

UNIVERSITY OF FLORIDA COLLEGE OF MEDICINE-JACKSONVILLE

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Approved by: GMEC		Revised Date: 02/5/08
Effective Date: 5/18/92		Reviewed Date: 02/5/08

Policy on Resident/Fellow Moonlighting and Acknowledgement Form

Introduction: Professional activities that are not part of the educational program are called moonlighting. Moonlighting activities, whether internal or external, may be inconsistent with sufficient time for rest and restoration to promote the residents' educational experience and safe patient care. Because residency is a full-time endeavor, the program director must ensure that moonlighting does not interfere with the ability of the resident to achieve the goals and objectives of the educational program. Therefore, institutions and program directors must closely monitor all moonlighting activities as outlined below.

The Accreditation Council for Graduate Medical Education (ACGME) requires sponsoring institutions to have a moonlighting policy and a monitoring mechanism. Individual residency programs are accredited by their Residency Review Committees (RRC) and must also adhere to the RRC requirements regarding outside employment. Although RRCs vary, **the Common Program Requirements specify that: (1) moonlighting must not interfere with the ability of the resident to achieve the goals and objectives of the educational program, and (2) internal moonlighting must be considered part of the 80-hour weekly limit on duty hours.**

All programs must have policies regarding moonlighting that meet both their RRC and University of Florida College of Medicine requirements. The Graduate Medical Education Committee (GMEC) must review and approve these policies. Programs are responsible for enforcement of these policies. Program directors have authority to decide whether moonlighting is allowed for residents within their program. Residents on academic probation, suspension, or administrative leave are not permitted to engage in moonlighting. **Residents who are J-1 or H1B Visa holders are not permitted to moonlight since the ECFMG expressly forbids outside employment, and termination as a participant in an exchange visa program could occur.** Moonlighting is a privilege; denial of moonlighting by a program director cannot be appealed nor can residents be required to engage in moonlighting.

There are two categories of moonlighting: 1) internal and 2) external. Both have specific requirements that must be met. The brief descriptions below should serve as a guide to both program directors and residents.

Internal Moonlighting

- 1) Internal moonlighting is defined as professional activity that takes place at University of Florida educational affiliates, and for which there is completed agreement between the program, site, and Office of Educational Affairs (OEA) designating the activity to be performed, rate of pay, and account to be charged. A list of approved sites is attached to this policy. Program directors may propose the addition of new sites through completion of the attached site agreement. Internal moonlighting is characterized as:
 - consisting of activities similar to usual resident activities within the program, including scope, level of responsibility
 - appropriate lines of supervision must be designated and utilized for each activity
 - covered by the resident's training license, and the UF Self-Insurance Program and Workers Compensation Program
 - services not billed for by the resident
 - supplemental salary income provided by the University to the resident who participates through their regular paycheck
- 2) Internal moonlighting must be counted toward the 80-hour weekly limit on duty hours and must be in compliance with all other terms of the program's Duty Hours Policy and Procedures (i.e., 1 day in 7 free from all educational and clinical responsibilities, continuous on-site duty must not exceed 30 consecutive hours, etc). It is the responsibility of the Program Director to monitor the level of activity and submit reports for GMEC review at the time of each institutional duty hours survey.
- 3) Approval:
 - The resident or fellow must obtain written approval from their program director and the DIO at least

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2 weeks prior to participation in any internal moonlighting (see attached form). This approval acknowledges that the resident or fellow is in good academic standing and that the additional hours are in compliance with the program's Duty Hours Policy and Procedures.

- Upon approval, one copy will be placed in the resident's Institutional file; the original will be returned to the program assistant for distribution to the resident and program director.
- The Office of Educational Affairs is responsible for processing internal moonlighting income. Subsequent to performing the internal moonlighting activity, the request form must be updated by the resident to indicate actual hours worked, then resubmitted to the OEA within 2 weeks to be processed. This must be accompanied by the supplemental certification form, invoice memo, and check request (if applicable). The OEA will send the documents to UFCOM-J Accounting Personnel, who will then invoice the sponsoring health care facility, or appropriate UFJH account, and deposit the payment into the Housestaff Account 3002801-11.
- Permission for participation in internal moonlighting may be revoked at any time by the program director.

