

# **Graduate Medical Education Departmental Policy**

Policy Title: Resident and Fellow Credentialing and Conditions of Appointment

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# I. Purpose

To ensure all residents and fellows in clinical service areas are properly screened and credentialed in accordance with The Joint Commission, Centers for Medicare and Medicaid Services (CMS), the Accreditation Council for Graduate Medical Education (ACGME), UW Hospitals and Clinics (UW Health) policies, and state and federal law. This policy covers initial and annual credentialing and resignation or termination of an appointment and procedures for all departing residents.

#### II. Scope

This policy will apply to all residents and fellows in ACGME-accredited training programs training within UW Health (UWH), not including UWH Northern Illinois Hospitals.

#### III. Definitions

**Resident:** The term "resident" shall refer to both resident and fellow physicians, including post-doctoral fellows (unless otherwise specified).

**Program(s):** Will refer to ACGME-accredited training program(s).

**UW Health:** For this policy, the term "UW Health" shall mean University of Wisconsin Hospitals and Clinics Authority, which is the sponsoring institution of the ACGME-accredited training programs. "UW Health" is the trade name of University of Wisconsin Hospitals and Clinics Authority and its affiliates.

**Credentialing:** Credentialing is the process of obtaining, verifying, and assessing the qualifications of a clinician to provide care or services in or for a healthcare organization.

**GME Administration:** For GME programs sponsored by the University of Wisconsin School of Medicine and Public Health (UWSMPH), GME Administration shall be the Department of Family Medicine and Community Health GME Administration. For all other residents and fellows, GME Administration shall refer to UW Health GME Administration.

**Legal Name:** The first and last name (surname) a resident has listed with the United States Social Security Administration.

#### IV. Procedure

Residents must be fully credentialed by GME Administration prior to commencement of training in a UW Health or UWSMPH GME program, and prior to reappointment. Some requirements must be met to begin employment, when applicable. Appointment to a GME program is conditional and contingent upon successful completion of the appointment and credentialing

process, which includes satisfactory completion of the criminal background check process, verification of satisfactory prior training (when applicable), and eligibility for employment with UW Health or UWSMPH.

Residents must also comply with the credentialing requirements of all participating sites to which assigned. If a resident is unable to become credentialed at a required rotation site, the program will determine whether a change in curriculum can be reasonably accommodated. In cases where the curriculum change cannot be reasonably accommodated, a waiver or release from the relevant Matching service shall be requested when necessary (e.g., National Resident Matching Program, San Francisco Match, or incumbent), subsequently, the resident appointment may be rescinded. If training has already commenced, the resident may be terminated.

Failure to timely complete, or maintain, credentialing and appointment requirements may result in rescission of offer of appointment, administrative suspension, or discipline up to and including termination.

Additionally, residents employed by UWSMPH must adhere to all UWSMPH policies and procedures regarding resident credentialing and conditions of appointment. If requirements differ, UWSMPH-employed residents will follow the SMPH policies if in a UWSMPH-sponsored training program.

#### A. Initial Appointment

Residents must complete and submit all appointment and credentialing requirements using their legal name, as directed by GME Administration. Additional appointment documentation required by specific training programs may be communicated to residents directly by the program.

- 1. Submitted by the resident, list not inclusive of all requirements:
  - Signed training appointment letter
  - Medical (MD or DO) or graduate (PhD for post-doctoral fellows only) school diploma copy within 60 days of start or similar date as specified by GME Administration
  - Milestone Evaluation (for PGY-2s and above)
  - Verification of prerequisite GME training by hire date. GME Administration may
    grant additional time for receipt of verification as necessary due to delays from
    previous training site. Clinical start will be delayed until prerequisite training may
    be verified.
- 2. Additional submissions in the list below do not apply to post-doctoral fellows:
  - DEA registration copy (if applicable for training program)
  - Registration with Wisconsin Enhanced Prescription Drug Monitoring Program (ePDMP)<sup>1</sup>

<sup>&</sup>lt;sup>1</sup> Residents that have an unrestricted medical license and use an institutional DEA (iDEA) will not be able to register for ePDMP.

- Lifesaving certification as appropriate for training program (reference UWH Policy 9.35 and program policy)
- Verification of required medical licensure (maintenance of a Wisconsin medical license, educational or unrestricted, is required throughout training). PGY-3s and above must obtain an unrestricted license unless waived by GME Administration, in which case a resident education license would be required.
- National Provider Identifier (NPI)
- Medicare Provider and Supplier Enrollment, Chain, and Ownership System (PECOS) enrollment
- Wisconsin Medicaid enrollment (assisted by GME Administration)
- GME Summative Evaluation from previous training program (for transfer residents)

#### 3. Additional Responsibilities

- Prospective Employee Health Assessment and Drug Screening, which includes a urine drug screen (reference UWH Policy 9.20)
- I-9 Employment Eligibility Verification (completed at Employee Health appointment for UWH sponsored programs)
- Completion of GME institutional new-hire orientation

#### 4. Background Checks

Residents must consent to an online background check through a national background check screening service provider, and federal regulatory checks as part of onboarding.

- Caregiver Background Checks (performed on hire and then every four years)
   (Reference UWH Policy 9.03)
- Office of Inspector General List of Excluded Individual/Entities clearance

## 5. Additional Conditions of Appointment

Each resident shall notify the Director of GME or designee within 10 days following the receipt of any of the following. Failure to notify shall constitute grounds for disciplinary action.

