

# MA Repay:

## Behavioral Health & Primary Care

Student Loan Repayment Program  
Cohort Two

# Policy Guide

Last Updated: 12/16/2025



**EOHHS**

Massachusetts League  
*of Community Health Centers*

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# Introduction



## Document Scope, Purpose, and Use:

The MA Repay Program: Behavioral Health & Primary Care Policy Guide is the central source of administrative information about the Program and its requirements.

This Policy Guide is designed for active Participants who have signed their Awardee Contracts to help interpret Program requirements and regulations. If you are an active Participant and have a question, contact the Massachusetts League of Community Health Centers (Mass League) [here](#) or at 833- MA REPAY.

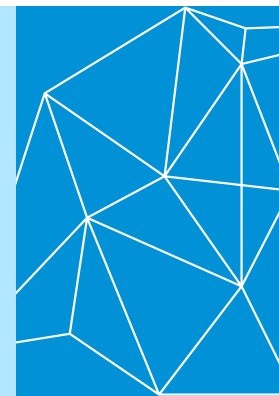


If you are an applicant and have not signed an Awardee Contract, the policies in this guide are not applicable. If you have questions, please refer to the [Common Questions](#) or contact the Mass League [here](#) or at 877-251-6432.

Please note that this program awarded funding through two rounds of applications. Cohort One accepted applications from December 2022 – January 2023. Applicants awarded through Cohort One signed contracts before August 28, 2024. The program will collect Cohort Two applications from August 28, 2024 – September 25, 2024. This policy guide is applicable to Cohort Two. For Cohort One policies, click [here](#).

Additional information about the Program is available on the MA Repay Program website [here](#).

# Hours Reduction Policy



Effective Date: 4/12/2024

Date of Last Revision: 6/14/2024

## Purpose:

The MA Repay Program – Behavioral Health & Primary Care Participant Hours Reduction Policy governs the parameters for participants in the MA Repay Program who reduce their work hours from full-time to part-time during their service obligation.

## Definitions:

Policy terms have the following meanings:

**Awardee Contract** – Contract, approved by EOHHS, executed between awardee and contractor that: outlines the terms of the program and recoupment; details awardees responsibilities and obligations; and details contractor's responsibilities and obligations.

**Participant** – Participant refers to an individual with a fully-executed Awardee Contract with the Massachusetts League of Community Health Centers to receive loan repayment services through the MA Repay Program.

**Full-time employment** – A minimum of 35 hours per week for a minimum of 45 weeks per service year.

**Part-time employment** – At least 20 hours per week in a clinical practice (but not more than 34 hours per week) for a minimum of 45 weeks per service year.

## General:

Participants are required to notify the Massachusetts League of Community Health Centers (Mass League) promptly via email of any change from Full-time to Part-time employment.

Participants may reduce their hours from Full-time to Part-time temporarily or for the entire duration of their service obligation.

Where Participants temporarily reduce their hours from Full-time to Part-time employment, the Mass League, at its sole discretion, may require the Participant to extend their service obligation to account for the transition to a reduced schedule. Participants may temporarily reduce their hours from Full-time to Part-time once during their service obligation; at the end of this period, Participants will resume Full-time work.

Where Participants permanently reduce their hours from Full-time to Part-time employment, the Mass League, at its sole discretion, may offer the Participant:

# Hours Reduction Policy



1. An extension of the Participant's service obligation to account for their transition to a reduced schedule; OR
2. A reduction in the Participant's total award amount (only available prior to the loan disbursement). Participant's total award amount would be decreased to the part-time maximum for the award track, regardless of time spent working full-time prior to electing for this change.



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# Job Separation Policy



Effective Date: 4/12/2024

Date of Last Revision: 6/5/2024

## Purpose:

The MA Repay Program – Behavioral Health & Primary Care Job Separation Policy governs the parameters for determining continued eligibility in the MA Repay Program (the “Program”) with regard to job changes or separation.

## Definitions:

Policy terms have the following meanings:

**Participant** – Participant refers to an individual with a fully-executed Awardee Contract with The Massachusetts League of Community Health Centers, Inc. (Mass League) to receive loan repayment services through the MA Repay Program.

**Eligible Organizations** – [Behavioral Health and Primary Care Initiative – Eligible Organizations](#)

## General:

Participants who experience a change in their employment status, whether voluntary or involuntary (i.e., layoff, reorganization), will be allowed 120 days to secure employment at a new job. Participants must notify the Mass League promptly in writing, via email, of a change to another organization and include their last day of work at their previous employer. Time elapsed between jobs will extend the service obligation end date by the number of days the Participant is unemployed, up to 120 days.

