Required Applicant Information - Letter of Understanding

2015-2016

Family Medicine    Internal Medicine    Obstetrics & Gynecology
Pediatrics        Preventive Medicine   Psychiatry        Surgery

Circle Applicable Program Name

I ___________________________ ___________________________
First Name          Last Name

attest that I have received the following applicant materials and information. I agree to read the provided information (please initial next to each).

_______ Resident Eligibility, Selection, and Appointment Policy
_______ Sample Resident Appointment Agreement (sample contract)
_______ Resident Stipend Amounts
_______ Benefit Information

By your signature below, you acknowledge your receipt and understanding of the statements above.

_________________________________________    ___________________________
Applicant’s signature and date           Applicant’s printed name

ACGME Institutional Requirement IV.A.3.
An applicant invited to interview for a resident/fellow position must be informed, in writing or by electronic means, of the terms, conditions, and benefits of appointment to the ACGME-accredited program, either in effect at the time of the interview or that will be in effect at the time of his or her eventual appointment. Information that is provided must include: financial support; vacations; parental, sick, and other leaves of absence; and professional liability, hospitalization, health, disability and other insurance accessible to residents/fellows and their eligible dependents.

Section 4.4 of the Match Participation Agreement for Applicants and Programs requires each program to act in good faith to provide complete, timely, and accurate information to interviewees, including:
• a copy of the contract the applicant will be expected to sign if matched to the program and
• the institution's policies on visa status and eligibility for appointment.

The information MUST be communicated to interviewees prior to the Rank Order List Certification Deadline. The NRMP recommends programs obtain signed acknowledgment from each interviewee that confirms institutional policies regarding eligibility for appointment have been shared. If institutional policies regarding applicant eligibility are available online, interviewees should be informed where the information may be found, and the acknowledgment should indicate that the interviewee was notified of the location of policies on the institution’s website.
Resident Eligibility, Selection, and Appointment

I. PURPOSE:
The purpose of this policy is to ensure that the quality of Graduate Medical Education programs at Morehouse School of Medicine (MSM) meet the standards outlined in the Graduate Medical Education Directory: “Essentials of Accredited Residencies in Graduate Medical Education” (AMA-current edition). The process for the selection of residents at MSM shall adhere to the standards outlined in the “Essentials” and this policy.

II. SCOPE:
All Morehouse School of Medicine (MSM) administrators, faculty, staff, residents, and accredited affiliates shall understand and support this and all other policies and procedures that govern both Graduate Medical Education programs and resident appointments at Morehouse School of Medicine.

III. POLICY:
(Note: the resident appointment policy was combined with resident eligibility and selection policy effective 06/01/2014)

3.1. This policy is bound by the parameters of residency education and is also affected by MSM Human Resources policy. Applicants to Morehouse School of Medicine (MSM) residency programs must be academically qualified to enter into a program.

3.2. The institution shall participate in the National Resident Matching Program (NRMP). All MSM Post Graduate Year One (PGY-I) resident positions shall be made available for application by all students graduating from United States and Canadian accredited medical schools as determined by the NRMP. Other applicants eligible to enter the “match,” including International Medical School Graduates (IMGs), may also apply.

3.3. MSM Residency Programs will select from among eligible applicants on the basis of their preparedness and ability to benefit from the program to which they have applied. Aptitude, academic credentials, the ability to communicate effectively, personal characteristics such as motivation and integrity, and the ability to function within parameters expected of a practitioner in the specialty shall be considered in the selection process.
3.4. Programs must include the following GME Programs’ Technical Standards and Essential Functions for Appointment and Promotion information:

3.4.1. Introduction

3.4.1.1. Medicine is an intellectually, physically, and psychologically demanding profession. All phases of medical education require knowledge, attitudes, skills and behaviors necessary for the practice of medicine and throughout a professional career. Those abilities that residents must possess to practice safely are reflected in the technical standards that follow. These technical standards/essential functions are to be understood as requirements for training in all Morehouse School of Medicine residencies and are not to be construed as competencies for practice in any given specialty.

3.4.1.2. Individual programs may require more stringent standards or more extensive abilities as appropriate to the requirements for training in that specialty.

3.4.1.3. Residents in Graduate Medical Education programs must be able to meet these minimum standards with or without reasonable accommodation (see Section III).

3.4.2. Standards—Observation

3.4.2.1. Observation requires the functional use of vision, hearing, and somatic sensations. Residents must be able to observe demonstrations and participate in procedures as required.

3.4.2.2. Residents must be able to observe a patient accurately and completely, at a distance as well as closely.

3.4.2.3. They must be able to obtain a medical history directly from a patient, while observing the patient’s medical condition.

3.4.3. Standards—Communication

3.4.3.1. Communication includes speech, language, reading, writing, and computer literacy.

3.4.3.2. Residents must be able to communicate effectively and sensitively in oral and written form with patients to elicit information as well as perceive non-verbal communications.

3.4.4. Standards—Motor

3.4.4.1. Residents must possess sufficient motor function to elicit information from the patient examination by palpation, auscultation, tapping, and other diagnostic maneuvers.

3.4.4.2. Residents must also be able to execute motor movements reasonably required for routine and emergency care and treatment of patients.

3.4.5. Standards—Intellectual: Conceptual, Integrative, and Quantitative Abilities

3.4.5.1. Residents must be able to measure, calculate, reason, analyze, integrate, and synthesize technically detailed and complex information in a timely fashion to effectively solve problems and make decisions, which are critical skills demanded of physicians.

3.4.5.2. In addition, residents must be able to comprehend three-dimensional relationships and to understand spatial relationships of structures.
3.4.6. Standards—Behavioral and Social Attributes

3.4.6.1. Residents must possess the psychological ability required for the full utilization of their intellectual abilities for: the exercise of good judgment; for the prompt completion of all responsibilities inherent to diagnosis and care of patients; and for the development of mature, sensitive, and effective relationships with patients, colleagues, and other health care providers.

3.4.6.2. Residents must be able to tolerate taxing workloads physically and mentally and be able to function effectively under stress.

3.4.6.3. They must be able to adapt to a changing environment, display flexibility, and learn to function in the face of uncertainties inherent in the clinical problems of patients.

3.4.6.4. Residents must also be able to work effectively and collaboratively as team members.

3.4.6.5. As a component of their education and training, residents must demonstrate ethical behavior consistent with professional values and standards.

3.4.7. Standards—Reasonable Accommodation

3.4.7.1. MSM will make a reasonable accommodation available to any qualified individual with a disability who requests an accommodation. A reasonable accommodation is designed to assist an employee or applicant in the performance of the essential functions of his or her job or MSM’s application requirements.

3.4.7.2. Accommodations are made on a case-by-case basis. MSM will work with eligible employees and applicants to identify an appropriate, reasonable accommodation in a given situation. Complete information is found on the MSM Human Resources Office of Disability Services web page at http://www.msm.edu/Administration/HumanResources/disabilityservices/index.php

3.4.7.3. In most cases, it is the responsibility of the employee or applicant to begin the accommodation process by making MSM aware of his or her need for a reasonable accommodation. See the full MSM Accommodation of Disabilities Policy for information on how to request a reasonable accommodation.

