

Department of Neurology Faculty



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Kari Wolf, MD
 Acting Chair for Neurology

Revised 09.22.2021

**2021-2022
NEUROLOGY
RESIDENTS**

**PGY-4
Chiefs**



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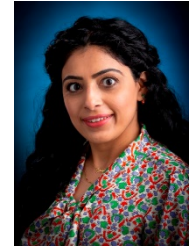
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**Fellow Movement
Disorders**



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Revised 07.01.2021



AGREEMENT WITH PHYSICIAN 2022-2023

THIS AGREEMENT, made and entered into on _____ by the BOARD OF TRUSTEES OF SOUTHERN ILLINOIS UNIVERSITY, a body politic and corporate of the State of Illinois, located at Carbondale, Illinois, for and on behalf of Southern Illinois University School of Medicine, hereinafter referred to as the “School of Medicine,” and MEMORIAL MEDICAL CENTER, dba SPRINGFIELD MEMORIAL HOSPITAL, SPRINGFIELD, ILLINOIS, an Illinois not-for-profit corporation and an affiliate of Memorial Health System, dba Memorial Health , hereinafter referred to as the “Affiliated Hospital”. The School of Medicine is also affiliated with HSHS St. John’s Hospital, a not for profit corporation located in Springfield, Illinois. Both HSHS St. John’s Hospital and Springfield Memorial Hospital shall hereinafter be collectively referred to as “Affiliated Hospitals” and _____, a graduate of _____, class of _____, hereinafter referred to as the “Physician.”

WITNESSETH THAT:

The Physician hereby accepts the position of _____, in the Department of _____ at the School of Medicine. The term of this Agreement shall be for one (1) year (“Initial Term”) commencing on _____, hereinafter referred to as the “commencement date,” and terminate on _____ and shall renew automatically for additional one (1) year periods (“Renewal Term(s)”), anticipated to end _____, at completion of the Physician’s Residency or Fellowship Program, hereinafter referred to as the “Residency Program,” subject to adequate progression of the Physician through the Residency Program, as determined by the School of Medicine and Affiliated Hospital, or unless notice of non-renewal or termination of the Agreement is provided to the Physician. The Initial Term and Renewal Term(s) shall be collectively referred to herein as the Term.

When appropriate, in the sole discretion of the Affiliated Hospital and School of Medicine, promotion of Physician will be evidenced by a letter provided by the School of Medicine and signed by Physician, affirming the Renewal Term(s). Notwithstanding the foregoing, the issuance and execution of any such letter is not a guarantee of continuation of this Agreement to the next Renewal Term. If the Affiliated Hospital and School of Medicine determine, in their sole discretion, after the execution of such letter that advancement in the Residency Program is no longer appropriate, warranted, or feasible, for any reason, this Agreement may be immediately terminated, so long as such action is in accordance with School of Medicine, Graduate Medical Education policy and Accreditation Council for Graduate Medical Education (ACGME) standards.

This Agreement and any renewal hereof is contingent upon, without limitation, the following: proof acceptable to the School of Medicine and Affiliated Hospital that the Physician (i) has been issued a temporary or permanent license from the Illinois Department of Financial and Professional Regulation by July 15, 2022; until said license has been issued, the Physician is only permitted to and shall only participate in orientation activities; (ii) can provide verification of U.S. employment authorization in the United States at the commencement of employment; (iii) satisfactorily completed prerequisites such as credentialing, a pre-employment health and drug screen, criminal background check, and other routine employment processing as required by the Affiliated Hospital; and (iv) met the qualifications for resident eligibility as outlined in the School of Medicine Selection, Evaluation, Supervision, Graded Responsibility, Promotion/Non-Promotion And Dismissal Of Residents Policy, as amended from time to time, and as determined by the Accreditation Council for Graduate Medical Education (ACGME) ((i) through (iv) above are collectively referred to as the “Requirements”). Anything to the contrary herein notwithstanding, in the event that such Requirements are not met or provided by the Physician to the Program Director by the commencement date of this Agreement or any Renewal Term, this Agreement may be terminated without advance notice at the joint discretion of the Affiliated Hospital and the School of Medicine. In consideration of the Physician’s acceptance of the aforesaid position, and of the covenants and agreements herein contained, the parties hereto do mutually agree as follows:

