

Preceptorship means an educational experience in which the student works with a designated health professional, the preceptor, who teaches in the student's field of study and personally supervises the student's clinical activity.

School of medicine, osteopathy, dentistry, optometry, podiatry, pharmacy, public health or veterinary medicine means a school as defined in section 701(4) of the Act which is accredited as provided in section 772(b) of the Act.

School of nursing means a collegiate, associate degree or diploma school of nursing as defined in section 853 of the Act.

Training center for allied health professions means a training center as defined in 42 CFR 58.402

Secretary means the Secretary of Health and Human Services and any other officer or employee of the Department of Health and Human Services to whom the authority involved has been delegated.

State means, in addition to the several States, only the District of Columbia, the Commonwealth of Puerto Rico,