*It is important to note that the MSM enrollment of non-eligible residents may be cause for withdrawal of residency program accreditation.

3.4.8. Title IX Compliance

3.4.8.1. The residency education environment shall be free of undue harassment, confrontation, and coercion because of one’s gender, cultural and religious beliefs, other individual traits, and status or standing.

3.4.8.2. Therefore, in compliance with the Title IX of the Education Amendments of 1972, Morehouse School of Medicine (MSM) does not discriminate on the basis of sex in its education programs and activities, and is required under Title IX and the implementing regulations not to discriminate in such a manner. The prohibited sex discrimination covers sexual misconduct including, but not limited to, sexual harassment and sexual violence, and extends to employment in and admission to such programs and activities.
3.4.8.3. Also in compliance with federal law, including Title VII of the Civil Rights Act of 1964, the Age Discrimination Act of 1975, Section 504 of the Rehabilitation Act, and the Americans with Disabilities Act (and ADAAA amendments), it is the policy of MSM that discrimination against any person or group of persons on the basis of race, color, national origin, religion, gender, sexual orientation, marital status, ancestry, genetic information, age, disability, veteran or military status, or any other legally protected characteristic is specifically prohibited.

3.4.8.4. MSM also prohibits retaliation against members of the MSM community who raise concerns about or report incidents of discrimination based on legally protected characteristics. The following persons have been designated to handle inquiries about and reports made under MSM’s Sex/Gender Nondiscrimination and Sexual Harassment policy.

Marla Thompson, Title IX Coordinator, Direct Dial (404) 752-1871, Fax (404) 752-1639 Email: mthompson@msm.edu
Irma Stewart, Deputy Title IX Coordinator, Direct Dial: (404) 752-1606 Email: istewart@msm.edu
Morehouse School of Medicine, 720 Westview Drive, SW Harris Building, Atlanta, GA 30310

IV. RESIDENT ELIGIBILITY:

The following information is extracted from the Accreditation Council of Graduate Medical Education (ACGME) “Institutional Requirements” of the “Essentials of Accredited Residencies in Graduate Medical Education.”

Applicants with one of the following qualifications are eligible for appointment to accredited residency programs:

4.1. Graduates of medical schools in the United States accredited by either the Liaison Committee on Medical Education (LCME) or the American Osteopathic Association (AOA); graduates of Canadian medical schools approved by the Licentiate of the Medical Council of Canada (LMCC)

4.2. Graduates of medical schools outside the United States and Canada who have a current and valid certificate from the Educational Commission for Foreign Medical Graduates (ECFMG) prior to appointment or have a full and unrestricted license to practice medicine in a United States licensing jurisdiction in their current ACGME specialty/subspecialty program

4.3. United States citizen graduates from medical schools outside the United States and Canada who have successfully completed the licensure examination (USMLE Step 3) in a United States jurisdiction in which the law or regulations provide that a full and unrestricted license to practice will be granted without further examination after successful completion of a specified period of Graduate Medical Education

4.4. Graduates of medical schools in the United States and its territories not accredited by the LCME but recognized by the educational and licensure authorities in a medical licensing jurisdiction who have completed the procedures described in the paragraph above
4.5. Those who have completed the fifth pathway, a period of supervised clinical training for students who obtained their premedical education in the United States, received medical undergraduate abroad, and passed Step 1 of the United States Medical Licensing Examination

4.5.1. After these students successfully complete a year of clinical training sponsored by an LCME-accredited United States medical school and pass USMLE Step 2 components, they become eligible for an ACGME-accredited residency as an international medical graduate.

4.5.2. The Fifth Pathway program is not supported by the American Medical Association after December 2009.

4.6. Applicants who have passed United States Medical Licensing Examination (USMLE) Steps 1 and 2—Clinical Knowledge (CK) and Clinical Skills (CS), or have a full, unrestricted license to practice medicine issued by a United States State licensing jurisdiction.

4.6.1. Selectees cannot begin MSM residency programs prior to passage of the Step 2 Clinical Skills (CS) examination.

4.6.2. This expectation must be met by the time of the MSM-GME Incoming Resident orientation.

4.7. Each resident in our programs must be a United States citizen, a lawful permanent resident, a refugee, an asylee, or must possess the appropriate documentation to allow the resident to legally train at Morehouse School of Medicine.

V. SCREENING AND SELECTION CRITERIA:

5.1. Available MSM resident positions are dependent upon the following criteria:

- The current number of residency program positions authorized by the Accreditation Council for Graduate Medical Education (ACGME)
- The space available in the post graduate year
- Funding and faculty resources available to support the education of residents according to the “educational requirements” of the specialty program

5.2. In order for any applicant to be eligible for appointment to a MSM residency program, the following requirements shall be met along with the eligibility criteria stated in paragraph IV above:

5.2.1. All MSM residency programs shall participate in the National Resident Matching Program (NRMP) for PGY-1 level resident positions. All parties participating in the match shall contractually be subject to the rules of the NRMP. This includes MSM, its residency programs, and applicants. Match violations will not be tolerated.

5.2.2. All applicants to MSM residency programs shall do so through the Electronic Residency Application Service (ERAS). This service shall be used to screen needed information on all applicants. All applicants shall request that three (3) letters of professional or academic references current as of at least 18 months, be sent to the residency program administration.

5.2.3. Any program requests for an official adjustment to the program’s “authorized” resident complement shall be evaluated and approved by the GMEC through the Designated Institutional Official (DIO) prior to submission to the ACGME Residency Review Committee (RRC).
5.2.4. Programs may establish additional selection criteria (e.g.: determine specific minimum scores for the USMLE). Specific criteria must be published for applicants to review as part of the required program-level policy on Eligibility and Selection.

5.2.5. Residency program directors and their Residency Advisory Committees shall have program standards to review MSM residency program applications in order to ensure equal access to the program. Eligible resident applicants shall be selected and appointed only according to ACGME, NRMP, and MSM’s requirements and policies.

5.2.6. Applicants from United States or Canadian accredited medical schools shall request that an original copy of a letter of recommendation or verification from the dean of the medical school be sent to the program administration.

5.2.7. Selectees from an LCME- or AOA-accredited United States medical school shall provide proof of graduation or pending “on-time” graduation. They shall request that official transcripts, diplomas, or “on-time” letters be sent to the program.

5.2.8. Selectees shall provide official proof of passing both USMLE Step 1 and USMLE Step 2 (CK and CS) before they are eligible to begin their appointment in MSM Residency Programs.

5.2.9. Residents are considered transfer residents under several conditions including moving from one program to another within the same or different sponsoring institution and when entering a PGY-2 program requiring a preliminary year even if the resident was simultaneously accepted into the preliminary PGY-1 program and the PGY-2 program as part of the match (e.g.: accepted to both programs right out of medical school). Before accepting a transfer resident, the program director of the “receiving program” must obtain written or electronic verification of previous educational experiences and a summative competency-based performance evaluation from the current program director.

5.2.10. The term “transfer resident” and the responsibilities of the two program directors noted above do not apply to a resident who has successfully completed a residency and then is accepted into a subsequent residency or fellowship program. However, MSM Residency Programs shall identify all residents who would begin the residency program and would have to continue beyond the “Initial Residency Period.”