4) Reporting requirements and monitoring:

- Reports of internal moonlighting will be done by the Office of Educational Affairs for program director approval and GMEC review along with each institutional duty hours survey report. In addition the OEA will monitor internal moonlighting as it is submitted for processing.

External Moonlighting

- 1) External moonlighting is defined as any professional activity that does not fall under the definition of internal moonlighting. External moonlighting is characterized as:
 - initiated by the resident and not involving any agreement between the University and the outside employer
 - requiring residents to have their own permanent license and malpractice coverage
 - services billed for by the resident
 - no supervision provided by University faculty
 - no salary income provided by the University to the resident who participates
- 2) Approval
 - All residents and fellows must obtain written permission from both the program director and the DIO at least 2 weeks prior to engaging in external moonlighting (see attached form). This approval may last for no longer than the current academic year.
 - Separate approval is required for each site at which a resident intends to perform external moonlighting. The exception to this is multiple locations staffed by the same corporation. In this case, all sites may be listed on one form. Supplemental sites may be added by the resident (with program director review) as long as this is done before the resident performs any service at the new location.
 - Upon approval, one copy will be placed in the resident's Institutional file; the original will be returned to the program assistant for distribution to the resident and program director.

The College of Medicine and the University take no responsibility for any action or problem arising from professional activities which are initiated by the resident and do not involve any agreement between the College of Medicine and the outside employer.

3) Reporting requirements and monitoring:

- Resident performance must be monitored by the program director for the effect of these activities. Adverse effects may lead to withdrawal of permission to moonlight.
- Program directors are required to monitor hours and location of external moonlighting throughout the academic year. At the time of each institutional duty hours survey, the resident must provide a report of all external moonlighting, including dates, hours, and locations so that a signed summary report can be provided by the program director to the Graduate Medical Education Committee.

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- On an annual basis, all residents and fellows are required to sign the University Of Florida College Of Medicine - Jacksonville Policy on Moonlighting Acknowledgement Form. Violation of this policy may lead to immediate revocation of moonlighting privileges, and other disciplinary measures, including dismissal as per the Resident Professionalism Code of Conduct.

I acknowledge that I have read and understand the enclosed policies and procedures on moonlighting and other outside activities.

Signature and Printed Name

Date

**University of Florida College of Medicine - Jacksonville
Internal Moonlighting Activity Agreements**

Department	Agreement Policy	Site	Cost Center/Responsible Party	Rate
Emergency Medicine	Yes	University Athletic Association	DOE	260.00 per game
Emergency Medicine	Yes	SHJ ED	DOE	55.00 per hour
Peds Emergency Medicine	Yes	SHJ Peds ED	DOE	50.00 per hour
Family Medicine	Yes	Augustine Oaks Family Practice Center	UFJFI Cost Center 180	70.00 per hour
Internal Medicine	Yes	SHJ Hospitalist	#720501-651000	Long Shift 500.00 with additional 50.00 for each H&P processed (pt. admissions & general management) Short Shift 350.00 (as of 4/7 450.00 , general pt. services)
IM/Cardiology	Yes	UF St. Mary's Specialty Center	UFJP #1602-60000	50.00 per hour
IM/Cardiology	Yes	UF Cardiovascular Center Lake City	UFJP #16700	75.00 per hour 1 st & 2 nd yr Fellows, 100.00 3 rd yr Fellows/PDAs/Junior Faculty 112.50 Holiday pay 1 st & 2 nd yr Fellows 150.00 Holiday pay 3 rd yr Fellows/PDAs/Faculty (as of 2/5/08)
IM/Medical Oncology	Yes	SHJ Inpatient Ward Service, Out Patient On-Call	CC 114	50.00 per hour in hospital 35.00 per hour on-call at home
Pediatrics	Yes	NICU	Neo-382	35.00 per hour
Pediatrics	Yes	SHJ Peds Inpatient	Peds Admin-358	300 nights, 1500 weekend
Pediatrics	Yes	BMC NICU	BMC, Mr. Larry Freeman	47.50 per hour
Pediatric Critical Care	Yes	Wolfson Children's Hospital	BMC, Dr. G. Armstrong	45.00 per hour
Radiology	Yes	SHJ Radiology Department	PSA Internal Account	50.00 per scope

Updated-- 12/12/05; 7/14/06; 01/12/07; 2/11/08

**UNIVERSITY OF FLORIDA COLLEGE OF MEDICINE - JACKSONVILLE
Internal Moonlighting Site Agreement**

**DEPARTMENT OF _____
_____ PROGRAM**

Internal moonlighting is defined as professional activity that takes place at University of Florida educational affiliates, and for which there is completed agreement between the program, site, and Office of Educational Affairs (OEA) designating the activity to be performed, rate of pay, and account to be charged. As per ACGME requirements, moonlighting must not interfere with the ability of the resident to achieve the goals and objectives of the educational program, and internal moonlighting must be considered part of the 80-hour weekly limit on duty hours.

