This Policy establishes oversight for fellowship programs conducted by academic departments within the University of Utah School of Medicine and the University Hospital and Clinics in advanced subspecialty disciplines for which there is currently no Accreditation Council for Graduate Medical Education (ACGME) accreditation or American Board of Medical Specialties (ABMS) member board certification. This Policy addresses the requirements and procedures necessary for the establishment and maintenance of such programs. The Policy may be amended or altered with the approval of the Graduate Medical Education Committee (GMEC).

I. PURPOSE AND BACKGROUND

All Graduate Medical Education (GME) programs at the University of Utah are sponsored by the University of Utah Health Sciences Center, and all programs and their trainees are positioned and treated identically within the organization. Increasingly, the respective academic departments of the University of Utah School of Medicine are offering training experiences focused on highly specialized and advanced content and/or procedural expertise. Those attracted to these training experiences are often already established, mid-career physicians. Even when their postgraduate training has been continuous since medical school, physicians pursuing these subspecialty experiences are usually board certified in a primary discipline and capable of broader and more responsible participation in departmental activities than may be currently available in ACGME-accredited training programs. However, while functioning as fellows in these areas of subspecialty experience, these physicians are required to be supervised at all times by a qualified member of the medical staff appointed by the fellowship Director to supervise fellows in patient care or research.

II. OBJECTIVES

The goals of this Policy are to:

A. Maintain the GMEC’s role in oversight of educational programs for all postgraduate clinical training for physicians within the School of Medicine and affiliated institutions.

B. Recognize and accommodate the ability of selected clinical fellows to independently provide clinical services within the scope of their primary specialty certification for each program subject to this Policy.

III. PROGRAM DEFINITIONS AND GOVERNANCE

A. All residency and fellowship programs in disciplines accredited by the ACGME or by a constituent ABMS specialty board will be subject to continued direct oversight by the GMEC, and will be unaffected by this Policy.
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B. Fellowship programs in disciplines not subject to accreditation by the ACGME and not counted toward eligibility or certification in a specialty or subspecialty listed in the current edition of either the AMA Directory of Graduate Medical Education Programs or the ABMS Annual Report and Reference Handbook are considered non-accredited programs. These programs fall into two categories:

1. Non-accredited GME Fellowships: Programs whose fellows are credentialed by the Office of Graduate Medical Education and who qualify for reduced liability premiums under GME Policy 6.5. These programs fall under the auspices of the GMEC and are governed by this Policy.

2. Non-accredited Visiting Faculty Fellowships: Programs whose fellows are credentialed by the Medicine Medical Staff Office and hired as Visiting Faculty. These fellows do not qualify for reduced liability premiums under GME Policy 6.5 and their fellowships are not governed by this policy.

C. Non-accredited GME fellowship programs may allow individual trainees to assume junior faculty status and perform billable duties commensurate with those of a faculty member within the scope of their primary discipline, concurrent with their advanced training.

1. These programs will be conducted directly by the responsible academic department, but subject to GMEC oversight.

2. Non-accredited GME programs should be a minimum of 12 months in length. Fellowships shorter than 12 months will fall under III.B.(2) above as Visiting Faculty Fellowships with Medical Staff Office oversight.

3. The guiding principle for establishing a non-accredited GME fellowship program must be that such a program shall provide an educational experience of comparable quality to other University of Utah Graduate Medical Education programs while in no way interfering with, or detracting from, the training of residents and fellows in other University of Utah sponsored GME programs.

4. Each academic department will credential fellows in non-accredited programs as attending medical staff in accordance with School of Medicine Medical Staff Office policies and procedures, as well as GME Policies 5.1, 14.2, and 6.5, as revised.

5. Billing for clinical services may be submitted on behalf of the activity of trainees enrolled in non-accredited GME fellowship programs where the fellow is qualified to perform these services independently by virtue of prior certification within their primary discipline and provided such activity does not interfere with the educational requirements of the fellowship. Further determination of an individual fellow’s eligibility to bill for specific services is entirely the responsibility of the academic department. No billing is permitted for services rendered by international medical graduates training on visas sponsored by the Educational Commission for Foreign Medical Graduates or with other limited visas.

D. Matters pertaining to the selection of trainees, their contract for duration of the training program and disciplinary and grievance processes shall be the responsibility of the academic department, according to applicable School of Medicine and/ or University Hospital standards. Fellows in non-accredited programs will receive stipends and benefits corresponding to the schedule established by the GMEC for all residents.

E. Fellows in non-accredited programs will be processed and credentialed by the GME Office in accordance with Resident Policies and Procedures, Policy 1.2, the same policies and procedures that apply to fellows in accredited programs.
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F. For existing non-accredited programs, the GMEC must review and approve any changes in training complement, major changes in program length or structure, or appointment of new Program Directors.

IV. GMEC APPROVAL OF NON-ACCREDITED GME FELLOWSHIP PROGRAMS

A. Applications for new non-accredited GME fellowship programs must comply with Resident Policies and Procedures, Policy 14.2, including the following information:

1. Approval of Department Chair or Division Chief
2. Description of Training - Brief definition of scope of sub-specialty, length of training, number of fellows, and clinical or research responsibilities
3. Eligibility Criteria
   a. Medical school requirements (LCME accredited, AOA accredited, WHO recognized, etc.)
   b. Residency requirements (residency or residencies completed, Board eligible or Board certified, etc.)
   c. Visa requirements, if applicable
   d. Licensure requirements
4. Funding source(s)
   a. Stipend/benefits
   b. Malpractice coverage
5. Educational rationale (cannot be based solely on patient numbers or service needs)
6. Curriculum, including goals and objectives for the program. The GMEC will maintain specific expectations for the educational content and quality of the program. Such expectations will be commensurate in their scope and general content with relevant portions of the ACGME Common Program Requirements.
7. Training schedule
8. Program Director and Program Coordinator
9. List of supervising faculty by location
10. Program letters of agreement with affiliate training sites

B. Applications for non-accredited GME fellowships in specialty areas where ACGME accreditation is available will not be approved by the GMEC. Applications for programs in these areas must be approved by the GMEC prior to submission to the appropriate ACGME Review Committee for review and approval.

