UNIVERSITY HEALTH CARE
HOSPITALS AND CLINICS

GRADUATE MEDICAL EDUCATION

RESIDENT POLICIES AND PROCEDURES

MEDICAL LICENSE, CONTROLLED SUBSTANCE, DEA NUMBER, NPI NUMBER, MEDICAID PROVIDER REGISTRATION, and MEDICARE PECOS REGISTRATION

GME 1.3 Review Date: August 2015
Chapter: Conditions for Employment

I. PURPOSE

All residents are required to obtain a full, unrestricted Utah physician/surgeon license, a Utah controlled substance license, a federal DEA registration, and a National Provider Identifier (NPI) to participate in a training program at the University of Utah Affiliated Hospitals, in accordance with the policy herein. The NPI is the standard unique identifier for health care providers. Once issued, the NPI will remain with the provider regardless of job or location changes. All residents are also required to register with Medicaid as a Limited Medicaid Provider and to register with Medicare as an ordering/referring provider in the Provider Enrollment, Chain, and Ownership System (PECOS).

University of Utah residents are not eligible for a Utah Temporary or Utah Physician Educator license.

II. POLICY

All resident MDs are required to pass Steps 1, 2 (CK and CS), and 3 of the United States Medical Licensing Exam (USMLE) (or equivalent exams for DOs) and to obtain a Utah full unrestricted physician/surgeon license, a Utah controlled substance license, a National Provider Identifier (NPI), and federal DEA registration (as applicable). The Graduate Medical Education Committee may grant Administrative Variances of this policy in specific instances described herein. The Graduate Medical Education Committee may also grant exemptions from the licensure requirement in specific instances described herein. Any resident who does not comply with this policy, or who is ineligible for licensure at the required time as set forth in this policy, without having been granted an Administrative Variance or license exemption, will be subject to disciplinary action and/or termination as dictated by the Graduate Medical Education Committee. Appeals of this policy may be made to the Graduate Medical Education Committee.

The Utah Medical Practice Act requires all applicants for Physician-Surgeon licenses to have completed 24 months of progressive training in an ACGME-accredited or AOA-accredited residency training program, or a program approved by the Royal College of Physicians and Surgeons or the College of Family Physicians of Canada. Physicians may apply for a Utah Physician-Surgeon license after completion of the first year (12
months) of training provided that they are enrolled in and participating in a second year of accredited training. A physician who receives a Utah Physician-Surgeon license during the second year of training, but who does not complete the second year of training, will surrender or have revoked the Utah Physician-Surgeon license (Utah Medical Practice Act 58-67-302 (1)(e).

All residents who have obtained a Utah physician surgeon license are required to complete and submit a Medicaid Provider Application as a “limited” Medicaid provider and to apply online in the Medicare PECOS system as an ordering/referring provider.

III. PROCEDURE

A. Post-Graduate Year One (PGY-1) Residents

1. PGY-1 Exam Requirements

   All post-graduate year one (PGY-1) residents are required to pass Steps 1 and 2 (CK and CS) of the USMLE (or equivalent exams for DOs) prior to beginning residency training, and must show evidence of that as part of the credentialing process. All PGY-1 residents are required to take and pass USMLE Step 3 (or equivalent exam for DOs), receive scores, and provide evidence of a passing score to the Graduate Medical Education Office by the last day of the PGY-1 year.

2. PGY-1 NPI Requirements

   All PGY-1 residents must apply for and obtain an NPI number prior to hire date. Instructions for obtaining an NPI number are sent to PGY-1 residents with the Welcome Packet. The NPI number must be provided to the GME Office prior to hire date.

3. Program Director Responsibilities

   a. Program Directors are expected to obtain verification from applicants to programs that they have passed Steps 1 and 2 (CK and CS) of the USMLE (or equivalent exams for DOs) prior to the beginning of the residency.

   b. Accepted or matched PGY-1 residents who have not taken or passed Steps 1 and 2 (CK and CS) will be released from their contracts.

   c. Program Directors are expected to obtain verification from all PGY-1 residents in their programs that they have taken, passed, and received scores of Step 3 of the USMLE (or equivalent exam for DOs) during the PGY-1 year.

   d. The Program Director, Program Coordinator, or PGY-1 resident must provide the Graduate Medical Education Office with evidence of passing all required exams before the last day of the resident's PGY-1 year.
B. Post-Graduate Year Two (PGY-2) and Higher Residents (includes Fellows)

