


Title: Graduate Medical Education - Moonlighting Policy

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I. Policy Statement

- a. The purpose for this policy is to set forth the conditions and requirements for professional activities outside the educational program (moonlighting) for house staff.
- b. House staff must comply with Accreditation Council for Graduate Medical Education (ACGME) duty hour requirements. Residents must also be made aware of malpractice insurance and licensure issues required for moonlighting as well as legal aspects for residents who are visa holders.

II. Definitions

- a. **Fellow:** A physician in a program of graduate medical education, which may or may not be ACGME accredited, who has completed the requirements for Board Certification and is employed by the University of Missouri. (ACGME Glossary of Terms).
- b. **Resident:** An individual who participates in an accredited GME program and is not yet eligible for board certification. For DGME and IME payment purposes, a Resident means an intern, resident, or fellow who is formally accepted, enrolled, and participating in an approved medical residency program, including programs in osteopathy, dentistry, and podiatry as required to become certified by the appropriate specialty board. (CMS Guidelines for Teaching Physicians, Interns, and Residents and ACGME Glossary of Terms)
- c. **House Staff:** Residents or fellows who are physicians in training at University of Missouri Health Care (MUHC). House staff are required to have a current Missouri medical license.

III. Process/Content

- a. The ACGME requires the institution assure that each training program maintains a policy that specifies moonlighting conditions, including both internal and external moonlighting, and setting forth specific requirements for such activity. The moonlighting policy, whether moonlighting is allowed by individual programs or not, is to be referenced in each trainee contract.

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- b. This policy has been created to
 - i. Provide an institutional policy that guides and provides a basis upon which programs will develop their own specific policies.
 - ii. Inform and protect residents who choose to moonlight while training at University of Missouri Health Care (MUHC)
- c. House Staff who consider moonlighting and/or other professional activities outside of the MUHC educational program must adhere to the requirements, standards, and definitions listed below:
- d. Requirements and Standards
 - i. Internal Supervised House Staff Activity
 - 1. Internal Moonlighting is referred to as Internal Supervised House Staff Activity (ISRA).
 - 2. An individual house staff may voluntarily choose to participate in this elective responsibility, if offered the opportunity by their program, upon successful completion of the PGY-1 year.
 - 3. ISHSA may include an additional stipend beyond the salary of the trainee.
 - 4. Must be at the MUHC clinics and campuses or at an MUHC site where training normally occurs.
 - 5. Must be rendered under GME approval with the same faculty supervision, attending billing, and documentation rules.
 - 6. Must be at a level of clinical responsibility that is appropriate for the house staff's level of training.
 - 7. This activity is counted as part of the house staff's regular duties in the 80-hour per week duty requirement.
 - 8. A house staff member wishing to participate in ISHSA must apply using the GME Application to Moonlight. This application must be signed by all parties and maintained in the New Innovations software system, as well as house staff's file. Written permission is only good for one academic year and must be reapplied for each academic year.
 - 9. The GME office signs off on ISHSA payments and ensures a signed ISHSA form is in place and moonlighting hours are recorded in New Innovations. If no approval form is found for a house staff member, or moonlighting hours are not recorded, payment will be held until these items are complete.
 - 10. A PGY-1 house staff member is not eligible for ISHSA at any time or under any circumstances.

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ii. External Moonlighting

1. External moonlighting is voluntary medical practice/work done by house staff outside of their training program and outside the scope of training.
2. Any house staff wishing to moonlight must apply using the GME Application to Moonlight. This application must be signed by all parties and maintained in the New Innovations software system, as well as house staff's file.
3. The program director must monitor that moonlighting activity is included in the 80 hours per work requirement to ensure that the house staff does not become excessively fatigued.
4. The program director may limit or suspend moonlighting activity, either individually or unilaterally, if excessive fatigue or interference with the required training activities is found.
5. External moonlighters, since they are functioning as independent physicians, must:
 - a. Hold permanent licenses (Missouri medical, Federal Narcotics (Drug Enforcement Administration--DEA) and State Narcotics (Bureau of Narcotics and Dangerous Drugs—BNDD) before beginning any moonlighting work.
 - b. Have medical staff privileges and malpractice coverage for the patient care they will provide.
6. External moonlighting can be a medical practice outside of the training program, but within an MUHC location or under MUHC ownership. In this situation, MUHC provides for malpractice coverage and any related legal representation.

iii. Moonlighting for J-1 or H-1B Visa Holders

1. All international medical house staff who are not US citizens or legal permanent residents have specific restrictions imposed on moonlighting by the U. S. Customs and Immigration Service.
2. Federal regulations concerning J-1 Educational Commission for Foreign Medical Graduates (ECFMG) visa holders changed as of September 2025, to allow J-1 visa holders to moonlight.
 - a. Activities must take place within the same institution or primary clinical site as the physician's accredited or non-standard training program.
 - b. Activities must be educationally appropriate and not extend the training period.

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- c. Prior written approval from both the program director and the GME Office is required; completion and submission of a new request form (available on the Forms and Memos page of the ECFMG website) constitutes this approval. The GME Office, not the individual J-1 physicians, must initiate these requests.
 - d. All activities must comply with institutional policies, ACGME work hour limits, and the physician's core training responsibilities.
- 3. H-1B visa holders are also prohibited from moonlighting unless their visa has been amended to include the outside facility.
- 4. Any house staff in a training program at MUHC who fails to comply with this regulation is at risk for deportation.
- iv. To ensure compliance with all regulations, the following process will be followed:
 - 1. Any house staff wishing to moonlight must receive approval to do so from their program director using the GME Application to Moonlight. Moonlighting must be approved by the program director of the training program, and these individuals must assure that moonlighting is not detrimental to training in any significant way.
 - 2. The GME office and program director will verify visa status. If it is determined that the house staff member wishing to moonlight is a J-1 visa holder, they will be required to submit both the ECFMG request form and the GME Moonlighting Application.
 - 3. If it is determined that the house staff member wishing to moonlight is an H-1B visa holder, the GME office and program director will verify the H-1B documents to determine whether the stipulation for outside employment is written in the visa. If moonlighting is not specifically allowed in the visa, they will not be allowed to moonlight.
 - 4. The GME office will compare monthly moonlighting pay rosters against logged work hours and moonlighting approval forms. No moonlighting pay will be paid out to trainees until work hours have been entered into New Innovations. Trainees receive a total of three reminders from the GME office to enter work hours before moonlighting privileges are revoked.
 - 5. This process is applicable to both external moonlighting and ISHSA.

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- v. Each program must create a policy that complies with the institutional policy and place both the program policy and the institution policy in their program manual.

IV. Attachments

- a. [Graduate Medical Education - Application to Moonlight](#)

V. References, Regulatory References, Related Documents, or Links

- a. ACGME Glossary of Terms
- b. CMS Guidelines for Teaching Physicians, Interns, and Residents