



Policy Number GME-8242-011
Date of Last Review Month Year: 07/2018
Date of Last Revision Month Year: 11/2025
Policy Owner(s) Department GME

Institutional Requirement IV.K.1
2022 Accreditation Council for
Graduate Medical Education (ACGME)

Graduate Medical Education: Moonlighting

I. Purpose

The purpose of this policy sets forth the expectation that the Department of Graduate Medical Education (GME) maintain a policy regarding professional activities outside the educational program per Accreditation Council for Graduate Medical Education (ACGME) Institutional and Program requirements.

II. Scope

This policy applies to all **active fellows** currently enrolled and appointed to Ochsner Clinic Foundation (OCF) sponsored, accredited fellowship programs.

III. Definitions

- **Department of Graduate Medical Education (GME):** Responsible for the administration of all OCF sponsored residency and fellowship training programs
- **Fellow:** Any trainee in an OCF sponsored fellowship training program
- **Resident:** Any trainee in an OCF sponsored residency training program
- **Moonlighting:** Compensated for and functioning as a licensed independent physician providing care within the scope for which Fellow is currently board certified or board eligible
- **Ochsner Clinic Foundation (OCF)**
- **Designated Institutional Official (DIO):** Responsible for oversight of OCF Graduate Medical Education programs
- **Graduate Medical Education Committee (GMEC):** Committee responsible for policy and oversight of Graduate Medical Education sponsored by OCF, chaired by the DIO
- **Accreditation Council for Graduate Medical Education (ACGME)**
- **Graduate Educational Temporary Permit (GETP):** Can be issued by the Louisiana State Board of Medical Examiners to an international medical graduate for the purpose of participation in an accredited training program
- **New Innovations:** OCF's GME residency management system

IV. Policy Statement:

- a. Fellows are not required to engage in moonlighting.
- b. Residents in an Ochsner-accredited core training program are not eligible for moonlighting privileges.
- c. Fellows are eligible to submit moonlighting application to GME for approved sites in which to function as an independent physician within the scope of their **Core** specialty training program for which the applicant is currently board certified or board eligible within their respective certifying board(s).



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- d. Fellows who engage in moonlighting activities must maintain a full unrestricted Louisiana medical license. A Louisiana training permit or GETP is not adequate for moonlighting activities.
- e. Fellows who engage in moonlighting activities must obtain an individual personal DEA license and may not use the assigned OCF training DEA number.
- f. Fellows who engage in moonlighting activities must obtain appropriate medical staff credentialing and privileging for the identified moonlighting site to function as an independent physician within the scope of their **Core** specialty training program for which the Fellow is currently board certified or board eligible.
- g. Fellows who wish to engage in approved moonlighting activities must submit application to GME including explicit written approval of their Program Director and the DIO. Approved moonlighting applications will be maintained in the trainees New Innovations personnel file.
- h. Fellows who seek approval to participate in moonlighting activities at locations not included within the ACGME-sponsoring institution's provider number are required to obtain and provide proof of professional liability (malpractice) insurance covering all proposed moonlighting activities.

Moonlighting activities occurring at the following sites fall under the institution's provider number and therefore **do not** require the fellow to secure independent liability coverage:

- I. Jefferson Highway
- II. Baptist
- III. Elmwood
- IV. West Bank

If a fellow is approved to moonlight at any location not listed above, the fellow must obtain individual professional liability insurance coverage with minimum limits of \$1,000,000 per claim, and \$3,000,000 annual aggregate.

Proof of such coverage must be submitted at the time of application for moonlighting approval. No application will be reviewed or approved without documentation verifying compliant coverage.



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Note:

- J-1 visa holders are not eligible to participate in moonlighting under this policy section (IV.h).
 - Fellows on J-1 visa status must refer to **Policy Section IV.n** for specific regulations, eligibility criteria, and restrictions related to moonlighting activities.
- i. Time spent by fellows moonlighting must be counted toward the 80-hour maximum weekly limit as defined in the ACGME – Common Program Requirements (*CPR VI.F.5. Moonlighting*). Fellows approved moonlighting activities must be included in hours worked and documented in the New Innovations residency management system. The Program Director or his/her designee will be responsible for monitoring moonlighting hour logs ensuring compliance with the Clinical and Educational Work hours as defined by the ACGME including:
- I. All clinical and educational work hours must be limited to no more than 80 hours per week, averaged over a four-week period, inclusive of all in-house clinical and educational activities, clinical work completed from home, and all moonlighting.
 - II. Fellows should have eight hours off between scheduled clinical work and education periods.
 - III. Fellows must have at least 14 hours free of clinical work to include moonlighting, and education after 24 hours of in-house call.
 - IV. Fellows must be scheduled for a minimum of one day in seven free of clinical work and required education (when averaged over four weeks). Moonlighting or at-home call cannot be assigned on these free days.
 - V. Clinical and educational work periods for fellows must not exceed 24 hours of continuous scheduled clinical assignments.

