

GRADUATE MEDICAL EDUCATION

TRAINEE POLICIES AND PROCEDURES

POLICY: MEDICAL LICENSE, CONTROLLED SUBSTANCE, DEA NUMBER, NPI NUMBER, UTAH MEDICAID PROVIDER REGISTRATION, AND MEDICARE PECOS REGISTRATION

Policy Number 1.3

Chapter: Conditions for Employment

Purpose:

To maintain trainee compliance with all state and federal medical licensure requirements.

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

Policy:

All trainees are required to pass Steps 1, 2 (CK and CS), and 3 of the United States Medical Licensing Exam (USMLE) or equivalent COMLEX or Canadian LMCCs to obtain a National Provider Identifier (NPI), a Utah full unrestricted physician/surgeon license, a Utah controlled substance license (Pathology exempt), a federal DEA registration (Pathology exempt), and to register with Utah Medicaid and Medicare's Provider Enrollment, Chain and Ownership System (PECOS), (Pathology exempt).

The Graduate Medical Education Committee (GMEC) may grant Administrative Variances and/or exemptions of this policy in specific instances described herein. Any trainee 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 GMEC. Appeals of this policy may be made to the GMEC.

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

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Family Physicians of Canada. Physicians are expected to apply for a Utah Physician-Surgeon license after completion of the first year (12 months) of training provided that they are participating in a second year of accredited training. A physician who receives a Utah Physician-Surgeon license during the second year of training, but 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)).

The federal government only allows providers with an NPI, DEA, Medicaid, and Medicare enrollment to be authorizing signers for outpatient orders, equipment (DME) or for medications. Interns and second year trainees may not sign for either medications or other orders in the OUTPATIENT setting. Once trainees are registered with NPI, Medicaid, Medicare, and hold a Utah medical license, Utah controlled substance license, and a Federal DEA, they may sign outpatient medications. However, other orders or equipment (DME) still require a co-signature because these are billable items.

Trainees who hold a concurrent faculty appointment are the exception. For example, an Orthopedic hand trainee may function as a board certified, independent practitioner for general Orthopedics. These trainees are given attending level security (no co-signature required); however, when functioning in their trainee role, their orders and notes require a co-signature.

User/Security Class	Who?	What does it mean?
Trainee No License	First and Second Year Trainees, no Utah medical license, DEA, NPI, Medicaid nor Medicare.	<ol style="list-style-type: none"> 1. Inpatient meds and orders do not require co-sign (except for admit to, discharge to, and code status orders) 2. Discharge orders and meds require co-sign (as these are really outpatient orders) 3. All outpatient orders require co-sign
Trainee Utah medical license, NPI, DEA Medicaid, Medicare Enrolled	Third year trainee and beyond, which are PECOS, DEA, NPI enrolled	<ol style="list-style-type: none"> 1. Inpatient meds and orders do not require co-sign (except for admit to, discharge to, and code status orders) 2. Discharge orders do require co-sign (as these are really outpatient orders) 3. Discharge meds do NOT require co-sign (as DEA/PECOS in place) 4. All outpatient orders still require co-sign (billing requirement-this is not new) 5. Outpatient meds do NOT require co-sign
Attending	Attendings and Trainees who function in a dual appointment role.	No Co-sign for either inpatient or outpatient orders or meds

Procedure:

I.

A. *Post-Graduate Year One (PGY-1) Trainees*

1. PGY-1 Exam Requirements

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

2. PGY-1 NPI Requirements

All PGY-1 trainees must apply for, obtain, and provide a NPI number to the GME Office prior to hire date. Instructions for obtaining an NPI number are sent to PGY-1 trainees with the Onboarding Packet.

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 COMLEX or Canadian LMCCs prior to the beginning of the residency.
- b. Accepted or matched PGY-1 trainees who have not taken or passed Steps 1 and 2 (CK and CS) or Canadian LMCCs will be released from their contracts.
- c. Program Directors are expected to obtain verification from all PGY-1 trainees in their programs that they have taken, passed, and received scores of Step 3 of the USMLE or equivalent COMLEX or Canadian LMCCs during the PGY-1 year.
- d. The Program Director, Program Coordinator, or PGY-1 trainee must provide the GME Office with evidence of passing all required exams before the last day of the trainee's PGY-1 year.

