POLICY & PROCEDURE: MOONLIGHTING

POLICY SUMMARY/INTENT:

Moonlighting must not interfere with the ability of the resident to achieve the goals and objectives of the educational program. Time spent by residents in internal and external moonlighting (as defined in the ACGME Glossary of Terms, must be counted towards the 80 hour maximum weekly hour limit. PGY-1 and PGY-2 residents are not permitted to moonlight).

DEFINITIONS:

1. ACGME: Accreditation Council for Graduate Medical Education
2. PGY-1: Post Graduate Year 1
3. PGY-2: Post Graduate Year 2
4. PGY-3: Post Graduate Year 3

AFFECTED DEPARTMENTS/SERVICES:

A. Family Medicine Residency Department

POLICY: COMPLIANCE – KEY ELEMENTS

A. Moonlighting

1. Professional and patient care activities that are external to the educational program are called moonlighting. Moonlighting must not interfere with the resident’s educational performance; nor must these activities interfere with the resident’s opportunities for rest, relaxation, and independent study.

2. Permission to moonlight will be granted at the sole discretion of the Program Director.

3. Residents are required to complete Moonlight Approval Process. The Program Director will closely monitor all moonlighting activities and ensure that residents are aware of the following:

   A. Residents are not required to engage in moonlighting
   B. Only third year residents who have their medical licensure will be considered for moonlighting privileges.
   C. The resident shall NOT exceed the 80-hour work week or the 24-hour shift limit with the cumulative hours of moonlighting and residency related work
D. The resident must be in good academic standing before moonlighting privileges will be granted.

E. The resident shall NOT oversee the activities of other licensed medical providers or act in a teaching capacity for non-licensed medical providers (i.e. a resident may not sign off on charts/medications for nurse practitioners, physician assistants, etc. and they should not be mentoring other residents or medical students) while moonlighting.

F. The resident SHALL follow AHUV practice standards while moonlighting at AHUV. In other words, the resident may not prescribe medications or treatments (e.g. medical marijuana) that would NOT be consistent with AHUV practices.

G. Moonlighting must NOT interfere with the resident's ability to maintain their academic AND administrative duties i.e. a resident must remain in good academic standing, maintain their in-basket, check their work e-mail regularly.

H. Residents will log all moonlighting hours in New Innovations.

I. During moonlighting shifts residents are not allowed to leave for continuity deliveries.

J. While moonlighting, residents must identify themselves as “per diem” physician in their signature while documenting in the EMR.

K. Residents' performance will be monitored for the effect of these activities upon performance and adverse effects may lead to withdrawal of permission to moonlight.

L. Trainees must abide by all regulatory and institutional requirements while moonlighting, including but not limited to Corporate Compliance, HIPAA, and billing.

M. The trainee must provide the Program Director with written documentation of liability coverage for all moonlighting experiences. AHUV does not cover residents for moonlighting experiences.

N. It is the responsibility of the institution or practice employing a moonlighting trainee to assure that the trainee has the license (including an individual DEA), credentials, and privileges to perform the expected services.