1. Internal Moonlighting Activities include _____, at the location _____.
2. The Rate per hour or per case: _____.
3. The Fund/Account to be charged: _____.

APPROVED:

Date: _____ Program Director _____
Department of _____

Date: _____ Chair _____
Department of _____

Date: _____ Site Director (if applicable) _____
Location _____

Date: _____ Senior Associate Dean _____
Educational Affairs, UFCOM-J

INTERNAL MOONLIGHTING REQUEST FORM

Name of Housestaff Member: _____

Department and Program: _____

Location of Moonlighting Activity: _____

Date of Activity: _____

Description of Activity: _____

I understand that I may not engage in any internal moonlighting activity outside of this approval process, and that such participation without formal approval will result in disciplinary action, which may include termination from the program. I further understand that this activity, if approved, must be counted toward the 80-hour weekly limit on duty hours. Additionally, internal moonlighting must be considered in compliance with all the terms of the program's Duty Hours Policy and Procedures, i.e. residents must be provided with 1 day in 7 free from all educational and clinical responsibilities, continuous on-site duty must not exceed 30 consecutive hours, and adequate time for rest must be provided.

I also understand that the University of Florida provides the internal moonlighting supplemental salary income and the Office of Educational Affairs is responsible for processing this income. The Self Insurance Program and Workers Compensation Program provide coverage.

Signature _____

Date _____

CERTIFICATION BY PROGRAM DIRECTOR:

I have reviewed this request and certify this resident/fellow is in good academic standing, eligible to participate in internal moonlighting activity, and that this activity, when combined with the numbers of hours per week required of this individual by our program, will not exceed the guidelines established by our program's Duty Hours Policy and Procedures, nor will it interfere with the ability of the resident/fellow to achieve the goals and objectives of the educational program.

Approved **Disapproved** Signature _____ Date _____

DIO REVIEW:

Approved **Disapproved** Signature _____ Date _____

TO BE COMPLETED BY RESIDENT AFTER MOONLIGHTING ACTIVITY:

I certify that I worked the following number of hours: _____ on (date): _____

Signature _____

Date _____

RETURN COMPLETED FORM TO OFFICE OF EDUCATIONAL AFFAIRS

EXTERNAL MOONLIGHTING REQUEST FORM

Name of Housestaff Member: _____

Department and Program: _____

Location of Moonlighting Activity: _____

Date(s) of Activity: _____

Description of Activity: _____

I understand that I may not engage in any external moonlighting activity outside of this approval process. Any such activity will be grounds for my immediate termination from the program. I attest that I understand that participation in this activity, if approved, is apart from my assignment as a resident/fellow of the University of Florida. I understand that the University of Florida is not responsible for and does not provide medical professional liability coverage, disability insurance or workers' compensation coverage for external moonlighting. I further attest that I will complete any and all external moonlighting activity at least 12 hours prior to assigned residency/fellowship duties unless given explicit permission by my program director.

I expressly and unequivocally understand and agree that this external moonlighting activity is in no way related to my employment with the University of Florida and that the University of Florida has no obligation, responsibility, or liability whatsoever for any injury or harm which I may incur or which may befall me during my performance of or a result of this activity. Accordingly, I hereby release, forever discharge, and waive any and all claims I may have now or in the future arising out of or connected with my outside employment activities against the University of Florida, the State of Florida, and any all officers, agents, employees, underwriters and insurers, all individually and in their respective official capacities.

Signature _____

Date _____

CERTIFICATION BY PROGRAM DIRECTOR:

I have reviewed this request and certify this resident/fellow is in good academic standing, eligible to participate in external moonlighting activity, and that this activity will not interfere with the ability of the resident/fellow to achieve the goals and objectives of the educational program.

Approved **Disapproved** Signature _____ Date _____

DIO REVIEW:

Approved **Disapproved** Signature _____ Date _____