Resident and Clinical Fellow Needs-Based Relocation Reimbursement Program, 2016-2017

Residents and clinical fellows (ACGME and ABMS only) new to graduate medical education at UCSF may be eligible for needs-based relocation expense reimbursement up to $1,800. Participation in this program is optional and eligibility will be determined through a needs assessment and proof of eligible expenses. Those who graduated from UCSF Medical School and are beginning as a PGY1 in a residency program are not eligible for this program. If a trainee is eligible per the needs assessment, he/she must submit applicable receipts to his/her program coordinator. The Office of Graduate Medical Education will process all reimbursements in the summer (for June/July start dates) and throughout the year for off-cycle appointments.

Needs Assessment: Need is determined by a process called “financial segmentation.” This process queries public records to assess financial characteristics. A score is determined based on these public records as well as geographic location. Public record data included asset information, consumer transaction files, courthouse records, tax records, census data, etc. This is not a “credit check” and will not affect credit scores. Those with a PARO score of 545 or less will be considered eligible for reimbursement.

This program is optional and as such appeals or exceptions are not available.

Eligible Expenses: Where applicable, receipts must be submitted for expenses. Per IRS regulations, all reimbursements for those who are moving 50 miles or less are taxable. Maximum reimbursement is $1,800. Eligible expenses are:

- **Non-Taxable (moves greater than 50 miles)**
  - Airfare for final trip for trainee and family (spouse, domestic partner registered in California, and children) - must submit airline itinerary that shows dates of travel
  - Mileage (personal car) for final trip at $0.19/ mile (rate subject to change), will reimburse mileage for the most direct route from old residence to new job location
  - Rental of car/truck, including gas receipts for final trip
  - Lodging from old residence to new residence for final trip, must be the most direct route - submit hotel bill that shows dates of stay
  - Parking and tolls for final trip only
  - Storage up to one month
  - Movers and transportation of household goods

- **Taxable and Reportable**
  - All reimbursed expenses for moves that are 50 miles or less (includes items listed above in the non-taxable list)
  - Meal expenses from old residence to new job location
  - Rental of car, including gas receipts while primary vehicle is being shipped from old residence to new job location
  - House hunting: Pre-move travel expenses, meals, lodging and rental car, including gas receipts
  - Temp housing and meals (within UC meal rate limits) in the area of new job location (1 day prior to rotation start date plus 30 days thereafter)
  - Storage greater than 30 days

Qualified moving expenses are subject to standard UC and UCSF policies and procedures, which can be found at [http://policy.ucop.edu/doc/3420347/BFB-G-13](http://policy.ucop.edu/doc/3420347/BFB-G-13)

Participation and Questions: Participation in this program is not required. All new ACGME and ABMS residents and clinical fellows who would like to participate in the program must complete the attached form and submitted to his/her program coordinator by **September 28, 2016**. Program coordinators will be notified as to who is eligible the week of **October 17, 2016**. Off-cycle trainees should submit the attached form upon beginning of their program, or earlier.

Residents and clinical fellows with relocation expense questions should contact their program coordinators.
2016-2017 Needs-Based Relocation Reimbursement Program Application

This form is to be completed by all new ACGME and ABMS residents and clinical fellows who would like to participate in the Needs-Based Relocation Reimbursement Program. Those who would like to have their eligibility determined should submit this form to their program coordinator prior to September 28, 2016. Program coordinators will be notified as to who is eligible the week of October 17, 2016. Off-cycle trainees should submit this form upon the start of their program, or earlier.

First Name: ____________________ Middle Name: ____________________ Last Name: ____________________

UCSF Program Name __________________________________________________________________________

UCSF Employee ID # (02-XXXXXXX):_______________________ Date of Birth: __________________________

2016-2017 Bay Area Home Address: Previous Address:

_____________________________________   _____________________________________

Address       Address

_____________________________________   _____________________________________

City   State   Zip   City   State   Zip

Code        Code

By signing below, I attest that I understand participation in this program is voluntary. I have read the attached policy and understand the eligibility requirements as well as that no exceptions will be granted. I agree to allow UCSF Medical Center to use my personal information for a financial segmentation query to determine my ability to participate in the relocation reimbursement program. In addition, I will submit documentation and receipts by established deadlines.

_____________________________________________          ________________

Signature       Date