Failure to comply with ACGME Clinical and Educational work requirements will result in revoked moonlighting privileges.

- j. Moonlighting hours will be limited to a maximum of **24** hours per month. Exceptions to this restriction will be considered on a case-by-case basis and approval must be granted by the Program Director and the DIO prior to additional shift scheduling.
- k. Moonlighting is a privilege. Fellows who choose to moonlight must be monitored by their Program Director as privileges will be revoked if he/she feels that the moonlighting is adversely affecting the fellow's performance in the accredited



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training program. The Sponsoring Institution or ACGME-accredited programs may prohibit moonlighting by fellows.

- I. Any fellow on an active Performance Improvement Plan (PIP), non-disciplinary or disciplinary is considered to be ineligible for moonlighting privileges. Fellows must be in good standing and progressing satisfactorily as determined and documented by the Program Director.
- m. Ochsner provided liability coverage **does not** extend to **non-approved, off campus medical employment** activities, and participation in these activities could result in the termination of the participating fellow's designated training.
- n. J-1 physicians are eligible (eff. 9/2025) to engage in moonlighting clinical activities within the sponsoring institution, provided all of the following conditions are met in addition to full compliance with institutional and ECFMG policies:
 - Moonlighting cannot extend training timelines
 - Activities must take place within the sponsoring institution or primary clinical site as the sponsored ACGME-accredited program.
 - Activities must be educationally appropriate.
 - The Program Director for J-1 learner is required to complete and submit ECFMG attestation form- [supplemental-clinical-activity-attestation.pdf](#).
Programs, not fellows, must initiate these requests.
 - Fully executed form must be submitted to GME with completed Moonlighting application.
 - All moonlighting training activities must comply with institutional policies, ACGME duty hour limits, and the physician's core training responsibilities.
- o. Violation of this policy will result in immediate suspension or termination of the fellow from their designated training program.

V. Procedure:

- a. Application for moonlighting privileges **must be submitted annually at the beginning of each Academic Year**. Moonlighting privileges **do not** carry over from year-to-year. Supporting documentation is required to be included at the time of GME application review:
 - i. Completed application with signature approvals including Program Director
 - ii. Copy of Unrestricted Louisiana Medical license
 - iii. Copy of Personal DEA license



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- iv. Proof of approved credentialing documentation
- v. Proof of Medical Malpractice insurance for sites other than Jefferson Highway Campus, Baptist Campus, West Bank Campus and Elmwood Campus
- b. Scheduling of moonlighting shifts is prohibited until completion of application review and notification of approval by GME ensuring all requisite criteria have been verified. Notification of application status will be provided directly to Fellow and Program Director.
- c. An identified representative from approved site(s) is required to submit moonlighting reports bi-weekly to GME ensuring compliance with duty hour monitoring. Reports should be submitted bi-weekly or as applicable to GME@ochsner.org.
- d. Moonlighting application process may require up to 2-weeks from receipt of submission for processing and notification.

Any non-compliance with the requirements of this policy, accrediting and regulatory agency regulations in the scope of moonlighting activity will be grounds for immediate dismissal from the Fellow's designated training program.

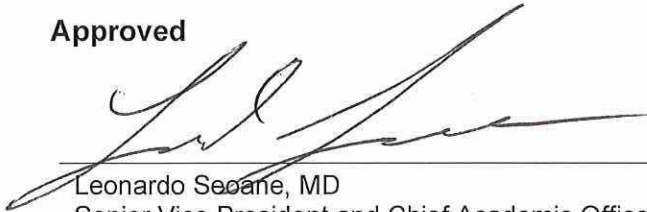


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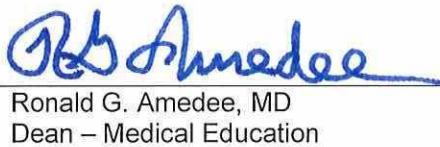
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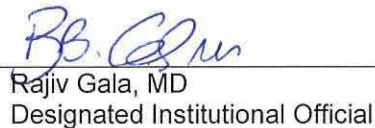
Approved



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Policy History

Date of Issue: 07/1999

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