*The Initial Residency Period is the length of time required to complete a general residency program (e.g.: Internal Medicine—3 years; Psychiatry—4 years).

5.2.11. The State of Georgia and MSM consider any time spent in a residency program as time that must be declared by the applicant when applying for a Temporary Resident Postgraduate Training Permit. This time is applicable whether the applicant completed the period of residency or not. A letter of explanation/verification is required by the applicant and the past residency program director.

5.2.12. Applicants who have not graduated from a United States or Canadian accredited medical school shall request certification of completion (by seal) by an official of the medical school. If the medical school is not in the United States, such official letters shall be in English and/or have a certified or notarized English translation of the content.
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5.2.13. A current (stamped indefinite) certificate from the Educational Commission on Foreign Medical School Graduates (ECFMG) must also be submitted with ERAS documents. Initial ECFMG Certificates should not be pending when applicants are reporting to a residency program. Failure to obtain an ECFMG Certificate by the start date of the resident appointment will void both NRMP and MSM resident agreements.

5.2.14. Program directors must ensure that IMG candidates are eligible for J1-Visa sponsorship before ranking these candidates in NRMP.

5.2.15. All selectees shall complete an MSM Non-Faculty Employment Application. The Human Resources Department is available for assistance.

5.2.16. Upon selection, all academic and employment documents referenced within this section and other documents requested by the residency program must be presented to the program administrator in their original form.

- **5.2.16.1.** As a part of credentials authentication, documents shall be screened for authenticity and must be void of alterations.

- **5.2.16.2.** Program administrators shall screen for signatures, seals, notarization, and other official stamps as being original.

5.3. An Applicant invited to interview for a resident position must be informed, in writing or by electronic means, of the terms, conditions, and benefits of appointment to the ACGME-accredited program, either in effect at the time of the interview or that will be in effect at the time of his or her eventual appointment. Information that is provided must include: financial support; vacations; parental, sick, and other leaves of absence; and professional liability, hospitalization, health, disability, and other insurance accessible to residents/fellows and their eligible dependents.

- **5.3.1.** Personal interviews of applicants shall be conducted by at least two (2) faculty members assigned to the program. These interviews should be documented for the residency program files and be retained for the period determined by MSM management policies. These interviews also become a permanent part of a selected applicant’s file.

- **5.3.1.1.** If telephone interviews are performed, the same standards and documentation criteria must be used to record the interview.

- **5.3.1.2.** In MSM programs, the applicant’s credentials and the faculty interview summary are formally presented to the Residency Program Advisory Committee (RAC) or equivalent.

5.3.2. A faculty consensus is formed on the selections for entry into the NRMP Rank Order Listing or for departmental selection for those positions not placed in the match (i.e.: PGY-2). Final disposition for applicant selection and ranking is done by the residency program director and/or department chairperson.

VI. NON-IMMIGRANT APPLICANTS TO RESIDENCY PROGRAMS:

- **6.1.** MSM supports the AAMC recommendation that the J-1 visa is the more appropriate visa for non-immigrant International Medical School Graduates (IMGs) seeking resident positions in MSM-sponsored programs (Reference: AAMC Legislative and Regulatory Update, October 15, 1993).

- **6.2.** All IMGs shall provide a current (stamped indefinite) certificate of proof of meeting the Educational Commission for Foreign Medical Graduates (ECFMG) requirements for clinical proficiency.
6.3. The Exchange Visitor Program is administered by the United States Department of State. The ECFMG is the sponsoring institution for Alien Physicians in GME programs under the Exchange Visitor Program.

6.3.1. Applicants may be considered for selection by the residency program based on their academic qualifications and eligibility for sponsorship by the ECFMG.

6.3.2. The MSM-GME office is the school liaison for processing applications for ECFMG sponsorship of non-immigrants for J-1 status.

6.4. Applicants seeking residency positions that have other non-immigrant status such as Transitional Employment Authorization Documents, Asylum status, etc., may need to seek legal counsel to effect entry into a residency program. This review will be coordinated through the MSM-GME office along with the MSM-International Programs office for final determination.

6.5. Visa Categories for International-Born or -Educated Physicians Applying to United States Graduate Medical Education Programs

6.5.1. Residency programs that employ individuals on visas will be responsible for an annual fee for each visa, effective each July 1.

6.5.2. Consular Processing of Physician Visas

6.5.2.1. United States Embassies/Consulates require face-to-face interviews for all initial visa stamps and in some instances for the renewal of the same visa stamp.

6.5.2.2. It can take several months for a person to receive an appointment at the Embassy/Consulate to apply for the visa stamp.

6.5.2.3. Embassy/Consulate security checks take about one (1) month.

6.5.2.4. If an applicant is selected for a security check in Washington, DC, then the process could take up to five (5) months.

6.5.2.5. After this process is started, no one can interfere.

6.5.3. The J-1 Exchange Visitor Visa

6.5.3.1. Sponsored by the Educational Commission for Foreign Medical Graduates (ECFMG), this is the most common type of visa category used by institutions offering graduate medical education training (residency or fellowships) to international medical graduates (IMGs).

6.5.3.2. IMGs who seek to obtain this type of visa must first apply to the ECFMG for certification.

6.5.3.3. ECFMG offers the USMLE exams and is the sponsoring organization providing assurance to residency programs that the candidates meet defined qualifications equivalent of a United States medical degree. See www.ecfmg.org.

6.5.3.4. IMGs applying to Residency Programs requiring the J-1 Visa must contact the specific residency program and the Office of Graduate Medical Education where they have been accepted in a program to coordinate the J-1 visa sponsorship with the ECFMG. ECFMG will issue the visa document (DS-2019) after the institution submits the individual’s application to ECFMG.
6.5.3.5. An ECFMG Certificate is not required if the physician is a graduate of a Canadian or United States Medical School. Canadian Medical School graduates must have passed the equivalent Canadian medical licensing exam.

6.5.3.6. An ECFMG Certificate is not required for physicians who are graduates of LCME-Accredited schools in Puerto Rico.

6.5.3.7. A visa is required if the physician is not a United States citizen or permanent resident of the United States.

6.5.4. Summary of J-1 Visa for IMGs

6.5.4.1. SEVIS Fee must be paid by accepted applicant prior to the United States Embassy interview in home country.

6.5.4.2. Applicant is responsible for the annual application process and the corresponding fee.

6.5.4.3. J2 Dependents must enter with their own DS-2019.

6.5.4.4. The visa is easy to coordinate or obtain for both the individual and institution.

6.5.4.5. The visa provides possible tax advantages (for a limited period of time).

6.5.4.6. The visa is recognized and accepted by most institutions for IMG residency training.

6.5.4.7. The applicant's spouse may seek work permission while in the United States (must process USCIS Form I-765 after in the United States).

6.5.4.8. The applicant must receive J-1 visa status while in his or her home country; it is strongly recommended that status change does not occur in the United States.

6.5.4.9. The visa has a mandatory two-year foreign residency requirement (Section 212[e]) for all IMGs attending graduate medical education programs in the United States at the completion of training.

