



March 2, 2026

The Honorable Linda McMahon
Secretary
U.S. Department of Education
400 Maryland Avenue, SW
5th Floor
Washington, D.C. 20202-3100

Submitted electronically via regulations.gov

RE: Reimagining and Improving Student Education Notice of Proposed Rulemaking; RIN 1840-AD98

Dear Secretary McMahon:

The American Association of Oral and Maxillofacial Surgeons (AAOMS), which represents more than 9,000 oral and maxillofacial surgeons (OMSs) – including approximately 1,200 residents in 101 oral and maxillofacial surgery residency programs across the country – appreciates the opportunity to submit comments in response to the Reimagining and Improving Student Education (RISE) Notice of Proposed Rulemaking. AAOMS recognizes the Department's efforts to simplify and provide targeted reforms to the federal student loan system, and we respectfully submit the following comments, concerns, and recommendations for consideration in the development of the final rule.

Implementation delay

First, we support requests from higher education and the financial aid communities for the Department to delay implementation of the final rule by one year. These entities rely on long-range academic and financial planning cycles, and significant regulatory changes affecting Title IV programs require adequate lead time to ensure orderly compliance. A one-year delay would promote stability for institutions and borrowers while allowing for appropriate operational, financial, and counseling adjustments.

Borrowing caps and Grad PLUS elimination

Second, we reiterate serious concerns – originally expressed to Congress and subsequently last fall to the Department – about the revised student borrowing limits as well as the elimination of the GradPLUS loan program, particularly as they affect borrowers in high-cost professional programs such as medicine and dentistry. Physicians and dentists routinely graduate with substantial educational debt due to the length and expense of their training. The average

tuition and fees for first year medical students in 2024-25 was \$50,932 at public institutions and \$63,698 at private institutionsⁱ and for first-year dental students was \$61,463 at public institutions and \$87,078 at private institutions during the same time-periodⁱⁱ. OMSs must complete four to six years of residency after dental school, and a 2024 survey of recent OMS residency graduates found that 75 percent of OMSs are graduating with over \$300,000 in debt, while 40 percent graduate with over \$500,000 in debt.ⁱⁱⁱ

The rule proposes to finalize by July 1, 2026 a \$257,500 lifetime cap on federal borrowing – inclusive of undergraduate and graduate loans – and the elimination of the GradPLUS loan, which allows medical and dental students to borrow up to the cost of attendance. Medical and dental schools will not be able to reduce their tuition by this date, if at all.

As a result, many future medical and dental students will be forced to rely on private loans – which often carry higher interest rates, particularly for those from low- and middle-income backgrounds, and provide fewer borrower protections – to finance part of their education.^{iv} This will significantly increase their debt burden and influence critical career decisions, such as whether to practice in underserved communities, serve in academia, or open up their own small business dental or medical practice. Alternatively, some may find the cost of education prohibitive and decide against a career in medicine or dentistry altogether.

Accordingly, we respectfully urge the Department to preserve Graduate PLUS loan eligibility for medical and dental students or, alternatively, establish a dedicated medical and dental education carve-out within the new loan limits that accounts for the high costs of education and training for physicians and dentists.

PSLF repayment

Many dentists, including OMSs, utilize the Public Service Loan Forgiveness (PSLF) program. Under Section 455(d)(7)(B) of the HEA, borrowers who do not select a repayment plan for loans made on or after July 1, 2026, are automatically placed in the Tiered Standard repayment plan, which is not a qualifying plan for PSLF purposes. Borrowers pursuing PSLF must proactively choose a qualifying repayment plan to maintain eligibility. The RISE Committee raised this concern during the proposed rulemaking process and the Department pledged to ensure PSLF borrowers are properly informed of their repayment options. AAOMS appreciates the Department's acknowledgement of this concern in the proposed rule.

Furthermore, the PSLF program has a documented history of servicing challenges that have affected borrower eligibility determinations and the accurate tracking of qualifying payments. These administrative and communication issues have, at times, resulted in confusion, delayed forgiveness, and unexpected ineligibility for borrowers who believed they were meeting program requirements.