B. Post-Graduate Year Two (PGY-2) and Higher Trainees

1. PGY-2 and Higher Application Requirements

- a. All post-graduate year two (PGY-2) trainees and all new incoming trainees at level PGY-2, must be eligible for a Utah medical license, a Utah controlled substance license (Pathology exempt), and a federal DEA registration (Pathology exempt). All PGY-2 trainees 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 trainees must be fully licensed by their hire date. PGY-3 and higher trainees 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 GMEC.
- c. All trainees must register with Utah Medicaid and Medicare PECOS after receipt of a Utah medical license and federal DEA license (Pathology exempt). Utah Medicaid and Medicare PECOS registration instructions will be sent to all trainees 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 trainees at level PGY-2 are eligible to apply for medical licensure by having taken and passed USMLE Steps 1, 2 (CK and CS) and 3 or equivalent COMLEX or Canadian LMCCs. They will also verify that all PGY-3 and higher trainees are fully licensed prior to hire date.
- b. Incoming trainees at level PGY-2 or above who have not taken and passed USMLE Steps 1, 2 (CK and CS), and 3 or equivalent COMLEX or Canadian LMCCs 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 trainee at level PGY-2 or higher is not eligible to apply for medical licensure, the Program Director must notify the GMEC and petition that body for an Administrative Variance or exemption for the

trainee to begin the training program.

- d. If a PGY-3 or higher trainee is not licensed by the hire date, the Program Director must notify the GMEC and petition that body for an Administrative Variance or exemption for the trainee to begin the training program.

3. Application Deadlines and Fees

- a. All PGY-2 trainees will submit a completed FCVS credentialing application (MDs and DOs only), a Utah medical license (DOPL) application, Utah Medicaid/Medicare PECOS documents, and a Federal DEA LPOA to the GME Office by July 31 of the PGY-2 year, or within 30 days of hire.
- b. All PGY-3 or higher trainees 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 GME Office for 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 trainees may be reinstated upon submission of a completed application.
- e. PGY-2 trainees 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 application.
- f. All PGY-2 or PGY-2+ trainees will apply for a federal DEA registration (Pathology exempt) immediately upon receiving a Utah medical license.
- g. All University of Utah trainees 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 trainee is acting within the scope of approved and supervised training rotations and experiences. Any trainee who is providing patient care outside the scope of training, or moonlighting, must obtain

a separate “fee-paid” DEA registration (at the trainee’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.

- h. The Controlled Substance Prescriber Education (Opioid) Course will be paid for by the GME Office as part of the Utah controlled substance license renewal fee for all GME trainees.

4. Licensing Deadlines and Copy Requirements

- a. It is the responsibility of the trainee 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 GME Office. Trainees 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 GME Office within 30 days of receipt.

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

- a. Programs exempted from the Controlled Substance, DEA License, and Utah Medicaid and Medicare PECOS requirement are as follows: Dental, Neurogenetics, and all Pathology. House staff in these exempted programs are still required to obtain a Utah medical license as outlined in this policy (Dental trainees are exempt from all licensure requirements).

6. Training Under a Disciplinary Action

- a. The GMEC will consider requests from Program Directors and make a decision on whether to allow a trainee who is ineligible for licensure or who has not met licensure requirements to begin training under the terms of an Administrative Variance.
- b. If the GMEC grants an Administrative Variance to this policy, the trainee 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 trainees must have met all terms of the Variance granted.

7. Consequences of Failure to Satisfy Requirements

- a. Accepted or matched PGY-1 trainees who have not taken or passed Steps 1 and 2 (CK and CS) (or the equivalent COMLEX or Canadian LMCCs) will be released from their contracts. No Administrative Variances will be awarded.
- b. Any PGY-2 or PGY-2+ trainee who is training under the terms of an Administrative Variance granted by the GMEC, 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 trainee, the Program Director must notify the GMEC and petition that body for permission to allow the trainee to continue in the training program. The GMEC may grant additional Administrative Variances or dismiss the trainee from the training program. The Administrative Variance will include terms and conditions by which the trainee must abide and will be provided in writing to the trainee and the Program Director.
- c. Failure of a trainee to meet the terms and conditions of a final Administrative Variance will result in dismissal of the trainee from the training program with no option to appeal.
- d. Any trainee 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 GMEC 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 trainee 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 GMEC 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 program requesting the exemption. Trainees 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 trainee will be notified in writing of such an exemption, which will be documented in the trainee'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 GMEC. They should not be assumed to be automatic under the circumstances stated above.
3. Exemptions from medical licensure approved by the GMEC under this policy will be immediately revoked if the trainee leaves the training program for any reason.
4. Only trainees 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 trainees 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. Trainees are responsible for renewing their licenses prior to the expiration date. Failure to do so may result in immediate suspension without pay. Suspended trainees will be readmitted to the program upon proof of renewal.
2. The GME office will reimburse the full cost of the Utah medical and Utah controlled substance license renewal for trainees in accredited programs, as long as the renewal is completed before the expiration date.
3. The Controlled Substance Prescriber Education (Opioid) Course will be paid for by the GME Office as part of the Utah controlled substance license renewal fee for all GME trainees.