In this document, “Resident” refers to both specialty residents and subspecialty fellows.

**Purpose:**

To provide each resident in a Graduate Medical Education Committee (GMEC) approved training program with an annual stipend deemed fair and reasonable by the University of Colorado School of Medicine as the sponsoring institution for medical training programs.

**Policy:**

All contracts will follow the GME academic year calendar – June 23rd for interns and July 1 for PGY-2 and above (exceptions may apply for fellowships based on directives from the certifying boards). Stipends will reflect the stipend level in effect for that academic year.

All residents in a GMEC approved medical training program will receive a stipend based on the annually approved schedule for up to seven levels of graduate medical education and for chief resident positions in Internal Medicine, Psychiatry, and Surgery.

Stipends are standardized for all GMEC-approved programs for all residents other than those holding a primary faculty appointment.

In addition to the annual stipend, interns (PGY-1) receive remuneration for mandatory participation in the university and affiliated hospital/s orientations that occur prior to their start date.

Exceptions to the GMEC-approved stipend schedule are residents completing training in the Public Health and General Preventive Medicine Residency and the Occupational Medicine Residency. These residents do not follow the GMEC-approved stipend schedule due to program funding that directly supports their tuition towards a masters’ degree in Public Health.

Upon entering a training program, resident stipends are determined based on the number of prior GME years of training required to enter that program as indicated by ACGME; or for non-accredited fellowships the PGY-levels as approved by GMEC1.

A resident entering a training program following completion of a portion or all of the board requirements in another (sub)specialty may receive PGY level credit for that portion of training which meets board eligibility requirements in the new (sub)specialty area of training.

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1 ACGME Data Resource Book: Table A.11: Total Number of Programs, Years of Accredited Prior Training Required, and Accredited Training Lengths by Specialty and Subspecialty.
Residents will not advance in stipend beyond the highest post-graduate year associated with that (sub)specialty.

Non-ACGME chief resident years do not count towards an advancement in stipend (e.g. medicine fellows who have completed a 3-year residency and a non-ACGME chief year are eligible for a PGY-4 stipend).

Residents participating in non-ACGME research years embedded within an ACGME-accredited program will advance in stipend, until their post-graduate years exceeds the highest year of ACGME training in that (sub)specialty, at which point the resident will remain at the stipend associated with the highest year of ACGME training in that (sub)specialty. Applicable residencies and fellowships must inform applicants of stipend maximums during recruitment.

For ACGME-accredited programs with hospital funding, the hospitals will only fund up to the stipend associated with the highest year of ACGME training in that (sub)specialty.

A. **Exceptions to the stipend level**

All exceptions to the established stipend rates must be justified by the program director in writing to the DIO. The program director must request and obtain approval from the GMEC before making an offer to a resident for a stipend that is greater or lower than the established approved stipend level.

Considerations for stipends greater than the established level will be based on the following:

1. Duties performed by the resident above and beyond other residents of the same level in that (sub)specialty. Or;
2. Upon completion of an ACGME fellowship, and entry into another ACGME fellowship, a fellow may be granted a sequential advancement in stipend provided funding is available to support the stipend.

B. **Exceptions to the PGY level**

The PGY level of appointment is determined by the requirements for entering and successfully completing a particular residency or fellowship program. All exceptions to starting a resident at a higher or lower level must be justified by the program director in writing to the DIO and approved by GMEC.