Accordingly, we urge the Department to ensure that PSLF borrowers clearly understand the nuances of qualifying payments and the definition of 'on-time payments' as they transition to qualifying repayment plans, particularly with respect to the Repayment

Assistance Plan (RAP), since these technical distinctions can significantly affect a borrower's PSLF eligibility.

Interest Accrual

AAOMS appreciates key aspects of RAP, notably its provisions intended to suppress interest and reduce principal. However, RAP does not fully alleviate the higher student debt burden from interest accrual experienced by physicians and dentists who undertake residency training. As such, we encourage the Department to consider implementing an interest-free deferment program for medical and dental residents, similar to the provision included in the House-passed version of the One Big Beautiful Bill (OBBB) Act under [Sec. 30022 Deferment; forbearance](#). The OBBB – as passed by the House – would have amended the terms of medical and dental residency forbearance for loans disbursed on or after July 1, 2025, to allow for zero interest accrual for up to four years.

We strongly encourage the Department to explore the creation of a program similar in intent to this provision, thereby easing the overall debt burden for medical and dental residents during deferment or forbearance.

Loan rehabilitation

We appreciate the proposed change allowing borrowers to rehabilitate a defaulted federal student loan up to two times instead of once, particularly given that the proposed rule eliminates economic hardship and unemployment deferments.

This change appropriately recognizes the financial instability that many borrowers may experience over the course of their careers. For example, OMSs emerging from residency may not find employment immediately or face significant practice acquisition costs that can create temporary financial strain. Providing an additional rehabilitation opportunity would enable more borrowers to resolve defaults, restore their loans to good standing, and reenter repayment without the lasting consequences of default, such as damaged credit, wage garnishment, or loss of access to affordable repayment options.

Tax treatment of married single filing borrowers

Given the extended duration of OMS residency and training, it is common for OMSs to marry during this period and, in many cases, to share student loan obligations with a spouse. The OBBB did not clearly specify how to calculate payments for married borrowers enrolled in RAP if they file taxes jointly. As such, the Department considered two options: calculating each spouse's payment separately using the couple's combined income or calculating one total payment based on combined income.

We appreciate the Secretary's decision to calculate a single total payment based on combined income. This approach avoids double-counting income, prevents a marriage penalty, and recognizes that RAP is intended to make payments affordable, not punitive.

Study on the impact of OBBB reforms

We strongly urge the Department to include in the final rule a process to monitor and report on several trends among medical and dental borrowers, comparing data from five years before and after OBBB implementation.

Key areas to track include: 1) private loan trends, such as average interest rates, loan amounts, and borrowing terms, particularly for graduate and professional students; 2) dental and medical school tuition and overall enrollment, including any disproportionate adverse effects on certain demographics, such as first-generation students or underrepresented minorities; and 3) workforce distribution, including practice location, setting (e.g., corporate practice, independent practice, academic and public health), specialty, and patient demographic distributions. This information will help assess the impact of the OBBB's student loan changes on the costs of postgraduate education as well as on physicians and dentists, including how and where they choose to practice.

Thank you for your consideration of these comments. AAOMS stands ready to work with the Department of Education to advance meaningful student loan reform that recognizes the financial implications of educating a robust healthcare professional workforce, which includes OMSs. Please contact Jeanne Tuerk, Director of Government Affairs with the American Association of Oral and Maxillofacial Surgeons at 847-233-4321 or jtuerk@aaoms.org for questions or additional information.

Sincerely,



Robert S. Clark, DMD
AAOMS President

ⁱ American Association of Medical Colleges. Tuition and Student Fees Report: 2013-2026.

<https://www.aamc.org/data-reports/reporting-tools/report/tuition-and-student-fees-reports>.

ⁱⁱ 2024-25 Survey of Dental Education – Report 2: Tuition, Admission and Attrition.

<https://www.ada.org/resources/research/health-policy-institute/dental-education>.

ⁱⁱⁱ 2024 survey of members who completed residency within the previous five years. American Association of Oral and Maxillofacial Surgeons.

^{iv} Giovanetti, Erica. Best Private Student Loans of February 2026. U.S. News and World Report. February 6, 2026. <https://money.usnews.com/loans/student-loans/best-private-student-loans>.