6.5.4.10. Obtaining a waiver of the foreign residency requirement is both troublesome and costly.

6.5.4.11. The visa may be extended only for Board Certification; during this time, J visitor cannot work.

6.5.4.12. The DS-2019 (J-1 application) is renewed yearly with a seven (7)-year limit or length of residency program, whichever comes first.

6.5.4.13. The J-1 Exchange Visitor may enter the United States 30 days prior to the start of the J-1 visa and cannot be paid prior to the start date. The J1 visitor must NOT enter the United States 30 days AFTER the start date listed on form DS-2019.

6.5.4.14. After the J-1 period ends, the exchange visitor has 30 days to exit the United States and cannot work during this "grace period."

6.5.4.15. Under this visa status, moonlighting is not permitted.

6.5.4.16. It is very difficult to process J-1 applications to non-accredited Residency/Fellowship Programs. The ECFMG uses the ACGME’s Green Book for reference of accredited programs and their program duration.
6.5.4.17. The J2 visa status is acceptable for Graduate Medical Education training at Morehouse School of Medicine (MSM) but can create problems since the J2 depends on the J1 Primary Holder. The J2 must have a valid EAD card and must also maintain the EAD card.

6.5.5. The H1B Professional in a Specialty Occupation—for IMGs Seeking Graduate Medical Training in Residency or Fellowships

6.5.5.1. The H1B visa must be sponsored by the institution where the individual will attend their residency training program. It is a non-immigrant visa requiring the institution to make attestations to the Department of Labor about the position and salary. There are different regulations and restrictions on the institution filing an H1B as compared to the J1 visa. Note that the H1B applicant must have sufficient time remaining on the H1B visa to complete his or her training program. H1B visa terms max out after a period of six (6) years. The H1B visa is typically issued in three (3)-year increments.

6.5.5.2. Morehouse School of Medicine supports the H1B visa in very limited circumstances.

6.5.5.3. The applicant file must be reviewed by the Graduate Medical Education Office, the respective Residency Program, and the Office International Program Services.

6.5.5.4. An applicant holding an H1B visa for research or other non-clinical employment is NOT eligible for an H1B visa at Morehouse School of Medicine.

6.5.5.5. Filing fees as well as all regulatory fees will be at the expense of the hiring department.

6.5.5.6. Morehouse School of Medicine’s Office of International Program Services requires the use of its dedicated resource for outside counsel on matters of immigration, and all filings will be through that resource.

6.5.5.7. An H1B submitted by the institution to the United States Department of Homeland Security requires additional documentation to be approved for clinical work, including but not limited to, the following:
   - ECFMG Certification (not required for Canadians or those educated in the United States)
   - PASS on the USMLE Exams, including USMLE Step 3 (If the applicant has NOT received Step 3 results by the Rank Order Deadline, they will not be considered for an H1B visa).
   - Must have a Georgia medical license or training permit in process and obtain a letter from GCMB before the application is reviewed by the United States Department of Homeland Security
   - Copy of home country medical registration and/or licensure (optional)
   - Copy of Medical Degree, translated to English
   - Filing fees to the United States Department of Homeland Security
   - Curriculum Vitae
   - Other related immigration documents (passport copy, I-94, J1 Waiver document, etc.)
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- Institutional documents required by the institution
- Attestation that the Department will pay the cost of reasonable transportation back to the physician’s home country or last country of residence if the Department, for any reason, dismisses the physician on H during the duration of the dates listed on the H Approval Notice and the beneficiary requests to be returned home.
- In order to be considered for an H1B visa, the applicant must provide documentation of Clinical Experience in the United States or recent (within the past 12 months) clinical experience in another country.

6.6. MSM H1B Visa Requirements

6.6.1. H-1B Visa Procedure

At the discretion of the individual training programs, the H-1B visa may be considered for candidates who have passed the USMLE Step 3 exam and who provide documentation that meets one or more of the following criteria:

- Applicant currently holds a valid H-1B visa at this university or another institution (provide copy of Form I-797, Notice of Action).
- Applicant is the spouse/registered domestic partner of a United States citizen, permanent resident (“green card” holder), or individual holding an H-1 or O-1 visa (provide copy of marriage certificate or H-4 document).
- Applicant/applicant’s spouse has a permanent resident petition pending with a likely chance of success (provide copy of proof of petition).
- Applicant is not eligible for or would face a hardship on a J-1 visa due to unique immigration circumstances (e.g.: applicant already obtained a J-1 waiver; applicant who has to return home periodically to care for ill parent faces higher risk of being denied re-entry on J-1 visa) (provide letter explaining reason for hardship).
- Applicant’s spouse/registered domestic partner is employed by the university in a faculty or other continuing position (provide letter identifying spouse’s position).
- Applicant is a graduate of a medical school in the United States, Canada, or Puerto Rico accredited by the Liaison Committee on Medical Education (LCME) (provide copy of medical school diploma).
- The department has offered or is strongly considering the applicant for a faculty or research position after applicant completes the training program (provide letter identifying intentions of department after applicant finishes training program).

6.6.2. Advantages of the H1B

- The H1B does not carry the two-year home residency requirement at the completion of the residency program.
- The institution may be able to retain high-skilled/qualified international-training physician for faculty and/or staff.
- The H1B dates can be processed with a maximum of three (3) years; it is renewable for an additional three (3) years.
- It is a valuable recruiting tool to attract higher levels of talent.
6.6.3. Disadvantages of the H1B

- Institutional policy restricts the use of H1B for IMGs (AAMC influence).
- Department must pay $500 anti-fraud fee for new H1B resident or fellow.
- If the applicant is in the United States in another status while the H1B application is pending at USCIS, the applicant must not travel outside of the United States.
- The H visa is limited to six (6) years; the applicant may not have enough time to complete the GME program.
- There is a possibility the H1B will not be received by July 1. If the applicant is in the Match, there might not be enough time to process the H visa. USCIS is currently taking up to three (3) months to review an application, which may take up to one (1) month to prepare.
- Premium Processing is available for a cost which is currently $1,225. USCIS will process the Premium Process application within 15 days. The applicant can pay immigration fees, with the exception of the $500 anti-fraud fee.
- A spouse on the H-4 dependent visa cannot work while in the United States.
- See section on Security Requirements.
- The H physician may enter the United States 10 days prior to the start date on the H Notice and cannot begin employment until the H1B start date. After the H period ends or the person is terminated, the non-immigrant has up to 10 days to leave the United States. No employment is allowed during this 10-day “grace period.”
- The Department incurs financial responsibility if the H physician is dismissed for any reason during the period of time listed on the H approval form and must pay costs of transportation for the physician to return to his or her country of last permanent residence or home country.