1. PGY-2 and Higher Application Requirements
   a. All post-graduate year two (PGY-2) residents and all new incoming residents at level PGY-2, must be eligible for a Utah medical license, a Utah controlled substance license, and a federal DEA registration. All PGY-2 residents must submit their completed applications by the time guidelines outlined below and are responsible for all necessary follow up to ensure they obtain their licenses in a timely manner.
   b. All PGY-3 and higher residents and fellows must be fully licensed by their hire date. PGY-3 and higher residents and fellows who are not licensed by their hire date will not be allowed to start until they are fully licensed unless an Administrative Variance has been granted by the Graduate Medical Education Committee.
   c. All residents must register with Medicaid as “limited” Medicaid providers, and must register with Medicare PECOS as ordering/referring providers, after receipt of a Utah medical license and federal DEA license. Medicaid Provider Applications and instructions and Medicare PECOS registration instructions will be sent to all residents by the GME Office along with Utah licensing application materials prior to licensing eligibility dates or prior to their hire dates if applicable.

2. Program Director Responsibilities
   a. Program Directors and/or Program Coordinators will verify that all residents at level PGY-2 are eligible to apply for medical licensure by having taken and passed Steps 1, 2 (CK and CS) and 3 of the USMLE (or equivalent exams for DOs). They will also verify that all PGY-3 and higher residents are fully licensed prior to hire date.
   b. Incoming residents at level PGY-2 or above who have not taken and passed USMLE Steps 1, 2 (CK and CS), and 3 (or equivalent exams for DOs) will not be accepted into the program unless there is a justifiable reason for an Administrative Variance or exemption to this policy.
   c. If a resident at level PGY-2 or higher is not eligible to apply for medical licensure, the Program Director must notify the Graduate Medical Education Committee and petition that body for an Administrative Variance or exemption for the resident to begin the training program.
   d. If a PGY-3 or higher resident is not licensed by the hire date, the Program Director must notify the Graduate Medical Education Committee and petition that body for an
Administrative Variance or exemption for the resident to begin the training program.

3. Application Deadlines and Fees

a. All PGY-2 residents will submit a completed FCVS credentialing application (MDs and DOs only) and a completed Utah medical license application to the Graduate Medical Education Office by July 31 of the PGY-2 year, or within 30 days of hire.

b. All PGY-3 or higher residents must already be fully licensed by date of hire.

c. FCVS credentialing and Utah medical license applications submitted by the stated deadline will be paid for by the Graduate Medical Education Office for ACGME accredited programs only.

d. Failure to submit a completed FCVS credentialing application and Utah medical license application by July 31 or within 30 days of hire may result in immediate suspension without pay. Suspended residents may be reinstated upon submission of a completed application.

e. PGY-2 residents who fail to submit a completed FCVS credentialing application (MDs or DOs only) and Utah medical license application by July 31 of the PGY-2 year, or within 30 days of hire, must pay the entire cost of both the FCVS credentialing and the Utah medical license.

f. All PGY-2 or PGY-2+ residents will apply for a federal DEA registration (as applicable) immediately upon receiving a Utah medical license.

g. All University of Utah residents are eligible for a “fee-exempt” DEA license for use during their residency training. The “fee-exempt” DEA license is appropriate for any prescriptions written for patients seen as part of the training program when the resident is acting within the scope of approved and supervised training rotations and experiences. Any resident who is providing patient care outside the scope of training, or moonlighting, must obtain a separate “fee-paid” DEA registration (at the resident’s expense—this is not a reimbursable fee). Use of the “fee-exempt” DEA registration for activities that are not part of a University of Utah training program is a federal violation.

4. Licensing Deadlines and Copy Requirements

a. It is the responsibility of the resident to follow through as needed to ensure licensure in a timely manner. This may
include contacting FCVS, the Utah Board, prior educational or training institutions, previous employers, or the Graduate Medical Education Office. Residents who do not follow through as necessary may be subject to disciplinary action, including suspension.

b. Copies of the Utah medical license, Utah controlled substance license, and federal DEA registration must be submitted to the Graduate Medical Education Office within 30 days of receipt.