Within 30 days of beginning their new employment, Participants must submit to the Mass League an Organization Change Form signed by a supervisor from their new organization. To satisfy the Participant’s service obligation, the new employment must be in a role at an Eligible Organization that is eligible for repayment under the applicable task order. A signed offer letter will be accepted as proof of future employment.

Participants may voluntarily change their Eligible Organization twice during their contract period. Changing organizations will count as a job change regardless of the reason for the change.

If the Participant is unable to secure employment at a new Eligible Organization within 120 days, the Participant may be considered in breach of contract and may be liable to the Mass League for an amount equal to the sum of a pro-rated portion of the total amount paid by the Mass League, with interest, as outlined in Section C of the Awardee Contract.



# Leave Policy



Effective Date: 4/30/2024

Date of Last Revision: 2/14/2025

## Purpose:

The MA Repay Program – Behavioral Health & Primary Care Leave Policy governs the parameters for Participants who take leave during their service obligation period.

## Definitions:

Policy terms have the following meanings:

**Awardee Contract**– Contract, approved by EOHHS, executed between awardee and contractor that: outlines the terms of the program and recoupment; details awardees responsibilities and obligations; and details contractor’s responsibilities and obligations.

**Participant** – Participant refers to an individual with a fully-executed Awardee Contract with the Massachusetts League of Community Health Centers (Mass League) to receive loan repayment services through the MA Repay Program.

## General:

A Participant may take up to 12 weeks of extended personal leave or up to 24 weeks of reduced schedule leave during their contract period without extending the service obligation end date. Extended personal leave or reduced schedule leave may be for family or medical reasons as permitted by the Participant's employer organization or, if self-employed, leave that qualifies under the [Massachusetts Paid Family Medical Leave Law \("PMFL"\)](#) including:

1. Caring for your own serious health condition, including illness, injury, or pregnancy / childbirth.
2. Caring for a family member with a serious health condition, including illness, injury, or pregnancy / childbirth
3. Bonding with your child during the first 12 months after birth, adoption, or placement.
4. Managing affairs while a family member is on active duty.

Reduced schedule leave allows the participant to work part-time or reduced hours during the specified period, rather than taking full-time leave. Part-time is defined as working 34 hours or less per week.

Any extended personal leave beyond 12 weeks or reduced schedule leave beyond 24 weeks during the Participant’s contract period will extend the contract for the additional length of time the Participant was on leave.



# Leave Policy



Participants must notify the Mass League in writing, via email, of their leave start and end dates. Upon returning to work, the Participant must complete a Return from Leave Verification Form signed by an HR representative or supervisor, confirming that their leave is over and that the Participant has returned to part-time or full-time work hours. The form must be submitted within 30 days of returning to work.



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# Non-Responsive Termination Policy



Effective Date: 6/1/2024

Date of Last Revision: 2/14/2025

## Purpose:

The MA Repay Program – Behavioral Health & Primary Care Non-Responsive Termination Policy governs the parameters for determining when and whether a Participant's Contract in the MA Repay Program (the "Program") may be terminated by the Massachusetts League of Community Health Centers (Mass League) due to a Participant's failure to timely submit required verification documents to the Mass League.

## Definitions:

Policy terms have the following meanings:

**Participant** – Participant refers to an individual with a fully-executed Awardee Contract with the Massachusetts League of Community Health Centers to receive loan repayment services through the MA Repay Program.

**Awardee Contract** – Contract, approved by EOHHS, executed between awardee and contractor that: outlines the terms of the program and recoupment; details awardees responsibilities and obligations; and details contractor's responsibilities and obligations.

## General:

The Mass League reserves the right to terminate the Contract of any Participant who fails to return required verification documents and/or information within sixty (60) days of the specified due date.

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# Organization Change Policy



Effective Date: 2/1/2024

Date of Last Revision: 6/5/2024

## Purpose:

The MA Repay Program – Behavioral Health & Primary Care Organization Change Policy governs the parameters for determining when and whether a Participant in the MA Repay Program (the “Program”) may continue to participate in the Program upon securing new employment.

## Definitions:

Policy terms have the following meanings:

**Participant** – Participant refers to an individual with a fully-executed Awardee Contract with the Massachusetts League of Community Health Centers (Mass League) to receive loan repayment services through the MA Repay Program.