V. FOREIGN MEDICAL GRADUATES IN NON-ACCREDITED FELLOWSHIP PROGRAMS

A. Non-accredited fellowship programs wishing to train foreign medical graduates must adhere to the Education Commission for Foreign Medical Graduates (ECFMG) policy regarding Application for J-1 Visa Sponsorship in Non-Standard Clinical Training Programs.

B. ECFMG Definition of Non-Standard Training

Those subspecialties or training pathways for which neither Accreditation Council for Graduate Medical Education (ACGME) accreditation or American Board of Medical
Oversight of Non-Accredited Fellowship Programs

Specialties (ABMS) member board certification is available. The non-standard provision was designed to support advanced training opportunities that have a pre-defined training curriculum and duration. Such programs must be recognized by the respective ABMS-member board and the host institution’s Graduate Medical Education Committee. NOTE: All applications for ECFMG J-1 Visa sponsorship in non-ACGME accredited programs, including subspecialty fellowships previously certified by an ABMS-member board, are considered “non-standard applications” by the ECFMG and must adhere to the guidelines for non-standard clinical training programs.

C. ECFMG J-1 Visa Sponsorship in Non-Standard Clinical Training Programs

1. Overview of Guidelines for Non-Standard Application
   a. All items on the ECFMG checklist must be included when submitting an application (see § V.C.2).
   b. All documentation must be identified with applicant’s USMLE or ECFMG number.
   c. All requirements must be submitted in one package.
   d. All applicant materials must state the exact name of the applied for discipline as it was approved by the respective ABMS-member board. For a list of ABMS-member board approved disciplines see www.ecfmg.org/evsp/nonstand.html#nonstand.
   e. Signature of the Program Director of the ACGME-accredited parent program must be provided.

2. ECFMG J-1 Visa Application Checklist
   a. American Board of Medical Specialties (ABMS) Member Board Recognition. The non-standard discipline or pathway must be recognized by the appropriate ABMS-member board as documented in writing by the CEO of that board. A listing of nonstandard disciplines currently recognized by ABMS boards for the purposes of J-1 sponsorship is available at http://www.ecfmg.org/evsp/nonstand.html. If the discipline is not on this list, the application must include a letter of support from the ABMS-member board. See http://www.abms.org for contact information. ABMS-member board endorsement does not guarantee J-1 sponsorship approval.
   b. Graduate Medical Education Committee (GMEC) Endorsement and Program Verification Form. Representatives of the host institution are required to complete the attached form as directed. Note: Program Director’s (PD) signature must be from the PD of the ACGME-accredited parent program.
   c. Fellowship Program Description. The fellowship description must follow the attached guidelines. If the program duration exceeds 12 months, the training activities for each year must be defined.
   d. Contract or Letter of Offer. The contract or letter of offer must specify start and end dates of the training year, specialty and subspecialty of the training program/pathway, training level and stipend. The applicant and an appropriate hospital official must sign the contract or letter of offer.
   e. Application Form for Initial Sponsorship. The applicant must complete and sign Section A of the Application. The Training Program Liaison (TPL - Director of Graduate Medical Education) must review Section A and complete and sign Section B.
   f. Statement of Need (from the federal office of the Ministry of Health in the applicant’s country of most recent legal permanent residence.) See the EVSP Reference Guide on the ECFMG website (www.ecfmg.org) for
required format and wording. A certified, word-for-word English translation must accompany a non-English document.

g. Current Curriculum Vitae (C.V.). The C.V. must detail the applicant’s education and professional history to date.

h. Copy of Passport Name Page(s). A copy of the passport name page for the applicant and each dependent must be submitted.

i. Statement of Educational Objectives. In a signed letter, the applicant must outline his/her overall educational objectives as an ECFMG-sponsored exchange visitor physician and how they relate to future professional activities upon return to the home country. This statement must detail the proposed training plan and specify anticipated duration of training in the United States. Applicants are encouraged to disclose both their short term and long term training objectives. The statement must be renewed annually with each new request.

j. Administrative Fee ($250 non-refundable; subject to change). Information about on-line payment (OASIS) is available on the ECFMG website (www.ecfmg.org). Check or money order payments must be made payable to ECFMG. The Applicant’s USMLE/ECFMG Identification Number, if applicable, should be entered on the check or money order.

k. Return Airbill for Expedited Delivery to the TPL (optional, but recommended). If the application is approved, ECFMG will issue Form DS-2019, Certificate of Eligibility for Exchange Visitor (J-1) Status, to the TPL via first-class U.S. mail. ECFMG is not authorized to release the Form DS-2019 directly to the applicant. To expedite delivery, it is recommended that a pre-paid, pre-addressed courier service air bill be included with the application.

l. Additional Documentation (if applicable)
   
   • Copies of Form(s) IAP-66/DS-2019 if the applicant has previously held J-1 visa status.
   • Proof of country of most recent legal permanent residence if this differs from country of citizenship
   • Official documentation of funding source, terms, amount, and U.S. dollar equivalent if other than or in addition to hospital training stipend

m. Graduates of LCME-accredited U.S. OR Canadian Medical Schools Must Submit Additional Requirements
   
   • Copy of Medical School Diploma. A certified, word-for-word English translation must accompany a non-English document.
   • Full-Face Passport-Size Photograph. Original photo required, no faxes or photocopies.

Rev: October, 2014