A. THE AFFILIATED HOSPITAL SHALL:

1. Employ the Physician and pay him or her total annual compensation of _____ (\$_____) for the term of this Agreement, which compensation shall be prorated and paid on a bi-weekly basis. The amount of compensation to be paid to the Physician will be subject to adjustment on July 1 based on any standard changes in the rate of physician compensation authorized by the Affiliated Hospital during the term of this Agreement.
2. Provide the Physician with professional liability coverage under the insurance program of the Affiliated Hospital. Said professional liability coverage, whether by enrollment in a program of self-insurance, inclusion under a professional liability insurance policy or a combination thereof, shall extend to the Physician while the Physician is performing professional duties and responsibilities as a part of the Physician's Residency Program, provided, however, that said professional liability coverage shall not apply to professional acts performed outside the scope of the Residency Program. Said professional liability coverage shall provide legal defense and protection against awards from claims reported or filed during or after the completion of the Residency Program, if the alleged acts or omissions of the Physician were within the scope of the Residency Program, in accordance with the Affiliated Hospital's self-insured trust and liability policy.
3. Provide health, dental, disability, and life insurance benefits for the Physician under the employee insurance program of the Affiliated Hospital, as provided by the Affiliated Hospital's Plan Benefits, as amended from time to time. Health insurance benefits shall begin on the first recognized day of training. The Affiliated Hospital shall have the right to change such Plan Benefits during the term of this Agreement if said changes are consistent with changes made in the Plan Benefits of the Affiliated Hospital. The Physician shall have the option to include eligible dependents, as defined by the medical plan documents, at Physician's own expense.
4. Provide designated sleeping quarters and meals for the Physicians during in-house call.
5. Provide the Physician with vacation (paid time off), educational leave, parental leave, bereavement leave, sick leave and job search leave according to the School of Medicine Vacation and Other Leaves of Absence Policy, as amended from time to time.
 - a. In the event that the Physician accumulates a total of more than _____ days of absence per year from the Residency Program during the term of this Agreement (including vacation [paid time off], educational, parental, bereavement and sick leave, suspension [with or without pay] or other absence), the Physician shall be notified in writing by the Program Director as to whether such absence necessitates remedial work in order to fulfill the requirements of the Residency Program. Such notification shall be provided to the Physician prior to any planned leave (or at the earliest practicable time after any unplanned leave) which causes the Physician to exceed this limit on absence from the Residency Program.
6. Provide the Physician with confidential counseling, medical and psychological support services and measures to address physician wellness and impairment, including that due to substance abuse as described in the School of Medicine Impairment Policy, as amended from time to time.
7. Provide the Physician with such other benefits (including military leave), which are not inconsistent with the provisions of this Agreement, as are provided by the Affiliated Hospital through its existing policies, as applicable and amended from time to time.

B. THE SCHOOL OF MEDICINE SHALL:

1. Establish and provide general supervision, guidance, and evaluation to the Physician as well as an educational program within each Department which complies with the education requirements as determined by the ACGME.
2. Provide program direction and select faculty who determine resident proficiency to perform clinical duties and the degree of supervision necessary in the management and treatment of patients.

3. If approved by the School of Medicine, consult with and seek approval of the Affiliated Hospital prior to any change, expansion or extension of the Residency Program outside the facilities of the Affiliated Hospitals.
4. Adhere to the Institutional Policy for Resident Clinical and Work Hours which complies with the appropriate institutional and program ACGME requirements.
5. Adhere to the Institution and Program Closure/Reduction Policy of the Graduate Medical Education Committee (GMEC).
6. Adhere to the ACGME requirement to not require the Physician to sign a non-competition guarantee.

C. THE PHYSICIAN SHALL:

1. Perform such duties as may be assigned to the Physician by the Program Director in accordance with the description of the Residency Program prepared by the Program Director and subject to the approval of the Affiliated Hospital, which duties shall be performed by the Physician conscientiously, to the best of the Physician's ability and under the highest personal bond of professional morals and ethics.

As the position of the Physician involves a combination of supervised, progressively more complex and independent patient evaluation and management functions and formal educational activities, the competence of the Physician shall be evaluated by the Program Director and Clinical Competency Committee on a regular basis with a record of the evaluation being held in the Physician's program file. Such evaluation will be part of the quality assurance program established for the purposes of reducing mortality and morbidity within the Affiliated Hospital.

Under the supervision of approved credentialed attending teaching staff, the Physician shall:

- a. Provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health
- b. Demonstrate medical knowledge about established and evolving biomedical, clinical, and cognate (e.g. epidemiological and social behavioral) sciences and the application of this knowledge to patient care
- c. Participate in practice-based learning and improvement that involves investigation and evaluation of their own patient care, appraisal and assimilation of scientific evidence, and improvements in patient care
- d. Practice interpersonal and communication skills that result in effective information exchange and teaming with patients, their families, and other health professionals
- e. Exhibit professionalism, as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population
- f. Adhere to Social Media Guidelines and Policies set forth by the School of Medicine and Affiliated Hospitals, as amended from time to time.
- g. Participate in systems-based practice, as manifested by actions that demonstrate an awareness of and responsiveness to the larger context and system for health care and the ability to effectively call on system resources to provide care that is of optimal value
- h. Participate fully in the educational and scholarly activities of his /her program and, as required, assume responsibility for teaching and supervising other residents and students
- i. Participate in appropriate institutional committees and councils whose actions affect residents' education and/or patient care
- j. At least annually submit to the Chair of the GMEC (through the Office of Graduate Medical Education) a confidential written evaluation of the program faculty and of the educational experiences
- k. Regularly, or at a minimum every other day, log on and review electronic mail on the Physician's School of Medicine electronic mail account