**Eligible Organizations** – [Behavioral Health and Primary Care Initiative – Eligible Organizations](#)

## General:

Participants may voluntarily change their Eligible Organization twice during their contract period. The Participant’s new job must be in an eligible role at an eligible employer, as determined by the Mass League, in order to fulfill the Participant’s service obligation. Time elapsed between jobs will extend the service obligation end date by the number of days the Participant is unemployed, up to 120 days. Gaps between jobs of more than 120 days may result in contract termination.

Participants must notify the Mass League promptly in writing, via email, of a change to another organization and include their last date of employment at their previous employer. Within 30 days of beginning their new employment, Participants must submit to the Mass League an Organization Change Form signed by a supervisor from their new organization.

Upon receipt of the form, the Mass League will determine whether the new job is in an eligible role at an eligible employer to continue to qualify the Participant for the Program.

If the organization is eligible, the Mass League will notify the Participant.

If the organization is ineligible, the Mass League will notify the Participant. Employment at an ineligible organization may be considered a breach of contract and Participants may be liable to the Mass League for an amount equal to the sum of a pro-rated portion of the total amount paid by the Mass League, with interest, as outlined in Section C of the awardee contract.

# Participant Name Change and Identity Verification Policy



Effective Date: 4/12/2024

Date of Last Revision: 12/16/2025

## Purpose:

The MA Repay Program – Behavioral Health & Primary Care Participant Name Change and Identity Verification Policy governs the process required of Participants who change their first, last, or both first and last name at or after the execution of their Awardee Agreement or situations where Participants have name discrepancies between program records and student loan or employment verification documents.

## Definitions:

Policy terms have the following meanings:

**Awardee Contract** – Contract, approved by EOHHS, executed between awardee and contractor that: outlines the terms of the program and recoupment; details awardees responsibilities and obligations; and details contractor's responsibilities and obligations.

**Participant** – Participant refers to an individual with a fully-executed Awardee Contract with the Massachusetts League of Community Health Centers (Mass League) to receive loan repayment services through the MA Repay Program.

## General:

### Name Changes:

If a Participant changes their legal first, last, or both first and last name for any reason, they must provide the Mass League within 30 days of such change both a government-issued ID and a copy of the court documentation certifying their name change, such as a marriage certificate, an appropriate section of a divorce decree, or decree of change of name.

Additionally, any change of name should be appropriately documented with the loan servicer and employer. Failure to document a name change with either the Mass League, the loan servicer, or the employer may result in a delay in loan repayment.

### Name Inconsistencies:

Participants with name discrepancies between program records and student loan or employment verification documents (e.g. participants with multiple different surnames, participants with inconsistent name spellings, participants with inconsistent name hyphenation) must verify their legal name by providing the Mass League with a recent Form 1098-E Student Loan Interest Statement. This form is provided by your student loan servicers and utilized in filing taxes.

# Reapplication Policy



Effective Date: 9/25/2024

Date of Last Revision: 9/25/2024

## Purpose:

The MA Repay Program – Behavioral Health & Primary Care Reapplication Policy governs the parameters within which former Participants may apply for subsequent funding.

## Definitions:

Policy terms have the following meanings:

**Awardee Contract** – Contract, approved by EOHHS, executed between awardee and contractor that: outlines the terms of the program and recoupment; details awardees responsibilities and obligations; and details contractor's responsibilities and obligations.

**Participant** – Participant refers to an individual with a fully-executed Awardee Contract with the Massachusetts League of Community Health Centers (Mass League) to receive loan repayment services through the MA Repay Program.

## General:

Former Participants of the MA Repay Program may reapply to the Program. Former Participants who did not fulfill their service obligation under their original Awardee Contract may reapply if they satisfy the following conditions:

- The former Participant has been discharged from their original Awardee Contract and, if applicable, has fully repaid to the League any award amount disbursed on their behalf, with interest; and
- At least 90 days have passed from the date the former Participant was discharged from their Awardee Contract or completed repayment, whichever is later.

Former Participants who fulfilled their service obligation under their original Awardee Contract may reapply if they satisfy the following condition:

- The former Participant has been discharged from the original Awardee Contract. Former Participants who have fulfilled their service obligation and have been discharged from their original Awardee Contract may reapply immediately to another MA Repay Program upon discharge.

Individuals who do not meet the above criteria are ineligible to reapply to the Program. The Mass League cannot guarantee that former Participants will receive subsequent awards upon application.

