CAROLINAS HEALTHCARE SYSTEM DIVISION OF MEDICAL EDUCATION POLICY FOR RESIDENT MOONLIGHTING

Created: 1987

Revised: 3/93, 8/95, 12/97, 8/17/07, 11/12, 2/16, 6/16 Reviewed: 8/01, 2/03, 7/03, 11/04, 1/07, 9/08, 11/12, 6/16

- 1. Definition: "Moonlighting" refers to clinical services performed by a resident outside the scope of his/her residency-training program. For purposes of this policy, "External Moonlighting refers to moonlighting at a non-Carolinas HealthCare System (CHS) facility. "Internal Moonlighting" refers to moonlighting within a CHS facility.
- Moonlighting is not encouraged but allowed when in compliance with this policy and approved by
 the resident's Program Director. The Program Director may withdraw permission to moonlight if, at
 any time, moonlighting activities are seen as producing adverse effects on the residency training
 experience.
- 3. Moonlighting activity must not interfere with the resident's duties related to any aspect of the Residency Training Program, including the quality of services performed or the educational experiences.
- 4. Moonlighting is strictly forbidden at times when a resident is either on-service or on-call for a service (even if he or she is on-call but not required to be constantly in-house.)
- 5. Moonlighting activities should not violate the principles of good medical care, should be acceptable to the general medical community, and should be a legitimate, professional, medically-oriented activity.
- 6. Prior to engaging in moonlighting activities, a resident must complete the following:
 - a. Internal Moonlighting: Enter moonlighting opportunity and receive approval from Residency Program Director in Med Hub.
 - b. External Moonlighting: Complete the attached form and submit it to the director of his or her training program for approval. This will allow the Residency Program Director to assess the appropriateness of the activities and maintain a registry of moonlighting activities in the department.
- 7. Should notification and approval not occur when a resident is engaging in moonlighting activities, disciplinary action may result. This action may include loss of moonlighting privileges, or even suspension or dismissal from the training program.
- 8. All internal and external moonlighting work hours must count toward all duty hour restrictions.
- 9. In order to moonlight, the resident must have successfully completed their PG-1 year.
- 10. Internal Moonlighting: When resident is moonlighting in a CHS practice or unit, the resident must have:
 - * Supervision by an attending physician either by direct supervision or indirect supervision. Direct supervision is where the supervising physician is physically present with the resident and patient. Indirect supervision is divided into two categories. The first is indirect supervision with direct supervision available the supervising physician is physically in the hospital or other site of patient care, and is immediately available to provide direct supervision. The second level of indirect

supervision the supervising physician is not physically present within the hospital or other site of patient care, but is immediately available by means of telephonic and/or electronic modalities, and is available to provide direct supervision.

- 11. External Moonlighting: When the resident is moonlighting in a non-Carolinas Medical Center practice or facility, the resident must have:
 - Full-unrestricted valid North Carolina license to practice medicine, not just a Resident's Training License;
 - * Drug Enforcement Administration number not just the suffix to the hospital's DEA number.
 - * Professional liability insurance (separate from that provided by Carolinas Medical Center for his or her residency activities and at a level required by the non-CMC moonlighting practice or facility) or Certificate of Insurance from non-CMC moonlighting practice or facility.
 - * Approved "Application for Moonlighting Privileges"
 - * Submitted copies of full-unrestricted North Carolina license to practice medicine, DEA number, proof of professional liability insurance or Certificate of Insurance from facility or practice to the Graduate Medical Education office.
- 12. At non-CHS practices or facilities the moonlighting resident may not represent to the patients, the public, or others that he or she is moonlighting on behalf of Carolinas Medical Center or with its or the System's authority. CHS faculty will not supervise external moonlighting activities.
- 13. According to the ACGME "Moonlighting must not interfere with the ability to achieve the goals and objectives of the educational program. The program director and institution must ensure a culture of professionalism that supports patient safety and personal responsibility. Residents and faculty members must demonstrate an understanding and acceptance of their personal role in the following: assurance of the safety and welfare of patients entrusted to their care; provisions of patient- and family-centered care; assurance of their fitness for duty; management of their time before, during and after clinical assignments; recognition of impairment, including illness and fatigue, in themselves and in their peers."
- 14. All CMC residents moonlighting compensation is subject to CHS Central Contract Office (CCO) review for fair market value (FMV) ranges. When reviewing FMV ranges, the CCO will communicate with GMEC (Graduate Medical Education Committee) leadership who will then communicate with resident representatives for the GMEC. This communication process will give residents the opportunity to provide insight on internal moonlighting work. After the CCO determines FMV compensation ranges, the hospital, facility, or unit requesting the moonlighting service will set the compensation rate within the FMV range. The CCO will determine FMV ranges, at most, once a year.

Surtle & Carons	8/25/2016
Suzette Caudle, M.D.	Date
Designated Institutional Official	
Division of Medical Education	
_ water leg	9.1.16
Spencer Lilly	Date
President, Carolinas Medical Center	

CAROLINAS MEDICAL CENTER DIVISION OF MEDICAL EDUCATION APPLICATION FOR EXTERNAL MOONLIGHTING PRIVILEGES

Applicant's Name						
Proposed Site for Moonlighting Activity (Name of C	linic, ED, etc.)					
Name	Phone					
Street Address						
City, State, Zip						
Briefly describe duties:						
Approximate hours (week/month)						
Responsible Physician at Moonlighting Site						
Street Address/City, State, Zip						
"I have a valid NC Medical License" (other than a Re	esident's training License. Attach copy)					
Yes NoLicense Number						
"I have a valid DEA Number" (separate from hospita	l DEA, Attach copy.)					
YesDEA Registration No	umber					
"I have adequate malpractice insurance (one million/CMC-provided coverage, to cover activities described'						
Covered by Institutional Policy Agreement: Yes	No					
"I understand that the moonlighting activities shou Residency Training Program."	ld in no way interfere with my duties in the					
Applicant's Signature	Date					
Residency Program Director's Signature	Date					
Corporate Insurance Officer	Date					
DIO	Date					

Resident Moonlighting/Payroll Request

Date of Request:		Charge to Performance Center :				
Requested By:		Telephone #:				
Authorized By:		Date:				
all sections indicate Medical Education Payroll office or your Once this form is a processing on the original will be referenced.	ize this form to request sated and send completed for for authorization. Once ou may also fax the form received by the Payroll Depart available pay period tained by the Payroll Departs call the Payroll Departs call the Payroll Departs	epartment, to Keep a coartment.	Vice Presid, the form sl-0101. the informa	ent with the hould be ma	Division of iled to CMC	
Employee ID#	Resident Name	Payment Amount	Rate Per Hour	Hours Worked	Date Worked	
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	Payr	oll Office C	Only			
Entered Pay Period Ending	d Initials					