2. Abide by and at all times conform to the Corporate and Medical Staff Bylaws, Occupational Safety and Health Administration (OSHA), Health Insurance Portability and Accountability Act (HIPAA), the Illinois Department of Public Health (IDPH) infection control policies, and other rules, regulations, policies, ethical and religious directives of the Affiliated Hospitals and of the School of Medicine and all other general guidelines and moral codes, both stated and published, governing the practice of medicine; and the statutes, rules and regulations of the State of Illinois, including without limitation the Medical Practice Act and any and all other laws, rules and regulations relating to the licensing of physicians in training and the practice of medicine in the State of Illinois.
 3. Accept no responsibilities for professional activities outside the scope of the Residency Program provided herein (including, but not limited to "moonlighting") unless approved in writing by the Affiliated Hospital and the Program Director, who shall have discretion as to whether or not such outside professional activities are permitted. With regard to those residency programs in which outside professional activities may be permitted, the Physician shall adhere to the policy on professional activities outside the scope of residency training as approved by the GMEC (Moonlighting Policy).
- D. Medical Specialty Board requirements applicable to the Residency Program specify that the Physician must perform _____ months of actual service in a _____ -month period. If the resident is required to complete a preliminary year governed by another Medical Specialty Board, the Physician must perform _____ months of actual service in a _____ -month period for that year of training. Anything in this Agreement to the contrary notwithstanding, it is understood and agreed by the Physician that if, because of approved leave or other absence, the Physician does not meet said Board requirements, it may be necessary for the Physician to extend the duration of the Residency Program until said Board requirements have been satisfied.
- E. The Physician agrees to abide by a risk management and quality control program which shall provide, without limitation, for the following:
1. The joint review of the Physician's credentials by the Affiliated Hospital and the School of Medicine.
 2. The joint indoctrination of the Physician with respect to the Physician's responsibilities to the patient, the School of Medicine, and the Affiliated Hospital.
 3. The suspension of the Physician for an indefinite period of time, for failure to comply with this Agreement or for reasonable cause, by the appropriate officials of the School of Medicine or the Affiliated Hospital. If such an event occurs, the Physician may be suspended from training and clinical duties without compensation as identified herein.
 4. Compliance by the Physician with the School of Medicine's policy regarding licensing examinations (USMLE/COMLEX Exam Policy).
 5. Compliance by the Physician with regulations regarding completion of medical records at the Affiliated Hospitals and the School of Medicine.
 6. Compliance by the Physician with regulations regarding completion of time records at the Affiliated Hospitals and the School of Medicine.
 7. Compliance with all required education modules including on-line modules as proscribed by the Affiliated Hospitals and/or the School of Medicine.
 8. Compliance with required certifications (i.e. BLS, ACLS, etc.)
- F. In accordance with applicable School of Medicine policy, this Agreement may be terminated at any time, during the Term, by joint decision of the Affiliated Hospital and the School of Medicine, in which case the Physician's compensation specified herein will be prorated to the date of termination and the Physician will be paid for vacation (paid time off) earned but not used prior to the date of termination.

In the event that a request for review is filed by the Physician under the Due Process and Resident Complaint Policy, as amended from time to time, pay and benefits may be continued at the discretion of the Affiliated Hospital. Decisions regarding promotion in the program will be made in accordance with the Selection, Evaluation, Supervision, Graded Responsibility, Promotion/Non-Promotion and Dismissal of Residents Policy, as amended from time to time. If a decision has been made the Physician will not be promoted to the next level of training for the following year, the Physician shall be notified in writing by the Program Director that the Physician's contract may be extended at the current PGY level or will not be renewed at the next Renewal Term. The Program Director shall use its best efforts to provide at least 60 days' notice of extension at the current PGY level or non-renewal prior to the expiration of the then current Term.

- G. In the event the Physician's contract is terminated early or not renewed during either the Initial Term or any Renewal Term(s) for any reason other than non-promotion of Physician to the next level of training, the Program Director shall notify the Physician in writing. Such non-renewal or early termination shall be subject to the approval of the Affiliated Hospital and any applicable policy. Any notice required to be given to the Physician shall be in accordance with the applicable policy which governs the dismissal or non-renewal of the Physician's participation in the Residency Program. If the applicable policy does not provide for a specified notice period, such notice period shall be at the discretion of the School of Medicine and the Affiliated Hospital.
- H. The Physician shall notify the Program Director and the Affiliated Hospital, in writing, in the event the Physician does not intend to continue training for the following year. Said notice shall be provided at least 60 days prior to the expiration of the then current Term.
- I. If, in the sole discretion of the Affiliated Hospital and School of Medicine, the Physician is not suitable for advancement to the next PGY level, but continued progression of the Physician through the Residency Program and extension of the Physician's time in the Residency Program is appropriate, the School of Medicine may provide an extension letter, allowing the Physician time to remediate under the current PGY level. Academic deficiencies and remediation are governed by the GMEC Academic Deficiency Policy.
- J. It is the policy of the School of Medicine and the Affiliated Hospitals to maintain an environment which is free from all forms of harassment based on a person's legally protected status (including race, sex, national origin, religion, military status, age and disability) and sexual harassment (herein after referred to as harassment), improprieties and intimidation. The Physician is entitled to the protections afforded by these policies while serving as a resident hereunder.