# Recoupment Policy



Effective Date: 9/1/2024

Date of Last Revision: 12/2/2024

## Purpose:

The MA Repay Program – Behavioral Health & Primary Care Recoupment Policy governs the parameters for recoupment of awarded funds from Participants who have breached their Awardee Contract.

## Definitions:

Policy terms have the following meanings:

**Awardee Contract** – Contract, approved by EOHHS, executed between awardee and contractor that: outlines the terms of the program and recoupment; details awardees responsibilities and obligations; and details contractor's responsibilities and obligations.

**Participant** – Participant refers to an individual with a fully-executed Awardee Contract with the Massachusetts League of Community Health Centers (Mass League) to receive loan repayment services through the MA Repay Program.

## General:

If the Participant, for any reason, fails to complete the period of obligated service or comply with the associated requirements as specified in Section B of the Awardee Contract, they shall be liable to the Mass League for an amount equal to the sum of a pro-rated portion of the total award amount paid by the Mass League to or on behalf of the Participant. A one-time interest penalty will be assessed one year from the date of the initial breach of contract on the remaining balance owed to the Mass League.

Any amount the Mass League is entitled to recover shall be paid by the Participant to the Mass League within one year of the date the Mass League determines the Participant is in breach of the Participant's obligations under the Awardee Contract.. If legal action is commenced to recover payment due to the Mass League, the Participant will also be liable for all costs of collection, including reasonable attorney's fees. The Mass League will make reasonable efforts to work with the Participant to develop and implement a payment plan for recoupment prior to commencing legal action.

Delinquent or defaulted debts by the Participant may be reported to credit reporting agencies, consistent with all applicable law, at the sole discretion of EOHHS.

Participants who do not return documents including but not limited to the Eligibility Verification form will be considered in breach of contract effective to the first date of the contract year.

# Recoupment Policy



Participants may seek a waiver of the payment obligation by written request, setting forth the reasons, circumstances, and causes for the request. Any waiver may be granted at the sole discretion of EOHHS.



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# Service Commitment Discharge Policy



Effective Date: 7/29/2025

## Purpose:

The MA Repay Program – Behavioral Health & Primary Care Service Commitment Discharge Policy governs the parameters for determining when and whether a Participant will be discharged from the MA Repay Program (the “Program”). A Participant's contract may be terminated by the Mass League due to a Participant's failure to submit required verification documents in a timely manner.

## Definitions:

Policy terms have the following meanings:

**Awardee Contract** – Contract, approved by EOHHS, executed between awardee and contractor that: outlines the terms of the program and recoupment; details awardees responsibilities and obligations; and details contractor's responsibilities and obligations.

**Participant** – Participant refers to an individual with a fully-executed Awardee Contract with the Massachusetts League of Community Health Centers (Mass League) to receive loan repayment services through the MA Repay Program.

## General:

Upon satisfactory completion of the Participant's service obligation, as confirmed by completion of the discharge employment verification package, the Mass League shall discharge the Participant's loan repayment obligation, and the Participant shall have no further obligations to the Mass League. The Mass League reserves the right to terminate the Contract of any Participant who fails to complete the discharge employment verification process within sixty (60) days of the date the discharge packet is sent.



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# Suspension Policy



Effective Date: 6/3/2024

Date of Last Revision: 7/22/2024

## Purpose:

The MA Repay Program – Behavioral Health & Primary Care Suspension Policy governs the parameters for Participants in the MA Repay Program who seek a suspension of service or payment obligations.

## Definitions:

Policy terms have the following meanings:

**Awardee Contract** – Contract, approved by EOHHS, executed between awardee and contractor that: outlines the terms of the program and recoupment; details awardees responsibilities and obligations; and details contractor’s responsibilities and obligations.

**EOHHS** – The Massachusetts Executive Office of Health and Human Services.

**Participant** – Participant refers to an individual with a fully-executed Awardee Contract with the Massachusetts League of Community Health Centers (Mass League) to receive loan repayment services through the MA Repay Program.

## General:

Participants of the Program may seek a suspension of the service or payment obligations. Participants must submit a request for a suspension of the service or payment obligations in writing, setting forth the reasons, circumstances, and causes for the requested suspension.

Suspension will be at the sole discretion of EOHHS. EOHHS may approve a request for a suspension for a period of up to one year. A renewal of this suspension may also be granted.

Good cause for such suspension includes, but is not limited to, medical leave, parental leave, or call to duty in the United States Armed Forces or the National Guard.

Suspensions will extend deadlines up to the number of days of the suspension but not eliminate the service or payment obligations.

Participants may receive an award disbursement while on suspension.