6.6.4. If a residency/fellowship is considering an applicant who is requesting H1B visa status from MSM, the program must complete the following H1B Visa Information Form BEFORE forwarding the applicant’s package to the International Office for review.
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MSM Office of International Program Services and Graduate Medical Education
Applicant H-1B Visa Information Form

INFORMATION MUST BE COMPLETED FOR H1B VISA CANDIDATE

Today’s Date: _______________________________________________
Name (First/Last): ____________________________________________
E-Mail: ______________________________________________________
Residency Program (applying for) ________________________________
PGY level: ___________________________________________________
Current Visa: ________________________________ Expires _____________
Current Visa Sponsor: __________________________________________
Current Visa Category: Clinical____ Research____
Current H # (if applicable): ________________________________ Date of initial H: _______________

Important: Forward copy of current visa approval form, EAD, or Alien Reg. Card to Residency Program Office.

Dates of Anticipated New H Visa (from XX/XX/XX to XX/XX/XX): __________________________
Have you been on any other type of visa in the U.S. within the past 5 years? If so, describe fully:
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

Country of Birth: ____________________________________________
Country of Citizenship: _________________________________________
Date of Birth: ________________________________________________
Social Security Number: _________________________________________
Date of Last Entry to U.S.: ______________________________________

I-94 #: _________________________________________________________

Medical School Name and Location _________________________________
Date of Medical School Graduation: ______________________________
Has applicant passed USMLE Step 3? _____________________________
If pending, give date of USMLE Step 3: __________________________
ECFMG #: _____________________________________________________
Is applicant eligible for Mass. Limited License? ______________________
Residency Coordinator Name: _____________________________________
Date of Match: ________________________________________________

Residency Program Comments:
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

Date Reviewed by International Office: ______________________________
International Office Comments: ______________________________________
______________________________________________________________________________________
______________________________________________________________________________________

Date Reviewed by GME Applicant Committee: _______________________
Comments and Final Decision: _______________________________________
______________________________________________________________________________________
______________________________________________________________________________________
VII. RESIDENT APPOINTMENTS:

7.1. Prior to appointment to the program, residents must be provided with information that describes the program’s current accreditation status, educational objectives, and structure.

7.2. Morehouse School of Medicine Resident appointments shall be for a maximum of 12 months from July to June, year to year.

7.2.1. At MSM, a “Resident Appointment” is defined as a non-faculty position granted to an individual based on his or her academic credentials and the meeting of other eligibility criteria as stated in MSM and residency program policies and standards.

7.2.2. This position is also that of a “physician in training.”

7.3. Resident appointments are managed by the Graduate Medical Education Office on behalf of the Senior Vice President for Academic Affairs and are processed by the Human Resources Department (HRD).

7.4. Residents may enter the residency program at other times during a given Post Graduate Year (PGY) but must complete all requirements according to the structure of the program. This usually means completing the PGY-1 year from the date the Resident started. There are no provisions for “shared” or “part-time” positions in MSM Residency programs.

7.5. A selected applicant must be formally offered a position in the residency program. A written agreement shall be entered into between the applicant and Morehouse School of Medicine (MSM).

7.5.1. This agreement signed by the residency program director and department chairperson shall constitute a recommendation for an academic non-faculty appointment to the Dean.

7.5.2. Approval of the selection shall be by the Director of Graduate Medical Education as the Dean’s designated approval authority.

7.6. Residents shall not perform any clinical duties until they:

7.6.1. Are processed through the MSM Human Resources Department and officially become a part of the MSM personnel system; and

7.6.2. Have obtained a Georgia Temporary Resident Postgraduate Training Permit or possess a permanent physician’s license.

7.7. References to support this policy including the Resident Appointment Agreement are available in the GME Office and website at

http://www.msm.edu/Education/GME/index.php
Morehouse School of Medicine (MSM) hereby offers you, **Resident Name**, a position as a Postgraduate Year (PGY) **PGY Level** Resident in the **Program Name** Morehouse School of Medicine Residency Education Program beginning **Start Date** and ending **End Date**, subject to the execution of this Agreement by all parties.

This relationship is governed by all policies and conditions required by MSM, its residency programs, and its educational affiliates (participating sites), as well as by the laws of the United States and the State of Georgia. A “Resident” is defined as a physician-in-training matriculating within a defined period of post-graduate medical education, under the supervision of faculty teachers and/or attending physicians in accordance with the educational standards for residency as defined by the Accreditation Council Graduate Medical Education – Residency Review Committees (ACGME - RRCs) and the American Board of Medical Specialties (ABMS).

1. **Responsibilities:** As a Resident, you shall abide by (i) the conditions and responsibilities set forth within all MSM policies and procedures, and (ii) the rules and regulations of the health care profession and the educational affiliates and facilities to which the MSM residency program director assigns you. You shall always be cognizant of the laws of the United States and the State of Georgia.

   1.1 You shall provide compassionate, timely, and appropriate patient care under the supervision of residency program faculty according to the MSM-GME **Residents Learning and Work Environment policy**, which can be found in the **GME Policy Manual**.

   1.2 You shall conform to the ethical and professional standards of the medical profession and accept the duties, responsibilities, and rotations assigned by the MSM residency program director or the director's designee.

2. **Duration:** MSM Resident appointments are for a maximum of 12 months (July to June), year-to-year. You may enter the program at other times during a post graduate year, but must complete all requirements according to the goals, objectives, requirements and structure of the program.

3. **Compensation:** You will be paid in 26 bi-weekly installments based upon an annual rate of **$Annual Salary Amount**. When you work less than a month for that period, compensation shall be computed on a daily rate.

4. **Conditions of Employment:** Any conditions or provisions described in this Agreement, which are dependent upon the availability of resources beyond the control of MSM or its participating affiliates, shall not be binding on MSM in the event of the unavailability or loss of these resources, except where the loss of these resources would jeopardize the continued accreditation of the MSM residency program or your education.

   4.1 MSM and its residency programs follow the Terms and Conditions of the Match Participation Agreement between Participating Institutions and the NRMP. Once a party has matched or a position has been offered and accepted through the Match Week Supplemental Offer and Acceptance Program (SOAP), a waiver of the binding commitment may be obtained only from the NRMP. The NRMP recommends that each program director, institutional official, and applicant carefully read the policies and procedures available at [http://www.nrmp.org/policies/](http://www.nrmp.org/policies/).
4.2 As a condition of this appointment, you must:

4.2.1 Be a U.S. Citizen, lawful permanent resident, refugee, asylee, or possess the appropriate documentation to allow you to legally train at Morehouse School of Medicine.

4.2.2 Maintain or possess an M.D. degree from an LCME accredited medical school within the United States, Puerto Rico or Canada, a D.O. degree from an AOA accredited school of osteopathy, or an ECFMG certificate which will be valid on the day training begins. Graduates of Canadian schools must hold an LMCC Certificate.

4.2.3 Maintain or possess an active Georgia Medical License or Physician Training License.

4.2.4 Successfully have passed the USMLE/COMLEX Step 1 and 2 examinations prior to entering a residency.

4.2.5 Consent to and pass a background investigation.

4.3 You are subject to a criminal background check, drug screenings and other checks and examinations as required by the MSM-Human Resources Department and its educational affiliates. Failure by you to be found compliant and/or acceptable on these checks and examinations is grounds for MSM-GME terminating this Agreement. MSM reserves the right to dismiss you from the residency program if it subsequently discovers any misrepresentation, false or incomplete information or omission of facts requested during the application, interview and/or hiring process.