The Physician agrees to abide by the School of Medicine's and the Affiliated Hospitals' respective policies regarding equal employment, sexual harassment and harassment on the basis of other protected status as set forth above. The Physician acknowledges that failure to abide by these policies may result in immediate termination of this Agreement. Allegations of discrimination and/or harassment will be addressed in accordance with the applicable policies of the School of Medicine or the Affiliated Hospital.

- K. The Physician agrees to abide by all standards outlined in the (225 ILCS 60/) Medical Practice Act of 1987. Any violations of that Act, including but not limited to Section 22, or other instances of ethical or moral turpitude is grounds for immediate termination and therefore cannot be requested for review under the Due Process and Resident Complaint Policy as amended from time to time.
- L. Unless otherwise mutually agreed by the Physician and the Program Director, at least sixty (60) days'

advance notice of intent to resign from the Residency Program during the Initial Term or any Renewal Term must be given, in writing, by the Physician to the Program Director.

- M. This Agreement constitutes the entire agreement and understanding between the parties with respect to the subject matter hereof; supersedes all prior agreements, written or oral, between the parties with respect to such subject matter and except for renewal, non-renewal, or extensions may be modified only by a written agreement signed by all of the parties. If any provision of this Agreement conflicts with any provision of any other document, agreement, policy, or guideline, the provisions in this Agreement shall prevail over any other conflicting provisions.
- N. The validity, interpretation and effect of this Agreement shall be governed by the laws of the State of Illinois. The parties hereby consent to the jurisdiction of the appropriate courts located in Illinois for the resolution of any dispute arising hereunder.
- O. In the event that one or more of the provisions of this Agreement is or are declared illegal, void or unenforceable, that shall not affect the validity of the remaining provisions of this Agreement.
- P. The Physician shall not have the right to request a review of their failure to successfully pass the post-offer drug test.
- Q. The School of Medicine policies referenced in Witnesseth paragraph 3, Sections A.5, A.6, B.4, B.5, C.1.f, C.3, E.4-6, F, I, J, and K, each as amended from time to time, are available on the School of Medicine website at <https://www.siumed.edu/gme/gme-policies-and-procedures>.

IN WITNESS WHEREOF, the parties hereto have caused this agreement to be executed the day and year first written above.

PHYSICIAN:

Printed Physician Name
Illinois License No _____

BOARD OF TRUSTEES OF
SOUTHERN ILLINOIS UNIVERSITY

SPRINGFIELD MEMORIAL HOSPITAL
SPRINGFIELD, ILLINOIS

Jerry Kruse, MD, MSPH
Dean and Provost, SIU School of Medicine, and
Chief Executive Officer, SIU Medicine for
Austin A. Lane, Chancellor
Southern Illinois University Carbondale

Kevin R. England
Senior Vice President & Chief Administrative Officer
Memorial Health

RECOMMENDED:

Residency Program Director

Amended and Approved by GMEC October 15, 2021

2021 Resident Benefits Summary



BENEFIT	WHO PAYS	WHEN YOU ARE ELIGIBLE	WHAT YOU RECEIVE
MEDICAL INSURANCE	MHS and colleague	Coverage begins on the first day of employment with MHS.	Option of a pre-tax Quality Plan – 100% coverage for most services with also different levels of co-pays.
DENTAL INSURANCE	MHS and colleague	Coverage begins on the first day of employment with MHS.	Option of 2 pre-tax plans with a deductible and an annual maximum.
VISION INSURANCE	Colleague	Coverage begins on the first day of employment with MHS.	A vision plan that provides the option for coverage for you and your family.
COLLEAGUE BASIC LIFE INSURANCE & COLLEAGUE VOLUNTARY SUPPLEMENTAL LIFE INSURANCE	MHS and colleague	Coverage begins on the first day of employment with MHS.	<p>Basic Life Insurance:</p> <p>Automatically enrolled at 1x annual salary – NO cost to colleague.</p> <p>Supplemental Life Options up to 4 times your annual salary, not to exceed \$300,000– Colleague paid.</p>
VOLUNTARY SPOUSE AND DEPENDENT LIFE INSURANCE	Colleague	Coverage begins on the first day of employment with MHS.	<p>Spouse options: .5x, 1x and 1.5x colleague salary. Minimum coverage \$5,000; Maximum coverage \$50,000</p> <p>Dependent options: \$2,500, \$5,000, \$7,500 or \$10,000</p>

