

<p><b>The University of Alabama Hospital</b> Graduate Medical Education Policy and Procedure</p>	<p>GMEC Approved Date: May 7, 2024</p>
<p><b>Moonlighting Policy</b></p>	<p>Next Review Date: Spring 2025</p>

**Background and Rationale:**

The Graduate Medical Education Committee (GMEC) believes that graduate medical education should be a full-time educational experience. Moonlighting activities should not distract trainees from their primary responsibilities including their own educational activities and the management of patients charged to their care. The GMEC believes that moonlighting by graduate medical trainees is generally inconsistent with the educational objectives of their training. In 2023 the ACGME Common Program Requirements (CPR) acknowledged the potential deleterious effects of moonlighting on training with the following statements:

- CPR VI.F.5.a) Moonlighting must not interfere with the ability of the resident/fellow to achieve the goals and objectives of the educational program and must not interfere with the resident’s fitness for work nor compromise patient safety.
- CPR VI.F.5.b) Time spent by residents/fellows in Internal and/or External Moonlighting (as defined in the ACGME Glossary of Terms) must be counted towards the 80-hour Maximum Weekly Limit.
- CPR VI.F.5.c) PGY1 residents are not permitted to moonlight.

Residents shall devote themselves conscientiously to the performance of their full-time professional efforts as defined by Graduate Medical Education policies and graduate medical education program requirements. Required program obligations take precedence over all moonlighting and must not interfere with the resident’s ability to achieve the goals and objectives of their program. Moonlighting must not interfere with the ability of the resident to achieve the goals and objectives of the educational program and must not interfere with his/her fitness for work or compromise patient safety.

**Program-specific Policies:**

1. Each residency and fellowship training program must have a written policy on moonlighting. This policy may include specific circumstances under which these activities are allowed and the procedure for requesting program director and DIO approval. The program’s procedure must include a program specific moonlighting request form to become a part of the resident’s file. Programs and departments may have policies that are more restrictive than the institutional policy including not allowing for moonlighting to occur.
2. Each department's policy regarding moonlighting activities must be well-publicized to its graduate medical trainees (e.g., handout materials; program portal).
3. Residents/fellows in Dermatology, Radiology, and Pathology programs, where controlled substances are not prescribed are not required to obtain a DEA number or ACSC if the moonlighting duties do not require prescribing controlled substances. These activities must be monitored by the Program Director to ensure compliance. To ensure Program Director monitoring of this moonlighting activity, the Program Director must submit a memo to the GME Office of this approval.
4. Out of state moonlighting is permissible if approved by the Program Director. The Program Director has authority to not allow out of state moonlighting for their training program.

5. The Program Director is responsible for monitoring fatigue on all graduate medical trainees participating in **all** moonlighting activities. The trainees' performance must be monitored for the effect of these activities and adverse effects may lead to withdrawal of permission.
6. Time spent by trainees on **moonlighting** must be counted towards the 80 hours Maximum Weekly Limit. All **moonlighting and work hours** must be recorded in the resident management system (MedHub). Moonlighting residents/fellows will be required to log **all** hours for the whole month, regardless if the program is monitoring clinical and educational work hours that month.
7. PGY-1 residents are not permitted to moonlight.
8. J-1 visa holders are not permitted to moonlight.
9. H-1B visa holders are permitted to moonlight only at locations identified to the Department of Labor during the H-1B petition process (see below).
10. Moonlighting is not permitted while on approved UAB benefit leave of absence.
11. In view of the serious legal implications of graduate medical trainees engaging in unauthorized moonlighting activities, noncompliance with this policy may result in certain penalties or severe disciplinary action, including dismissal from the residency or fellowship training program. Specific penalties or disciplinary action will be determined by the appropriate Program Director or DIO.
12. It is the responsibility of the institution (or department if moonlighting and functioning under supervision) hiring the resident/fellow to moonlight to determine whether appropriate licensure is in place, whether adequate liability coverage is provided, and whether the resident/fellow has the appropriate training and skills to carry out assigned duties.
13. Graduate medical trainees and the hiring institution must be responsible for obtaining clinical privileges at the site where the moonlighting activity occurs.
14. In consideration of clinical and educational workhour restrictions, no graduate medical trainee assigned to an inpatient service requiring in-house overnight call (24 plus four hours of consecutive work) shall engage in any internal moonlighting activity.

**International Medical Graduates:**

International medical graduates (as defined by ACGME) may be citizens of the United States who chose to be educated elsewhere or non-citizens who are admitted to the United States by U.S.

Immigration authorities. The following differences between visas are important:

- a) J-1 visa holders: are not permitted to moonlight.
- b) H-1B visa holders: moonlighting activities are restricted to physical site(s) identified by the program during the H-1B process and covered by the Department of Labor document filed on behalf of the resident/fellow. For example, if an H-1B resident/fellow will work on-site at University Hospital, Children's Hospital, the VA, The Kirklin Clinic, Children's South, or any other physical location, all of those locations must be provided to the Office of International Student and Scholar Services at the time of preparing the H-1B petition.

**Moonlighting and functioning as a licensed independent practitioner (not supervised):**

Residents/Fellows participating in moonlighting activities independently must have an unrestricted full license to practice medicine in the State of Alabama, a current Alabama Controlled Substance Certificate (ACSC), and a personal DEA number. The institutional DEA number cannot be used for moonlighting activities.