5. Program Exemptions for DEA License, Medicaid Limited Provider registration, and Medicare PECOS registration

a. Some programs are specifically exempted from the Utah controlled substance license and federal DEA registration requirements for housestaff. In these exempted programs, housestaff are still required to apply for and obtain a Utah medical license as outlined in this policy (Dental residents are exempt from the license requirement). Programs exempted from the Controlled Substance and DEA license requirement are as follows: Dental, Pathology, Pathology Specialties, Neurogenetics, and Pediatric Critical Care. Programs exempted from Medicaid and Medicare PECOS registration include only Dental, Pathology, and Pathology specialties.

6. Training Under a Disciplinary Action

a. The Graduate Medical Education Committee will consider each request from a Program Director to allow a resident who is ineligible for licensure or who has not met licensure requirements to begin training.

b. The Graduate Medical Education Committee will make a decision whether to allow the resident to begin training under the terms of an Administrative Variance.

c. If the Graduate Medical Education Committee grants an Administrative Variance to this policy, the resident may begin training under the terms of the Variance. The resident and the Program Director will be notified in writing regarding the length and terms of the Variance. At the end of the Variance period, the resident must have met all terms of the Variance granted.

7. Consequences of Failure to Satisfy Requirements

a. Accepted or matched PGY-1 residents who have not taken or passed Steps 1 and 2 (CK and CS) (or the equivalent for DOs) will be released from their contracts. No Administrative Variances will be awarded.
b. Any PGY-2 or PGY-2+ resident who is training under the terms of an Administrative Variance granted by the Graduate Medical Education Committee, and who does not meet the terms of that Variance, may be dismissed from the training program by the Program Director. If the Program Director does not wish to dismiss the resident, the Program Director must notify the Graduate Medical Education Committee and petition that body for permission to allow the resident to continue in the training program. The Graduate Medical Education Committee may grant a second Administrative Variance or dismiss the resident from the training program. The Administrative Variance will include terms and conditions by which the resident must abide and will be provided in writing to the resident and the Program Director.

c. Failure of a resident to meet the terms and conditions of a second Administrative Variance will result in dismissal of the resident from the training program with no option to appeal.

d. Any resident who is dismissed from a training program for failure to meet licensure requirements may re-apply to that program following successful completion of the requirements. Re-acceptance into a program is at the discretion of the Program Director.

C. Exemptions From the License Requirement

1. The Graduate Medical Education Committee may approve exemptions from the license requirement in certain circumstances (per Utah Division of Occupational and Professional Licensing Act 58-1-307(1)(b)). If a resident or fellow is an international medical graduate with no prior residency training in the United States, or is unable to comply with the licensing policy due to overriding concerns or issues deemed by the Graduate Medical Education Committee to be substantial and justifiable, the Committee may grant an exemption from the medical license requirement for a period of time not to exceed the length of the training in the program requesting the exemption. Residents/fellows training with an exemption from the licensure requirement may not participate in moonlighting activities or any activities outside the scope of the training program. The Program Director and the resident will be notified in writing of such an exemption, and the exemption will be documented in the resident's file.

2. Exemptions from the medical licensing requirements are considered on a case-by-case basis and are at the sole discretion of the Graduate Medical Education Committee. They should not be assumed to be automatic under the circumstances stated above.

3. Exemptions from medical licensure approved by the Graduate Medical Education Committee under this policy will be immediately revoked if the resident or fellow leaves the training program for any reason.
4. Only residents and fellows in ACGME, ABMS or other specialty-accredited programs, or in non-accredited programs approved by the GMEC, are eligible for a license exemption. License exemptions will not be approved for fellows in non-accredited or non-GMEC approved programs, or for non-accredited periods of training following or otherwise connected with an accredited program.

D. License Renewals

1. All Utah MD licenses expire January 31 in even years and Utah DO licenses expire May 31 in even years. Residents are responsible for renewing their licenses prior to the expiration date. Failure to do so may result in immediate suspension without pay. Suspended residents will be readmitted to the program upon proof of renewal. The Graduate Medical Education Office will reimburse the full cost of license renewal if the resident is continuing on for the entire subsequent training year and renews prior to the expiration date. Residents continuing on for a portion of the subsequent training year (due to makeup time for LOAs or off-cycle hire dates, etc.) will be reimbursed half the license renewal cost provided they renew prior to the expiration date. The Graduate Medical Education Office will reimburse half the license renewal cost if the resident is completing his/her training in the current training year and renews prior to the expiration date. The GME office will not reimburse the renewal costs for licenses renewed after the expiration date.

2. The GME office will only reimburse residents and fellows in ACGME-accredited programs. Residents and fellows of programs that are not ACGME-accredited will not be reimbursed.