BENEFIT	WHO PAYS	WHEN YOU ARE ELIGIBLE	WHAT YOU RECEIVE
HEALTHCARE EXPENSE ACCOUNT	Colleague	Coverage begins on the first day of employment with MHS.	May set aside pre-tax dollars to pay eligible health care expenses up to an annual maximum of \$2,750.
DEPENDENT CARE EXPENSE ACCOUNT	Colleague	Coverage begins on the first day of employment with MHS.	May set aside pre-tax dollars to pay eligible dependent care expenses up to an annual maximum of \$5,000.
LONG TERM DISABILITY INSURANCE	MHS	Coverage begins on the first day of employment with MHS.	A supplemental income equal to 60% of normal monthly earnings (after 90 days of disability).
403(b)	Colleague	First day of employment with MHS.	Ability to defer pre-tax dollars towards personal retirement while decreasing taxable income with ING and/or Prudential. Maximum deferral - up to maximum amount allowed by IRS.
MEMORIAL CHILD CARE	Colleague	First day of employment with MHS.	Open 5 days a week 5:45am-6:30pm. Children 6 weeks - 5 years. (drop-in care is also available) MCC provides a safe, loving, caring and learning environment for the children in their care preparing them socially and educationally as they grow.



BENEFIT	WHO PAYS	WHEN YOU ARE ELIGIBLE	WHAT YOU RECEIVE
COLLEAGUE HEALTH SERVICES	MHS	First day of employment with MHS.	Pre-placement assessment, required tests, annual flu vaccine and health counseling.
EMPLOYEE ASSISTANCE PROGRAM	MHS	First day of employment with MHS.	Counseling assessment for personal problems through Employee Assistance Program. Available 24 hours/7 days week at 217-788-9345 or online at www.choosememorial.org/MemorialEAP



AGREEMENT WITH PHYSICIAN 2022-2023

THIS AGREEMENT (“Agreement”), made and entered into on _____ by the BOARD OF TRUSTEES OF SOUTHERN ILLINOIS UNIVERSITY, a body politic and corporate of the State of Illinois, located at Carbondale, Illinois, for and on behalf of Southern Illinois University School of Medicine, hereinafter referred to as the “School of Medicine,” and ST. JOHN’S HOSPITAL OF THE HOSPITAL SISTERS OF THE THIRD ORDER OF ST. FRANCIS, SPRINGFIELD, ILLINOIS, a not for profit corporation of the State of Illinois, located at Springfield, Illinois, hereinafter referred to as the “Affiliated Hospital”. The School of Medicine is also affiliated with Memorial Medical Center, dba Springfield Memorial Hospital, an Illinois not-for-profit corporation and an affiliate of Memorial Health System, dba Memorial Health. Both HSHS St. John’s Hospital and Springfield Memorial Hospital shall hereinafter be collectively referred to as “Affiliated Hospitals” and _____, a graduate of _____, class of _____, hereinafter referred to as the “Physician.”

WITNESSETH THAT:

The Physician hereby accepts the position of _____, in the Department of _____ at the School of Medicine. The term of this Agreement shall be for one (1) year (“Initial Term”) commencing on _____, hereinafter referred to as the “commencement date,” and terminate on _____ and shall renew automatically for additional one (1) year periods (“Renewal Term(s)”), anticipated to end _____, at completion of the Physician’s Residency or Fellowship Program, hereinafter referred to as the “Residency Program,” subject to adequate progression of the Physician through the Residency Program, as determined by the School of Medicine and Affiliated Hospital, or unless notice of non-renewal or termination of the Agreement is provided to the Physician. The Initial Term and Renewal Term(s) shall be collectively referred to herein as the Term.

When appropriate, in the sole discretion of the Affiliated Hospital and School of Medicine, promotion of Physician will be evidenced by a letter provided by the School of Medicine and signed by Physician, affirming the Renewal Term(s). Notwithstanding the foregoing, the issuance and execution of any such letter is not a guarantee of continuation of this Agreement to the next Renewal Term. If the Affiliated Hospital and School of Medicine determine, in their sole discretion, after the execution of such letter that advancement in the Residency Program is no longer appropriate, warranted, or feasible, for any reason, this Agreement may be immediately terminated, so long as such action is in accordance with School of Medicine, Graduate Medical Education policy and Accreditation Council for Graduate Medical Education (ACGME) standards.

