I. PURPOSE
To address professional activities provided by physicians outside the scope of approved graduate medical education programs.

II. SCOPE
This policy applies to resident and fellow house staff members in an approved graduate medical education training program.

III. DEFINITIONS
Moonlighting: Professional activities undertaken as a physician outside the scope of graduate medical education programs either within the institution or at other health care institutions.

IV. POLICY STATEMENT
Appointment as a Moonlighter is contingent upon the resident/fellow being a house staff member in an approved graduate medical education program and being a duly licensed physician in the State of Indiana.

V. PROCEDURE(s)
A. An initial application for medical staff membership must be completed, signed and include, but is not limited to, the following documentation/information from the resident/fellow:
   1. Copy of current Federal Drug Enforcement Administration Certificate (DEA), or copy of verification from the U.S. Department of Commerce National Technical Information Service (NTIS) database, or a signed “Physician Acknowledgment for Prescribing Controlled Substances” form. The hospital DEA number may not be used for moonlighting activities.
   2. Name of program training director who will provide a recommendation relevant to the resident/fellow’s training, experience and competence to fulfill moonlighting responsibilities. The Medical Staff Office will send a questionnaire and release of information to the training director.
3. Recent photograph, approximately 2 ½ x 3 ½ inches, head and shoulders, black and white or color, professional quality.
4. State photo identification, i.e. copy of driver’s license or state ID card.
5. Consent and Disclosure Form, completed and signed for a background investigation.
6. Copy of current professional liability insurance.
7. Completion of health evaluation and current PPD.
8. Proof of Flu vaccine if applicable
9. Proof of IN license and CSR

B. The Medical Staff Services Office shall verify, from the primary source(s), medical licensure, education, and training. Primary source verification may include letter, internet, fax, email, or phone verifications.

C. Resident/Fellow shall sign an “Authorization and Release” form, consenting to the inspection of records and documents pertinent to his or her licensure, evidence of specific training, experience, current competency, and authorization to disclose his/her photograph for purposes of identification.

D. The National Practitioner Data Bank (NPDB) will be queried prior to granting privileges.

E. A background investigation shall be conducted prior to granting privileges.

F. Upon receipt of all required documentation and completion of primary source verification, the initial appointment application shall be reviewed and recommended by the section chair in the clinical service where privileges are requested.

G. Requests for Moonlighting Privileges shall be reviewed and recommended by the Credentials Committee and Medical Staff Executive Committee with final approval by the Board of Managers within sixty (60) days from receipt of all required documentation materials by the Indiana University Health North Hospital Medical Staff Services Office.

H. Residents/Fellows applying for Moonlighting privileges shall be appointed to the Courtesy status of membership, and shall remain in the Courtesy status throughout the moonlighting appointment.

I. Residents/Fellows who are granted Moonlighting privileges shall be bound by the bylaws, rules, regulations and policies of the Medical Staff.
J. Privileges for Moonlighting shall be granted for a period not to exceed two (2) years. If during the two (2) years period the physician terminates his/her moonlighting appointment or does not maintain House Staff Membership in good standing in an Approved Graduate Medical Education program, Medical Staff membership shall be terminated. In the event of such termination, provisions of the bylaws, rules and regulations, and policies of IU Health North Hospital and of the Medical Staff with respect to the physician’s right to hearings, appellate reviews, etc., in connection with such loss of membership, shall not apply.

K. A file shall be maintained for each resident/fellow approved for moonlighting privileges in the Medical Staff Services Office.

L. The resident/fellow, training program director, and section chair shall be advised in writing when medical staff membership is granted.

VI. EVIDENCE BASED/REFERENCE
Expedited Credentialing and Privileging Policy

VII. RESPONSIBILITY
Medical Executive Committee
Medical Staff Office
Credentials Committee

VIII. APPROVAL BODY
Medical Executive Committee
Board of Managers
IX. APPROVAL SIGNATURES

_________________________________________  _________________
James Leland, MD, Chair, Credentials Committee  Date

________________________________________  __________________
Jack Keene, MD, President, Medical Staff  Date

Lynda Smirz, MD, MBA  Date
Chief Medical Officer and Vice President of Surgical Services

_________________________________________  _________________
Jonathan R. Goble, MHA, MBA, FACHE  Date
President and Chief Executive Officer