



ACC.19™

68th Annual Scientific Session & Expo

MOONLIGHTING

To be or not to be?

**NEW
ORLEANS**
MARCH 16 - 18
2019

Lorrel E. Brown, MD, FACC
University of Louisville School of Medicine

Harsimran S. Singh, MD, FACC
Weill Cornell Medicine – New York Presbyterian Hospital

Question 1: Which of the following statements best encapsulates your sentiment on moonlighting during cardiology fellowship?

10%

A. Best thing since sliced bread. We love it!

72%

B. A necessary evil

7%

C. Scourge on the earth that must be purged

10%

D. What are you talking about – my fellows don't moonlight?

0



ACC.19

Question 2: What percentage of your fellows moonlight?

4%

A. All of them (100%)

34%

B. The majority (76% – 99%)

36%

C. I'm not sure (25% – 75%)

18%

D. Very few if any (1% – 24%)

9%

E. It's just not done (0%)

0



ACC.19

Question 3: Moonlighting opportunities for fellows in your program consist of (select all that apply):

30%

A. Medicine opportunities at other institutions

34%

B. Medicine opportunities at **our** institution(s)

28%

C. Inpatient Cardiology opportunities at **our** institution(s)

3%

D. Moonlighting is a built in **requirement** into our fellowship (e.g. paid call or service time)

5%

E. Don't you get it already - moonlighting is the root of all evil. It just doesn't happen at my institution.

0



ACC.19

Discussion Topic

Is moonlighting something that we should support, discourage, or even restrict during fellowship training?



Moonlighting Pros & Cons

PROs

- Supplemental income!
- Supplemental income!
- Incremental, progressive clinical independence
- Fulfilling an institutional need



CONs

- Takes away focus from academic or clinical study
- Potential hours violations
- Liability
- Detrimental if fellow is not ready

What exactly are the rules?

There is state by state variability as to when and at what stage of training moonlighting is allowed.





Accreditation Council for
Graduate Medical Education

Common Program Requirements

Section VI

- Clinical / educational work hours must be limited to 80 hours per week (including moonlighting).
- Moonlighting must not interfere with the goals and objectives of training.
- Moonlighting must not interfere with the resident's fitness for work nor compromise patient safety.



ACC.19™

Employment Outside of the Approved Training Program ("Moonlighting")

U.S. Code of Federal Regulations (22CFR§62.16)

- a) *An exchange visitor may receive compensation from the sponsor or the sponsor's appropriate designee, such as the host organization, when employment activities are part of the exchange visitor's program.*
- b) *An exchange visitor who engages in unauthorized employment shall be deemed to be in violation of his*

TAKEAWAY

J-1 physicians may engage in and receive compensation for *only* those activities that are part of the training program for which ECFMG sponsorship was approved. Work outside of the approved training program is strictly prohibited.

DOS Statement of Policy (1999)

...a foreign medical graduate is not authorized to "moonlight" and is without work authorization to do so. A foreign medical graduate may receive compensation from the medical training facility for work activities that are an integral part of his or her residency program. The foreign medical graduate is not authorized to work at other medical facilities or emergency rooms at night or on weekends. Such outside employment is a violation of the foreign medical graduate's program status and would subject the foreign medical graduate to termination of his or her program.

Moonlighting Policy at NYP

Moonlighting

Moonlighting is a privilege, not a right

revoked if a resident violates any of these restrictions or is not in good academic standing.



ACC.19™

Can Moonlighting be used for good?

- Equity between ECFMG and non-Visa fellows
- Extra work for extra pay
- Cardiac Rehab – killing 3 birds with one (gold) stone (that someone else pays for)

