



# NADIO

National Association of Designated Institutional Officials

*Serving the GME Community*

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The National Association of DIOs (NADIO) has proposed that all fellowships that currently start on July 1 move their start date to no earlier than July 7. The principal reasons for this are to give residents transitioning to fellowship at least one week between residency and fellowship to move, if necessary, and to provide a brief break between these stages of GME training.

This move will prevent the common orientation and start date conflicts experienced by residency program directors, residents transitioning to fellowship, and fellowship program directors as they try to navigate this transition in which residency employment typically ends one day at the residency institution and begins the next at the fellowship institution. This change will also allow the residency to fellowship transition to occur after the July 4<sup>th</sup> holiday.

NADIO appreciates the support this proposal has received from the broad GME community. To help smooth this process, after significant research into potential impacts and their mitigation, including discussion with various stakeholders and institutions that have successfully achieved a similar transition, we have prepared the following **Frequently Asked Questions (FAQs)** as a resource for residents, fellowship program directors, GME offices, and Sponsoring Institutions (SIs).

**When should Sponsoring Institutions with fellowships that currently start on July 1 plan on making this transition to “no earlier than July 7” fellowship start dates?**

While some SIs have already made this transition and others are planning to implement this for the 2026-27 academic year, this is likely too short an implementation time frame for many institutions. The suggested target date for broad implementation is July 2027. This will allow ample time to address budgetary and logistical issues.

**Does this initiative include fellowships that currently start August 1 or some other date later than July 1?**

This initiative only affects fellowships that currently start on July 1. Those that start later in July or August would not be affected. Certainly, any fellowship programs that currently

starts between July 1 and August 1 could also choose to implement a “no earlier than July 7” aligned with other fellowships within the Sponsoring Institution. Residents transitioning from a PGY-1 position to another program as a PGY-2 are also not affected; these trainees will continue to start July 1 or whenever their new residency program begins.

**Are SIs and fellowship programs required to make this change in fellowship start date?**

No, this is an entirely voluntary initiative. While NADIO and many others in the GME community strongly support this change, doing so is entirely voluntary.

**What is meant by a “no earlier than July 7” start date?**

While NADIO is not in a position to mandate a single start date, with input from several specialty and subspecialty societies, NADIO recommends that all programs consider adopting **July 8** as a national uniform employment date for incoming fellows. Orientation and clinical start dates would then be determined by each SI, depending on the calendar and institutional practices and needs.

Having a uniform fellowship start date within any particular specialty is especially important, particularly those in which trainees commonly complete 2 or more fellowships within one or at separate institutions.

**Will this require SIs to add another GME orientation?**

Yes, for many SIs this will be necessary. However, the experience of many SIs that have already implemented a later start date is that this eases the burden of the orientation and onboarding process for the GME Office and others need for each orientation date.

**How can programs address the 1-week gap in fellow clinical coverage during the transition year?**

The gap in fellow clinical coverage will occur only during the first transition year. Fellows starting July 8 should have contracts that end the next July 7. Varying combinations of the following approaches to clinical coverage have been successfully used by SIs that have made this transition or are planned to be used by those that intend to implement this change. These options are not mutually exclusive; different programs within an SI may implement one or more to the following to meet their specific needs.

1. Schedule remaining fellows to cover the most critical clinical needs (e.g., minimize elective experiences) (programs > 1 year duration) during the transition week to ensure coverage of clinical needs.
2. Attending physician coverage
3. Attending physician with advanced practice providers (APP) coverage

4. Graduating fellows able to remain as moonlighters or through a one-week extension of employment, with attending physician supervision (can apply to fellowships of one or more year duration)

**Will this transition add significant institutional expense?**

The costs for providing clinical coverage during the transition will depend on how the SI and its programs choose to provide this coverage but should generally be very similar to existing costs.

Programs covering the first week of July with a combination of incoming fellows and those being promoted to the next PGY level already have existing salary and benefits costs. For SIs and programs using attending, attending + APP, or moonlighting/extended fellow coverage, there may not be any additional costs, and the costs might even be lower. For those that will use moonlighters or extended fellows, the relative costs will depend on what the covering fellows are paid (and any benefit costs) compared to what these costs would have been for the incoming fellows. To the extent that there are any additional costs, NADIO hopes that the DIO will strongly advocate for these to be borne by the SI rather than the individual programs. There should not be any significant impact on GME funds flow from CMS to the SI.

**What about the 1-week gap in pay and health insurance between residency and fellowship?**

Fellows will still be paid for one full year of training, of course; it will just start a week later.

Some institutions that have moved their start dates away from July 1st have been able to start health insurance coverage on July 1, even though the clinical service start date is a week later by starting employment without pay starting July 1. Others recommend using COBRA (Continuation of Health Coverage under the Consolidated Omnibus Budget Reconciliation Act), if needed. The cost of this is incurred at the end of the first month of coverage, so there is no cost if there are no health care costs to cover during the one-week gap. If needed, the cost can be paid by the SI or the individual resident.

There are also options for short-term health insurance coverage through commercial insurance companies or the Affordable Care Act (ACA).

An early July start (as exists now for most Pediatrics fellowships), rather than August 1, minimizes these concerns with a 1-week gap.

Survey data from pediatric residents when planning for this transition indicated a preference for a gap of 1 or 2 weeks compared to a 1-month gap and also indicated that the 1- or 2-week gap was an acceptable trade-off for advantages of the break between trainings.

<https://www.kff.org/patient-consumer-protections/examining-short-term-limited-duration-health-plans-on-the-eve-of-aca-marketplace-open-enrollment/>

<https://www.uhc.com/understanding-health-insurance/types-of-health-insurance/aca-vs-short-term>

<https://www.healthinsurance.org/short-term-health-insurance/>

### **What about a gap in employment for those with J-1 or H-1B visas?**

Until recently, **J-1 visa** holders have not been permitted gaps in employment. However, Intealth has now received authorization from the Department of State to sponsor J-1 physicians for gaps of up to 30 days between residency and fellowship programs across all specialties. NADIO will work with Intealth to communicate to SIs and Program Directors the process for obtaining individual approvals for this employment gap. Their DS-2019s will not reflect a gap in training.

Note: This one-week gap does count towards the 7-year maximum duration of J-1 visa sponsorship in the physician category. For individuals for whom this may be a concern should work with their program directors and SIs to avoid a gap in legal visa status.

\* At this time, it is not known if or when the “duration of status” rule for J-1 visa holders will change, or what the parameters of any potential changes might be.

**H-1B visa** holders are allowed an employment gap of up to 60 days. NADIO strongly recommends that individuals and their employing SIs work with immigration lawyers and institutional experts to navigate this employment gap for individuals with H-1B visas.

\* *Intealth does not sponsor H-1B visas, so they cannot provide guidance regarding them during this employment gap.*