This Agreement and any renewal hereof is contingent upon, without limitation, the following: proof acceptable to the School of Medicine and Affiliated Hospital that the Physician (i) has been issued a temporary or permanent license from the Illinois Department of Financial and Professional Regulation by July 15, 2022; until said license has been issued, the Physician is only permitted to and shall only participate in orientation activities; (ii) can provide verification of U.S. employment authorization in the United States at the commencement of employment; (iii) satisfactorily completed prerequisites such as credentialing, a pre-employment health and drug screen, criminal background check, and other routine employment processing as required by the Affiliated Hospital; and (iv) met the qualifications for resident eligibility as outlined in the School of Medicine Selection, Evaluation, Supervision, Graded Responsibility, Promotion/Non-Promotion And Dismissal Of Residents Policy, as amended from time to time, and as determined by the Accreditation Council for Graduate Medical Education (ACGME) ((i) through (iv) above are collectively referred to as the “Requirements”). Anything to the contrary herein notwithstanding, in the event that such Requirements are not met or provided by the Physician to the Program Director by the commencement date of this Agreement or any Renewal Term, this Agreement may be terminated without advance notice at the joint discretion of the Affiliated Hospital and the School of Medicine. In consideration of the Physician’s acceptance of the aforesaid position, and of the covenants and agreements herein contained, the parties hereto do mutually agree as follows:

A. THE AFFILIATED HOSPITAL SHALL:

1. Employ the Physician and pay him or her total annual compensation of _____ (\$_____) for the term of this Agreement, which compensation shall be prorated and paid on a bi-weekly basis. The amount of compensation to be paid to the Physician will be subject to adjustment on July 1 based on any standard changes in the rate of physician compensation authorized by the Affiliated Hospital during the term of this Agreement.
2. Provide the Physician with professional liability coverage under the insurance program of the Affiliated Hospital. Said professional liability coverage, whether by enrollment in a program of self-insurance, inclusion under a professional liability insurance policy or a combination thereof, shall extend to the Physician while the Physician is performing professional duties and responsibilities as a part of the Physician's Residency Program, provided, however, that said professional liability coverage shall not apply to professional acts performed outside the scope of the Residency Program. Said professional liability coverage shall provide legal defense and protection against awards from claims reported or filed during or after the completion of the Residency Program, if the alleged acts or omissions of the Physician were within the scope of the Residency Program, in accordance with the Affiliated Hospital's self-insured trust and liability policy.
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B. THE SCHOOL OF MEDICINE SHALL:

1. Establish and provide general supervision, guidance, and evaluation to the Physician as well as an educational program within each Department which complies with the education requirements as determined by the ACGME.
2. Provide program direction and select faculty who determine resident proficiency to perform clinical duties and the degree of supervision necessary in the management and treatment of patients.

3. If approved by the School of Medicine, consult with and seek approval of the Affiliated Hospital prior to any change, expansion or extension of the Residency Program outside the facilities of the Affiliated Hospitals.
4. Adhere to the Institutional Policy for Clinical and Work Hours which complies with the appropriate institutional and program ACGME requirements.
5. Adhere to the Institution and Program Closure/Reduction Policy of the Graduate Medical Education Committee (GMEC).
6. Adhere to the ACGME requirement to not require the Physician to sign a non-competition guarantee.

C. THE PHYSICIAN SHALL:

1. Perform such duties as may be assigned to the Physician by the Program Director in accordance with the description of the Residency Program prepared by the Program Director and subject to the approval of the Affiliated Hospital, which duties shall be performed by the Physician conscientiously, to the best of the Physician's ability and under the highest personal bond of professional morals and ethics.

As the position of the Physician involves a combination of supervised, progressively more complex and independent patient evaluation and management functions and formal educational activities, the competence of the Physician shall be evaluated by the Program Director and Clinical Competency Committee on a regular basis with a record of the evaluation being held in the Physician's program file. Such evaluation will be part of the quality assurance program established for the purposes of reducing mortality and morbidity within the Affiliated Hospital.

Under the supervision of approved credentialed attending teaching staff, the Physician shall:

- a. Provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health
- b. Demonstrate medical knowledge about established and evolving biomedical, clinical, and cognate (e.g. epidemiological and social behavioral) sciences and the application of this knowledge to patient care
- c. Participate in practice-based learning and improvement that involves investigation and evaluation of their own patient care, appraisal and assimilation of scientific evidence, and improvements in patient care
- d. Practice interpersonal and communication skills that result in effective information exchange and teaming with patients, their families, and other health professionals
- e. Exhibit professionalism, as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population
- f. Adhere to Social Media Guidelines and Policies set forth by the School of Medicine and Affiliated Hospitals, as amended from time to time.
- g. Participate in systems-based practice, as manifested by actions that demonstrate an awareness of and responsiveness to the larger context and system for health care and the ability to effectively call on system resources to provide care that is of optimal value
- h. Participate fully in the educational and scholarly activities of his /her program and, as required, assume responsibility for teaching and supervising other residents and students
- i. Participate in appropriate institutional committees and councils whose actions affect residents' education and/or patient care
- j. At least annually submit to the Chair of the GMEC (through the Office of Graduate Medical Education) a confidential written evaluation of the program faculty and of the educational experiences
- k. Regularly, or at a minimum every other day, log on and review electronic mail on the Physician's School of Medicine electronic mail account