5 Accreditation: The Residency Program Director will inform you of the program’s current accreditation status. In the event of any notice of withdrawal of accreditation by the ACGME, either voluntary or involuntary, MSM will use reasonable efforts to ensure that you are allowed to complete your mandatory period of residency education. Failing that, MSM will aggressively assist you in acquiring a position in another residency program.

6 Program Requirements: MSM, through the Residency Program Director, shall provide you with the ACGME program requirements, residency goals, objectives, expectations, policies and schedules which will provide support of your education process. Your schedule of activities shall be set in accordance with the requirements, practices, and procedures of your specialty program. It is recommended that you remain cognizant of the requirements of your particular specialty board which can be found on the American Board of Medical Specialties web site.

7 Progression: Educational standards for progression within a residency program are to be evaluated and certified by the Program Director in order for a Resident to progress to the next education level in the program. This process is outlined in the MSM-GME Resident Promotion policy.

7.1 In the event that an adverse academic decision of non-promotion (delay) to the next Post Graduate year (PGY) or non-renewal of appointment is made by the Program Director, you will be given at least four (4) months’ notice whenever possible or feasible. In the event of an adverse decision, such as suspension or dismissal, you have access to a fair, reasonable, and readily available grievance process that is described in the MSM-GME Adverse Academic Decisions and Due Process policy.

7.2 During the term of this Agreement, any and all grievances brought by you against MSM, including, but not limited to grievances for a breach of this Agreement, shall be governed in accordance with the procedures set forth in the MSM Human Resources policy titled Sex/Gender Nondiscrimination and Sexual Harassment policy.

8 Insurance: MSM shall provide you with professional liability insurance coverage of the nature described in the Professional Liability Insurance Coverage Letter, attached hereto as Exhibit 1 and incorporated into this Agreement by reference. Such coverage shall be limited to your
professional educational activities which are sanctioned by MSM and which are related to, or are a part of, the residency program. This coverage shall extend beyond the completion of your residency at MSM for actions which occur during your tenure.

9 **Resident Benefits:** In addition to the salary, Morehouse School of Medicine shall offer you and your eligible dependent health insurance benefits. Residents are also provided disability insurance benefits, confidential counseling and psychological services, vacation, parental, sick or other leave with coverage starting the first recognized day of the training program. These offerings are administered by MSM Human Resources in accordance with the vendor programs and/or policies in force at the time of this agreement.

10 **Leave:** As addressed in the MSM-GME Resident Leave Policy, you are cautioned that in order to fulfill the program requirements and that of the specialty certification board, it may be necessary for you to spend additional time in the program to make up for time lost while you have used vacation, sick leave, Family and Medical Leave and the various types of emergency leave, or Leave of Absence Without Pay.

10.1 **Resident Vacation Leave:** Residents are allotted 15 days compensated leave per academic year (from July through June). Each residency program is responsible for the administration of Residents’ leave to include scheduling, granting and reporting leave to the department and the MSM-Human Resources Department. Vacation blocks shall be designed within the structure of the residency program schedules.

10.2 **Resident Sick Leave:** Compensated sick leave is 15 days per year. This time can be taken for illness, injury and medical appointments for the Resident or for the care of an immediate family member. Sick leave is not accrued from year to year. A combination of Sick leave and vacation leave may be used to care for oneself or an immediate family member. When these two leave categories are exhausted, any additional leave will be uncompensated (also see your program specific Resident Leave policy).

10.3 **Family and Medical Leave Act (FMLA):** All Residents should contact the Human Resources Department (HRD) and the Office of Disability Services and Leave Management  ods@msm.edu for guidance and questions about FMLA. The program requirements and the specifications of the program specialty board apply to the time required to make up absences.

10.4 **Leave of Absence Without Pay (LWOP):** When possible, requests for leaves of absence without pay shall be submitted by Residents in writing to the residency program director for disposition far in advance of any planned leave. All requests shall identify the reason for the leave and the duration. Residents should discuss with the program director on the impact of leave on possible delay in program completion. The MSM-Human Resources Department shall determine the feasibility and all applicable criteria prior to a Resident being granted LWOP and shall advise both the Resident and the residency program on details and procedures.

10.5 **Other Leave Types:** All leave types are explained in detail in the Morehouse School of Medicine Human Resources policy manual.

10.6 **Eligibility for Specialty Board Examination:** You should become familiar with the requirements of your specialty board as listed on the American Board of Medical Specialties (ABMS) website or on the individual specialty website. Your program administration can assist you in finding this information.

11 **Duty Hour Policy:** The MSM-GME Residents Learning and Work Environment – Duty Hour policy comprehensively details your duty hour requirements. Violations of this policy are not tolerated by MSM-GME or residency administration.
Moonlighting: Because residency education is a full-time endeavor, the residency program director must ensure that outside professional activities ("moonlighting") do not interfere with your ability to achieve the goals and objectives of the educational program. At MSM, moonlighting activities are not encouraged. The decision to allow you to engage in outside professional activities rests with the residency program director, and you must gain written permission from the residency program director prior to the start of these activities. PGY One (1) Residents are not permitted to moonlight. Residents not in good standing are prohibited from moonlighting. Residents holding a J-1 Visa may not moonlight. Please refer to the MSM-GME Residents Learning and Work Environment – Moonlighting policy for complete details.

Counseling: Short term counseling is available from MSM Counseling Services (404-752-1789). MSM has an Employee Assistance Program (EAP), CARE 24, available for Residents as a self-referral or for family assistance. Residents are briefed on these programs by HR during incoming orientation. Residents are briefed annually on the Drug Awareness Program, Resident impairment issues and family counseling. More information regarding these programs is available in the Human Resources Department (404-752-1600) or directly (1-888-887-4114).

Title IX Compliance: The residency education environment shall be free of undue harassment, confrontation and coercion because of one’s gender, cultural and religious beliefs, other individual traits, and status or standing. Therefore, in compliance with the Title IX of the Education Amendments of 1972, Morehouse School of Medicine (MSM) does not discriminate on the basis of sex in its education programs and activities and is required under Title IX and the implementing regulations not to discriminate in such a manner. The prohibited sex discrimination covers sexual misconduct, including, but not limited to, sexual harassment and sexual violence, and extends to employment in and admission to such programs and activities. Also in compliance with federal law, including Title VII of the Civil Rights Act of 1964, the Age Discrimination Act of 1975, Section 504 of the Rehabilitation Act, and the Americans with Disabilities Act (and ADAAA amendments), it is the policy of MSM that discrimination against any person or group of persons on the basis of race, color, national origin, religion, gender, sexual orientation, marital status, ancestry, genetic information, age, disability, veteran or military status, or any other legally protected characteristic is specifically prohibited. MSM also prohibits retaliation against members of the MSM community who raise concerns about or reports incidents of discrimination based on legally protected characteristics. The following persons have been designated to handle inquiries about and reports made under MSM’s Sex/Gender Nondiscrimination and Sexual Harassment policy.