**Moonlighting and functioning under supervision:**

Residents/Fellows participating in moonlighting activities under attending supervision must have an unrestricted full license or limited license to practice medicine in the State of Alabama, a current Alabama Controlled Substance Certificate (ACSC), and a personal DEA number. The institutional DEA number cannot be used for moonlighting activities.

At UAB Hospital, residents/fellows who are ineligible for an unrestricted full license in Alabama may moonlight with a limited license at UAB Hospital only when working within the scope of their training program and under attending supervision.

In programs located in Huntsville, Montgomery and Selma, residents who are ineligible for an unrestricted full license in Alabama may moonlight with a limited license at their home institution (Huntsville Hospital, Health Care Authority for Baptist Health, and Vaughan Regional Medical Center) only if working within the scope of their training program and under attending supervision.

**Professional Liability Insurance:**

Malpractice coverage by UAB's Professional Liability Trust Fund (PLTF) will be provided only for moonlighting activities performed at an institution that is a PLTF covered entity See Appendix 11. Moonlighting activities may be covered at a facility not covered under the PLTF under very limited circumstances, if the facility has a written agreement with UAB or HSF for the provision of clinical services. The UAB Director of Insurance and Risk Finance must review any such request for PLTF coverage.

**MOONLIGHTING REQUEST AND APPROVAL PROCEDURE**

**Step 1. Obtain approval from Program Director and GME**

**Note: Please do not start this process until all required license, ACSC and personal fee- paid DEA is obtained.**

All residents/fellows who are seeking approval for participation in moonlighting activities must be aware of their program- specific and GME moonlighting policies. If the program allows moonlighting, the first step is to obtain approval from the Program Director and GME Office.

1. The resident/fellow must complete a program specific moonlighting form, sign the form, and upload the form into MedHub, under Moonlighting Requests as soon as the opportunity to moonlight occurs. In addition, the resident/fellow must indicate in the MedHub moonlighting request the location of the moonlighting, the activity, and the dates of the moonlighting. If the moonlighting is at UAB Hospital, the resident/fellow must indicate whether he/she will be acting as a licensed independent practitioner or supervised by an attending.
  - a. Electronic signatures by residents/fellows are acceptable on the program specific moonlighting form.
  - b. The resident/fellow must attach the program specific form for moonlighting to be approved.
  - c. Moonlighting requests are valid for up to one academic year or through June 30th of each year.
2. The Program Director should review the moonlighting request in MedHub and approve if applicable.
3. Once approved by the Program Director in MedHub, the moonlighting form will be routed in MedHub from the Program Director to the GME Office.
4. The GME Office will review the application to ensure appropriate licensure and certifications are in place. The requestor's visa status will also be reviewed to ensure no J1 visa holder is approved for moonlighting.
5. The resident/fellow will receive an email from "MedHub Notification" when the moonlighting request has been approved.

**Step 2. After Approval from Program Director and DIO, Obtain Appropriate Credentialing at the Moonlighting Site**

1. Separate from the GME approval process, the resident/fellow and the hiring department (or institution) should ensure that appropriate credentialing and privileges are in place for the specified moonlighting activity.
2. Residents/Fellows Moonlighting at an Entity Not Participating in the UAB PLTF (NON-UAB Covered Facility). It is the responsibility of the institution hiring the resident/fellow to moonlight to ensure the individual is credentialed and privileged according to the requirements of its medical staff bylaws and that adequate liability coverage is provided. The UAB Professional Liability Trust Fund (PLTF) does not provide professional liability coverage for moonlighting activities at institutions that are not covered entities under the PLTF (refer to Appendix 11 for a list of facilities covered by the PLTF).
3. Residents/Fellows Moonlighting at an Entity Participating in the UAB PLTF (UAB Covered Facility). Resident/Fellow moonlighters approved through the medical staff credentialing and privileging process to provide professional services as an independent practitioner within UAB Medicine Clinical Facilities outside of their training programs will receive a "Professional Staff appointment", and are subject to all of the requirements, responsibilities and rules outlined in the UAB Health System Medical Staff Bylaws and Rules and Regulations when working as a moonlighter. In this capacity, they are not under direct GME/Program Director supervision, but instead are under the supervision of the appropriate service chief. At UAB Hospital, 1) residents/fellows moonlighting within their training program and under supervision of an attending are not required to go through the credentialing and privileging process; 2) residents/fellows moonlighting and functioning as an independent practitioner (not supervised) are required to go through the credentialing and privileging process.
4. A resident/fellow may not bill for any services provided, and, similar to required residency rotations, his/her scope of practice is based upon level of training and experience as defined in departmental policies.

### Step 3. Log Moonlighting Hours

Moonlighting residents/fellows will be required to log moonlighting and work hours in MedHub for the whole month, regardless if the program is monitoring clinical and educational workhours that month.

#### Oversight Procedure:

1. Audits of moonlighting hours logged will be performed by the GME office.
2. Each Program must review the moonlighting policy every year at the time of the Annual Program Evaluation. A copy of each program's current moonlighting policy must be uploaded in MedHub under Program Accreditation/Program Detail/Policies.

#### Resources:

1. Moonlighter Important Steps Guide
2. Appendix 11: PTLF Covered Entities