2. Abide by and at all times conform to the Corporate and Medical Staff Bylaws, Occupational Safety and Health Administration (OSHA), Health Insurance Portability and Accountability Act (HIPAA), the Illinois Department of Public Health (IDPH) infection control policies, and other rules, regulations, policies, ethical and religious directives of the Affiliated Hospitals and of the School of Medicine and all other general guidelines and moral codes, both stated and published, governing the practice of medicine; and the statutes, rules and regulations of the State of Illinois, including without limitation the Medical Practice Act and any and all other laws, rules and regulations relating to the licensing of physicians in training and the practice of medicine in the State of Illinois.
 3. Accept no responsibilities for professional activities outside the scope of the Residency Program provided herein (including, but not limited to "moonlighting") unless approved in writing by the Affiliated Hospital and the Program Director, who shall have discretion as to whether or not such outside professional activities are permitted. With regard to those residency programs in which outside professional activities may be permitted, the Physician shall adhere to the policy on professional activities outside the scope of residency training as approved by the GMEC (Moonlighting Policy).
 4. Ethical and Religious Directives. Physician, the School of Medicine and Affiliated Hospitals acknowledge that Affiliated Hospital is operated in accordance with the *Ethical and Religious Directives for Catholic Healthcare Services* as promulgated, from time to time, by the United States Conference of Catholic Bishops, Washington, D.C., of the Roman Catholic Church ("Ethical and Religious Directives"), and that the principles and beliefs of the Roman Catholic Church are a matter of conscience to Affiliated Hospital. It is the intent and agreement of the parties that neither this Agreement nor any part hereof shall be construed to require Affiliated Hospital to violate said Ethical and Religious Directives in its operation and all parts of this Agreement must be interpreted in a manner that is consistent with said Ethical and Religious Directives.
- D. Medical Specialty Board requirements applicable to the Residency Program specify that the Physician must perform _____ months of actual service in a _____-month period. If the resident is required to complete a preliminary year governed by another Medical Specialty Board, the Physician must perform _____ months of actual service in a _____-month period for that year of training. Anything in this Agreement to the contrary notwithstanding, it is understood and agreed by the Physician that if, because of approved leave or other absence, the Physician does not meet said Board requirements, it may be necessary for the Physician to extend the duration of the Residency Program until said Board requirements have been satisfied.
- E. The Physician agrees to abide by a risk management and quality control program which shall provide, without limitation, for the following:
1. The joint review of the Physician's credentials by the Affiliated Hospital and the School of Medicine.
 2. The joint indoctrination of the Physician with respect to the Physician's responsibilities to the patient, the School of Medicine, and the Affiliated Hospital.
 3. The suspension of the Physician for an indefinite period of time, for failure to comply with this Agreement or for reasonable cause, by the appropriate officials of the School of Medicine or the Affiliated Hospital. If such an event occurs, the Physician may be suspended from training and clinical duties without compensation as identified herein.
 4. Compliance by the Physician with the School of Medicine's policy regarding licensing examinations (USMLE/COMLEX Exam Policy).
 5. Compliance by the Physician with regulations regarding completion of medical records at the Affiliated Hospitals and the School of Medicine.

6. Compliance by the Physician with regulations regarding completion of time records at the Affiliated Hospitals and the School of Medicine.
 7. Compliance with all required education modules including on-line modules as proscribed by the Affiliated Hospitals and/or the School of Medicine.
 8. Compliance with required certifications (i.e. BLS, ACLS, etc.)
- F. In accordance with applicable School of Medicine policy, this Agreement may be terminated at any time, during the Term, by joint decision of the Affiliated Hospital and the School of Medicine, in which case the Physician's compensation specified herein will be prorated to the date of termination and the Physician will be paid for vacation (paid time off) earned but not used prior to the date of termination. In the event that a request for review is filed by the Physician under the Due Process and Resident Complaint Policy, as amended from time to time, pay and benefits may be continued at the discretion of the Affiliated Hospital. Decisions regarding promotion in the program will be made in accordance with the Selection, Evaluation, Supervision, Graded Responsibility, Promotion/Non-Promotion and Dismissal of Residents Policy, as amended from time to time. If a decision has been made the Physician will not be promoted to the next level of training for the following year, the Physician shall be notified in writing by the Program Director that the Physician's contract may be extended at the current PGY level or will not be renewed at the next Renewal Term. The Program Director shall use its best efforts to provide at least 60 days' notice of extension at the current PGY level or non-renewal prior to the expiration of the then current Term.
- G. In the event the Physician's contract is terminated early or not renewed during either the Initial Term or any Renewal Term(s) for any reason other than non-promotion of Physician to the next level of training, the Program Director shall notify the Physician in writing. Such non-renewal or early termination shall be subject to the approval of the Affiliated Hospital and any applicable policy. Any notice required to be given to the Physician shall be in accordance with the applicable policy which governs the dismissal or non-renewal of the Physician's participation in the Residency Program. If the applicable policy does not provide for a specified notice period, such notice period shall be at the discretion of the School of Medicine and the Affiliated Hospital.
- H. The Physician shall notify the Program Director and the Affiliated Hospital, in writing, in the event the Physician does not intend to continue training for the following year. Said notice shall be provided at least 60 days prior to the expiration of the then current Term.
- I. If, in the sole discretion of the Affiliated Hospital and School of Medicine, the Physician is not suitable for advancement to the next PGY level, but continued progression of the Physician through the Residency Program and extension of the Physician's time in the Residency Program is appropriate, the School of Medicine may provide an extension letter, allowing the Physician time to remediate under the current PGY level. Academic deficiencies and remediation are governed by the GMEC Academic Deficiency Policy.
- J. It is the policy of the School of Medicine and the Affiliated Hospitals to maintain an environment which is free from all forms of harassment based on a person's legally protected status (including race, sex, national origin, religion, military status, age and disability) and sexual harassment (herein after referred to as harassment), improprieties and intimidation. The Physician is entitled to the protections afforded by these policies while serving as a resident hereunder.