Marla Thompson, Title IX Coordinator, Direct Dial (404) 752-1871, Fax (404) 752-1639
Email: mthompson@msm.edu
Irma Stewart, Deputy Title IX Coordinator, Direct Dial: (404) 752-1606
Email: istewart@msm.edu

Morehouse School of Medicine, 720 Westview Drive, SW Harris Building, Atlanta, GA 30310

Accommodations: MSM will make a reasonable accommodation available to any qualified individual with a disability who requests an accommodation. A reasonable accommodation is designed to assist an employee or applicant in the performance of the essential functions of his or her job or MSM’s application requirements. Accommodations are made on a case-by-case basis. MSM will work with eligible employees and applicants to identify an appropriate, reasonable accommodation in a given situation. Complete information is found on the MSM Human Resources Office of Disability Services web page at http://www.msm.edu/Administration/HumanResources/disabilityservices/index.php

Program Closure: In the event of a MSM residency program closure, either voluntarily or involuntarily, MSM will use its best efforts to assist all current Residents in obtaining a comparable position in another ACGME accredited residency program.

No Restrictive Covenants. MSM does not impose restrictive covenants or non-competition clauses on Resident graduates and alumni.
RESIDENT APPOINTMENT ACCEPTANCE

I accept the above-described position in the Morehouse School of Medicine Residency program. I agree to abide by the rules and regulations of Morehouse School of Medicine and those of the participating affiliates at which I will work during the course of my training. I also agree to abide by the laws of the United States and the State of Georgia as they affect my status as a Resident physician.

__________________________________________  ______________________
Resident’s Signature                          Date

__________________________________________  ______________________
Name (type or print)                          Social Security Number (Required)

DEPARTMENTAL SIGNATURES

We recommend appointment of this applicant as a Resident in our MSM residency program. This applicant was vetted through the departmental residency screening and interview processes. We have reviewed the educational credentials and the eligibility for both non-faculty academic appointment and employment of the applicant signing this agreement.

__________________________________________  ______________________
Program Director’s Signature                  Date

__________________________________________  ______________________
Department Chairperson’s Signature            Date

APPROVED

The President and Dean, upon the recommendation of the residency program director and/or department chairperson, hereby appoints you to a position in the residency program. The signature below of the Director of Graduate Medical Education (Administration) represents this approval.

__________________________________________  ______________________
Director, Graduate Medical Education Signature Date
Exhibit 1

PROFESSIONAL LIABILITY COVERAGE

This letter shall be completed upon appointment to a Morehouse School of Medicine Residency Program and at any time a Resident enters into moonlighting activities.

This is to certify that I, _______________________________________, am a Resident Physician at Morehouse School of Medicine. As a Physician in training, I understand that all professional activities that are sanctioned by Morehouse School of Medicine and related to, or are a part of, the Residency Education Program are covered by the following professional liability coverage:

- $1 million per/occurrence and; $3 million annual aggregate; and;
- Tail coverage for all incidents that occur during my tenure as a Resident in accordance with the above.

In addition, I understand that the above professional liability insurance coverage does not apply to professional activities in which I become involved outside of the MSM Residency Program, and that upon written approval by the residency program director to moonlight, I am personally responsible for becoming licensed and securing adequate coverage for these outside activities from the respective institutions or through my own resources.

In addition, all of these activities shall be recorded and reported to the residency program director for evaluation.

Check appropriate circle: Resident Agreement (   ) Moonlighting Request (   )

Signed: ________________________________________ Date: ____________________________

Last Four of Social Security Number: ______________________

Home Address: _________________________________________________________

Phone Number: _______________________________

Return Signed Original as Part of the Resident Appointment Agreement
### Morehouse School of Medicine Graduate Medical Education
#### 2015-16 Resident/Housestaff Stipends

<table>
<thead>
<tr>
<th>Level</th>
<th>2015-16 Annual Stipend Amount</th>
<th>2015-16 Monthly Stipend Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>PGY 1</td>
<td>$53,263.98</td>
<td>$4,438.67</td>
</tr>
<tr>
<td>PGY 2</td>
<td>$56,236.59</td>
<td>$4,686.38</td>
</tr>
<tr>
<td>PGY 3</td>
<td>$58,445.19</td>
<td>$4,870.43</td>
</tr>
<tr>
<td>PGY 4</td>
<td>$60,994.66</td>
<td>$5,082.89</td>
</tr>
<tr>
<td>PGY 5</td>
<td>$62,678.44</td>
<td>$5,223.20</td>
</tr>
<tr>
<td>PGY 6</td>
<td>$64,947.68</td>
<td>$5,412.31</td>
</tr>
<tr>
<td>PGY 3 Chief Resident</td>
<td>$60,299.20</td>
<td>$5,024.93</td>
</tr>
<tr>
<td>PGY 4 Chief Resident</td>
<td>$62,848.66</td>
<td>$5,237.39</td>
</tr>
<tr>
<td>PGY 5 Chief Resident</td>
<td>$64,532.44</td>
<td>$5,377.70</td>
</tr>
</tbody>
</table>
The following information provides a list of detailed benefits provided by medical schools and hospitals nationally. Data and information is collected, aggregated and made available from the 2014-15 AAMC Survey of Resident/Fellow Benefits. Survey responses equal 186 medical schools and hospitals.

Morehouse School of Medicine is in the 75th percentile nationally for resident stipend levels. Please see 2015-16 stipend amounts at http://www.msm.edu/Education/GME/index.php

### PROVIDED FUNDS OR TOOLS TO RESIDENTS

<table>
<thead>
<tr>
<th>All MSM Programs provide the following unless otherwise indicated:</th>
<th>Percent Yes - Nationally</th>
<th>Percent No - Nationally</th>
<th>MSM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Books</td>
<td>38.1%</td>
<td>61.9%</td>
<td>YES</td>
</tr>
<tr>
<td>Computer/laptop (Family Medicine &amp; Preventive Medicine)</td>
<td>29.7%</td>
<td>70.3%</td>
<td>YES</td>
</tr>
<tr>
<td>Education Allowance (travel cost to present scholarly work)</td>
<td>46.4%</td>
<td>53.6%</td>
<td>YES</td>
</tr>
<tr>
<td>Mobile Devices - phones, tablets, etc. (All Programs except FM &amp; PM)</td>
<td>39.9%</td>
<td>60.1%</td>
<td>YES</td>
</tr>
<tr>
<td>Other – Board review, Retreats, etc. Preparation of Posters</td>
<td>23.5%</td>
<td>76.5%</td>
<td>YES</td>
</tr>
<tr>
<td>Professional Society Dues</td>
<td>43.8%</td>
<td>56.2%</td>
<td>YES</td>
</tr>
<tr>
<td>Books</td>
<td>39.5%</td>
<td>60.5%</td>
<td>YES</td>
</tr>
</tbody>
</table>