- Any voluntary or involuntary loss or lapse of any license, registration, or certification regarding professional practice; any disciplinary or monitoring measure and any change in such discipline or monitoring measure by any licensing or registration body or certification board that licenses, registers, or certifies clinical professional practice.
- Any settlements, judgments, or verdicts entered in an action in which the clinician
  was alleged to have breached the standard of care other than those arising out of
  their employment by UW Health or their training at UW Health.
- Pending disciplinary or other adverse action by a governmental agency or any other action adversely affecting their privileges at another health care facility.
- The voluntary or involuntary termination of medical staff membership or voluntary or involuntary limitation or reduction of clinical privileges at another hospital or institution. The affected resident shall provide the hospital with

- complete information as to the reasons for the initiation of corrective or disciplinary action and the progress of the proceedings.
- Each resident shall notify the Director of GME or designee within 30 days
  following the receipt of any notice of complaint or investigation by any licensing
  or registration body or certification board that licenses, registers, or certifies
  clinical professional practice. Failure to notify shall constitute grounds for
  disciplinary action.

## 6. Use of Legal Name

Residents will use their legal name for most purposes at UW Health, including but not limited to employment documentation, certification, licensure, and other registrations. In the case that multiple names have been used during the application and employment process, the legal name will be the one used by UW Health. A resident's legal name will be verified at the time of hire by viewing a Form I-9 acceptable document that establishes identity. Credential detail on hospital ID badge and lab coats shall be consistent with UW Health policy/guidance.

## B. **Annual Reappointment**

The following requirements will be completed for annual reappointment. Sections IV.B.2. and IV.B.3. do not apply to post-doctoral fellows.

- 1. Appointment and credentialing documentation required from residents:
  - a. Signed training appointment letter. Residents must sign a new appointment letter for each year appointed.
  - b. Compliance with all policy and regulatory requirements, including:
    - Required e-learnings, such as Safety and Infection Control and Annual Compliance
    - Respiratory Protection Program (a.k.a., fit testing)
- 2. PGY-2s advancing to PGY-3: PGY-2s who have completed the PGY-1 year in the same training program are required to complete Step 3 by December 31 of the PGY-2 year. PGY-2s who have completed the PGY-1 year in a different program (regardless of whether it was at the same institution or at another institution) are required to complete Step 3 by March 1 of the PGY-2 year (UW Health-sponsored programs only).
- 3. PGY-3s and above (UW Health-sponsored programs only): All residents appointed to a PGY-3 and above must have passed USMLE Step 3, or COMLEX Level 3. Continuing residents who do not pass one of these tests by the beginning of PGY-3 year will be promoted to the next PGY level as appropriate, but the stipend will remain at the PGY-2 level. Continuing residents will be given up to one year to pass the exam. If unsuccessful at passing the exam by the end of the PGY-3 year, the resident will be terminated for not meeting employment requirements. Under exceptional circumstances, GME Administration may waive or allow extensions of time for this requirement.

# C. Resignation, Termination, or Nonrenewal of Appointment

1. Resignation of Appointment

When a resident chooses to resign from an appointment prior to the completion of the program, the resignation must be submitted in writing (email is acceptable) to the program director and GME Administration. Residents must provide at least 12 weeks' notice. Exceptions to this notice requirement may be considered by the program director and GME Administration when there are exceptional circumstances. Prior to the resignation effective date, the program director must allow sick, medical, and parental leave when the request is compliant with the GME *Time Off* policy. Vacation may only be used if the program can accommodate the resident's time away, which is at the discretion of the program director. No other paid time off is allowed.

## 2. Termination or Nonrenewal of Appointment

Terminations are typically effective on the day of notice to the resident. A nonrenewal of appointment will result in termination at the end of the current appointment period. Residents will be given as much notice as possible after the decision not to renew their appointment is made, but no more time than the end of the current appointment. For residents with nonrenewed appointments, allowed time off and the procedures for GME Administration and the program are the same as resignations listed above.

- 3. Administrative Responsibilities for All Departing Residents GMF Administration will:
  - Submit a UWH HR ServiceNow ticket
  - Notify any affiliate hospitals
  - Notify UWSMPH HR
  - Deploy Exit Checklist to resident via MedHub

## Program administration will:

- Collect the resident's white coats, pager, badges, keys, computer equipment, and any other UWH and UWSMPH property.
- Provide outgoing resident with a copy of their final (summative) evaluation which must be dated on or after their final day of training.

#### Resident will:

Complete all tasks detailed in Exit Checklist

### **B. Visiting Residents**

Required documentation:

- Visiting Resident Application
- Letter from home program director stating approval of rotation and confirming that resident is in good standing
- Medical school diploma (copy)
- Wisconsin medical license (valid through duration of the resident's training)
- Medicare provider enrollment
- Wisconsin Medicaid provider enrollment
- DEA certificate (if applicable)
- Certificate of liability insurance

- Background check verification (must be on institution letterhead, include date of background check, and signature of individual completing verification)
- Current life-saving certifications as required for the program and service through which visiting resident will rotate.
- Home institution employee health certification of all required immunizations, including Tuberculin (TB) skin test, flu vaccination, and COVID vaccination. TB test and flu vaccination (or waiver) must be current at time of UWH rotation. COVID waivers will not be accepted.
- ECFMG certificate (if applicable)
- If training under J-1 visa, home program will submit to ECFMG the Required Notification of Off-site Rotation/Elective request providing approval to train outside of home institution

# V. Coordination

Sr. Management Sponsor: Susan Goelzer MD, MS

Designated Institutional Official

Author: Director of Graduate Medical Education and Medical Staff Administration

Review/Approval Committee: Graduate Medical Education Committee

## Signed by

Susan L Goelzer MD, MS

Designated Institutional Official (DIO), UW Health

Associate Dean of Graduate Medical Education

Professor of Anesthesiology, Internal Medicine and Population Health Sciences

University of Wisconsin School of Medicine and Public Health