With COVID-19 causing so many changes, it can be hard for residents and medical students to keep up with the additional aid that has become available in the past month. The AMA has created a resource guide that addresses some of the benefits that are currently available for residents and medical students, ranging from loan relief to additional grants to new policies that help make it easier during this challenging time.

**Individual tax rebates**

- **2020 recovery rebates for individuals**

  Individuals will directly receive $1,200 for single taxpayers, $2,400 for married taxpayers filing a joint tax return and $500 per child. These amounts phase down for higher-income taxpayers, meaning an individual who earns above $75,000 or married joint filers earning above $150,000, will receive less than the above-mentioned amounts.

  These payments are structured as tax credits that are automatically advanced to households in 2020 if individuals have filed a 2019 income tax return. Such payments will be received as a direct deposit or check by mail. If a 2019 return has not been filed, rebates will be advanced automatically based on 2018 return information.

  The advancing provision allows taxpayers to receive this credit before 2020 tax returns are filed in early 2021. Generally, all individuals must have Social Security numbers and must have filed a 2018 or 2019 tax return. Students that generate no income, are eligible for the rebate if they file a tax return. (During COVID-19, mission-critical IRS functions will continue.) However, if individuals have been claimed as a dependent by another taxpayer, they are not eligible to receive this rebate.

  For more information, read a summary of recovery rebates and economic impact payments in the CARES Act (PDF).
Helpful provisions for medical students

Defer student loan payments and interest

Defer federal student loan payments, principals and interests through September 30, 2020. Additionally, during this time, involuntary collection related to federal student loans (i.e. delinquent loans) will be suspended.

Federal student loan flexibility

Allows students who withdraw from school as a result of COVID-19 to not return Pell grants, other grant assistance or loans for the semester of withdrawal. Additionally, for students who withdraw from school as a result of COVID-19, the current academic term would be excluded from counting toward lifetime subsidized loan or Pell grant eligibility.

Use of Supplemental Educational Opportunity Grants for emergency aid

Schools can use Supplemental Educational Opportunity Grants as emergency financial aid grants to assist graduate students with unexpected expenses and unmet financial needs that arise as a result of COVID-19.

Federal work-study flexibility during a qualifying emergency

Institutions can transfer unused work-study funds to be used for supplemental grants. Additionally, it gives institutions the ability to issue work-study payments to students who are unable to work due to work-place closures, as a result of COVID-19, as a lump sum or in payments like paychecks.

Continuing education at affected foreign institutions

Supports foreign education institutions, including graduate medical schools, as these offer distance learning to U.S. students receiving Title IV funds for the duration of the COVID-19 pandemic. Title IV funds are federal student aid funds, which are from federal student aid
programs administered by the U.S., such as:

- Department of Education: Title IV funds include Direct Subsidized/Unsubsidized Loan, Direct Graduate PLUS Loan
- Direct PLUS Loan, Federal Pell Grant, Federal Supplemental Educational Opportunity Grant (SEOG) and Federal Perkins Loan; it does not include scholarships from the University or other private organizations

Helpful provisions for residents²

Application of teaching physician regulations

Teaching physicians can provide services with medical residents virtually through audio/video real-time communications technology. This does not apply in the case of surgical, high risk or interventional (or other complex procedures) services performed through an endoscope and anesthesia services.

Counting of resident time at alternate locations

A hospital that is paying the resident’s salary and fringe benefits for the time that the resident is at home or in a patient’s home, but performing duties within the scope of the approved residency program and meets appropriate physician supervision requirements, can claim that resident for IME and DGME purposes. This allows medical residents to perform their duties in alternate locations, including their home or a patient’s home so long as it meets appropriate physician supervision requirements.

Moonlighting considered separately billable services

Outlined in "Medicare and medicaid programs; policy and regulatory revisions in response to the COVID–19 public health emergency" (PDF), for the duration of the PHE for the COVID-19 pandemic, CMS is allowing the services of residents that are not related to their approved GME programs and are performed in the inpatient setting of a hospital in which they have their training program to be separately billable physicians’ services for which payment can be made under the PFS provided that the services are identifiable physicians’ services and meet the conditions of payment for physicians’ services to beneficiaries in
providers in §415.102(a).
Additionally, the resident must be fully licensed to practice medicine, osteopathy, dentistry or podiatry by the state in which the services are performed, and the services cannot be performed as part of the approved GME program.

Exclusion for certain employer payments of student loans

Temporarily expands the definition of employer-sponsored educational assistance to include qualified student loan payments made to employees in 2020. The provision enables employers to provide a student loan repayment benefit to employees on a tax-free basis. Under the provision, an employer may contribute up to $5,250 annually toward an employee’s student loans, and such payment would be excluded from the employee’s income. Payments made by the employer can go to the employee directly or to the lender. Additionally, payments can cover both the principal and interest of the qualified student loan.

Child care for physicians

States are authorized to use funds appropriated under the Child Care and Development Block Grant to provide child care assistance to health care sector employees, emergency responders and other essential workers during the response to the coronavirus regardless of income.

Sick leave

Employees may be exempted from paid sick leave or expanded family and medical leave by their employer under the Families First Coronavirus Response Act if they are a health care provider.
A health care provider is defined as anyone employed at any doctor’s office, hospital, health care center, clinic, post-secondary educational institution offering health care instruction, medical school, local health department or agency, nursing facility, retirement facility, nursing home, home health care provider, any facility that performs laboratory or medical testing, pharmacy or any similar institution, employer or entity. This includes any permanent or temporary institution, facility, location or site where medical services are provided that are similar to such institutions.
National Health Service Corps

For residents that are part of the National Health Service Corps program, the secretary may assign residents, with the voluntary agreement of the resident, to provide health services at such places, and for such number of hours, as the secretary determines necessary to respond to the emergency, provided that such places are within a reasonable distance of the site to which the resident was originally assigned, and the total number of hours required are the same as were originally required of the resident. Find more information in the 2020-2021 postgraduate training bulletin (PDF).

Volunteer liability

The third federal economic COVID-19 stimulus package includes liability protections for volunteer health care professionals during the COVID-19 emergency response. In addition, if you are authorized to prescribe and administer certain countermeasures to treat COVID-19, you may be immune from liability under the Public Readiness and Emergency Preparedness Act (PREP Act).

Also check with your state medical association; you may have additional liability protections under state law, a recent Gubernatorial Executive Order or other emergency response programs, such as the Uniform Emergency Volunteer Health Practitioners Act (UEVHPA) or the Emergency Management Assistance Compact (EMAC).

1S.3548 - CARES Act
2Teaching hospitals, teaching physicians and medical residents: CMS flexibilities to fight COVID-19 (PDF)