### ANNUAL VACATION AND OTHER PAID LEAVE FOR RESIDENTS

<table>
<thead>
<tr>
<th>Days Offered</th>
<th># and % of Hospitals and Medical Schools (n=186) that provide the same</th>
<th>MSM Institution/GME Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Vacation</td>
<td>11 to 15 days</td>
<td>68 (39.5%)</td>
</tr>
<tr>
<td>Sick Days</td>
<td>11 to 15 days</td>
<td>70 (48.6%)</td>
</tr>
<tr>
<td>Holidays</td>
<td>0 to 10 days</td>
<td>112 (89.6%)</td>
</tr>
<tr>
<td>Personal Days</td>
<td>0 to 10 days</td>
<td>110 (94.8%)</td>
</tr>
<tr>
<td>Total paid time off including sick leave</td>
<td>29 or more days</td>
<td>101 (64.3%)</td>
</tr>
<tr>
<td>Financial Counseling and Educational Debt Management Services</td>
<td></td>
<td>Yes 69.6%</td>
</tr>
<tr>
<td>Career Counseling and Placement Services</td>
<td></td>
<td>Yes 51.1%</td>
</tr>
</tbody>
</table>

### HEALTH BENEFITS

<table>
<thead>
<tr>
<th>Premium Medical Coverage</th>
<th>All Institutions n=186</th>
<th>MSM Institution/GME Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resident health benefits begin on 1st recognized day of residency</td>
<td>90.7% Yes</td>
<td>YES</td>
</tr>
<tr>
<td>Residents are eligible to receive Employee Assistance Program</td>
<td>96.7% Yes</td>
<td>YES</td>
</tr>
<tr>
<td>Residents eligible to receive Employee Health Services</td>
<td>90.1% Yes</td>
<td>YES</td>
</tr>
<tr>
<td>Institution offers a flexible or “cafeteria style” benefits plan to residents</td>
<td>57.9% Yes</td>
<td>YES</td>
</tr>
<tr>
<td>HEALTH BENEFITS</td>
<td>Portion Offered</td>
<td>All Institutions (Hospitals &amp; Medical Schools) n=186</td>
</tr>
<tr>
<td>----------------</td>
<td>----------------</td>
<td>----------------------------------------------------</td>
</tr>
<tr>
<td><strong>Premium Medical Coverage</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual Coverage</td>
<td>Fully Paid</td>
<td>58</td>
</tr>
<tr>
<td></td>
<td>Cost Shared</td>
<td>119</td>
</tr>
<tr>
<td>Resident Plus Spouse</td>
<td>Fully Paid</td>
<td>36</td>
</tr>
<tr>
<td></td>
<td>Cost Shared</td>
<td>140</td>
</tr>
<tr>
<td>Resident Plus Domestic Partner</td>
<td>Fully Paid</td>
<td>23</td>
</tr>
<tr>
<td></td>
<td>Cost Shared</td>
<td>107</td>
</tr>
<tr>
<td>Resident Plus Children</td>
<td>Fully Paid</td>
<td>37</td>
</tr>
<tr>
<td></td>
<td>Cost Shared</td>
<td>140</td>
</tr>
<tr>
<td>Resident Plus Spouse and Children</td>
<td>Fully Paid</td>
<td>38</td>
</tr>
<tr>
<td></td>
<td>Cost Shared</td>
<td>140</td>
</tr>
<tr>
<td>Resident Plus Domestic Partner and Children</td>
<td>Fully Paid</td>
<td>21</td>
</tr>
<tr>
<td></td>
<td>Cost Shared</td>
<td>105</td>
</tr>
<tr>
<td>Vision Care</td>
<td>Included in group medical insurance</td>
<td>68</td>
</tr>
<tr>
<td></td>
<td>Separate Plan Offered</td>
<td>113</td>
</tr>
<tr>
<td>Prescription Drugs</td>
<td>Included in group medical insurance</td>
<td>170</td>
</tr>
<tr>
<td></td>
<td>Separate Plan Offered</td>
<td>16</td>
</tr>
<tr>
<td>Behavioral and Mental Health Care</td>
<td>Included in group medical insurance</td>
<td>176</td>
</tr>
<tr>
<td></td>
<td>Separate Plan Offered</td>
<td>7</td>
</tr>
<tr>
<td>Substance Abuse Treatment</td>
<td>Included in group medical insurance</td>
<td>175</td>
</tr>
<tr>
<td></td>
<td>Separate Plan Offered</td>
<td>6</td>
</tr>
<tr>
<td>Dental Care</td>
<td>Included in group medical insurance</td>
<td>39</td>
</tr>
<tr>
<td></td>
<td>Separate Plan Offered</td>
<td>143</td>
</tr>
<tr>
<td>Institution provides own health insurance product (self-insured)</td>
<td></td>
<td>50.5% Yes</td>
</tr>
<tr>
<td>Requires copayments and/or deductibles in medical contract for services</td>
<td></td>
<td>74% and higher Yes</td>
</tr>
<tr>
<td>Dollar or service limits placed on benefits for certain health care services</td>
<td></td>
<td>45.6% Yes</td>
</tr>
<tr>
<td><strong>LIFE INSURANCE AND LONG-TERM DISABILITY INSURANCE PREMIUMS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Life Insurance</td>
<td>Fully Paid</td>
<td>141 (77.1%)</td>
</tr>
<tr>
<td>Long-term Disability</td>
<td>Fully Paid</td>
<td>129 (70.9%)</td>
</tr>
<tr>
<td>Maximum amount of Life Insurance Benefit</td>
<td>Fixed Payment</td>
<td>72</td>
</tr>
<tr>
<td></td>
<td>Percent of Salary</td>
<td>62</td>
</tr>
<tr>
<td>Maximum amount of Long-Term Disability</td>
<td>Fixed Payment</td>
<td>28</td>
</tr>
<tr>
<td></td>
<td>Percent of Salary</td>
<td>110</td>
</tr>
<tr>
<td>Length of coverage to AGE (long-term disability insurance)</td>
<td></td>
<td>103</td>
</tr>
</tbody>
</table>
Preface—Our Vision and Mission

MSM Vision

Leading the creation and advancement of health equity by:
1. Translating discovery into health equity
2. Building bridges between healthcare and health
3. Preparing future health learners and leaders

MSM Mission

We exist to:
- Improve the health and wellbeing of individuals and communities;
- Increase the diversity of the health professional and scientific workforce;
- Address primary health care needs through programs in education, research, and service;
  with emphasis on people of color and the underserved urban and rural populations in Georgia, the nation and the world.

“We are on a mission.”

Morehouse School of Medicine (MSM) is like no other medical school in the country. We attract students who want to be great doctors, scientists, and health care professionals, and who want to make a lasting difference in their communities.

MSM ranks number one in the first-ever study of all United States medical schools in the area of social mission. The ranking came as a result of MSM’s focus on primary care and addressing the needs of underserved communities—a role which the study emphasizes is critical to improving overall healthcare in the United States. Such recognition underscores the vital role that MSM and other historically black academic health centers play in the nation’s healthcare system by addressing head on the issues of diversity, access, and misdistribution.

Put simply, we attract and train the doctors and health professionals America needs most—those who will care for underserved communities; those who will add racial and ethnic diversity to the health professions and scientific workforce; those who will dedicate themselves to eliminating the racial, ethnic, and geographic health inequities that continue to plague the community.

Likewise, our researchers seek to understand not only the biological determinants of illness and health, but also the social determinants—the circumstances in which someone is born, lives, works, and ages. These circumstances can be shaped by diverse forces, but can be just as powerful as physiology, if not more so, when it comes to health and wellness.