The Physician agrees to abide by the School of Medicine's and the Affiliated Hospitals' respective policies regarding equal employment, sexual harassment and harassment on the basis of other protected status as set forth above. The Physician acknowledges that failure to abide by these policies may result

in immediate termination of this Agreement. Allegations of discrimination and/or harassment will be addressed in accordance with the applicable policies of the School of Medicine or the Affiliated Hospital.

- K. The Physician agrees to abide by all standards outlined in the (225 ILCS 60/) Medical Practice Act of 1987. Any violations of that Act, including but not limited to Section 22, or other instances of ethical or moral turpitude is grounds for immediate termination and therefore cannot be requested for review under the Due Process and Resident Complaint Policy as amended from time to time.
- L. Unless otherwise mutually agreed by the Physician and the Program Director, at least sixty (60) days' advance notice of intent to resign from the Residency Program during the Initial Term or any Renewal Term must be given, in writing, by the Physician to the Program Director.
- M. This Agreement constitutes the entire agreement and understanding between the parties with respect to the subject matter hereof; supersedes all prior agreements, written or oral, between the parties with respect to such subject matter and except for renewal, non-renewal, or extensions may be modified only by a written agreement signed by all of the parties. If any provision of this Agreement conflicts with any provision of any other document, agreement, policy, or guideline, the provisions in this Agreement shall prevail over any other conflicting provisions.
- N. The validity, interpretation and effect of this Agreement shall be governed by the laws of the State of Illinois. The parties hereby consent to the jurisdiction of the appropriate courts located in Illinois for the resolution of any dispute arising hereunder.
- O. In the event that one or more of the provisions of this Agreement is or are declared illegal, void or unenforceable, that shall not affect the validity of the remaining provisions of this Agreement.
- P. The Physician shall not have the right to request a review their failure to successfully pass the post-offer drug test.
- Q. The School of Medicine policies referenced in Witnesseth paragraph 3, Sections A.5, A.6, B.4, B.5, C.1.f, C.3, E.4-6, F, I, J, and K, each as amended from time to time, are available on the School of Medicine website at <https://www.siumed.edu/gme/gme-policies-and-procedures>.

IN WITNESS WHEREOF, the parties hereto have caused this agreement to be executed the day and year first written above.

PHYSICIAN:

Printed Physician Name _____
Illinois License No _____

BOARD OF TRUSTEES OF
SOUTHERN ILLINOIS UNIVERSITY

HSHS ST. JOHN'S HOSPITAL
SPRINGFIELD, ILLINOIS

Jerry Kruse, MD, MSPH
Dean and Provost, SIU School of Medicine, and
Chief Executive Officer, SIU Medicine for
Austin A. Lane, Chancellor
Southern Illinois University Carbondale

Terrence Deis, MBA, FACHE
President and Chief Executive Officer

RECOMMENDED BY:

Residency Program Director

Amended and Approved by GMEC October 15, 2021



Hospital Sisters
HEALTH SYSTEM

Medical Resident
Benefits Guide

2021



Your Benefits

For Annual Enrollment for 2021 you **must** take action and enroll at www.ezenroll.com.

To help you prepare to enroll in your benefits, use this guide to:

- Learn about your 2021 benefit choices.
- Know where to find resources and support.

For more details about your 2021 HSHS benefits, check out the interactive 2021 Virtual Benefits Fair on the HSHS Benefits Website, benefits.hshs.org.

Availability of Summary Health Information

Hospital Sisters Health System offers two medical coverage options. As required by the Patient Protection and Affordable Care Act, your plan makes available a Summary of Benefits and Coverage (SBC) for each option. The SBCs can be found on the HSHS Benefits Website at benefits.hshs.org. You can also request a paper copy, free of charge, by contacting the HSHS Colleague Service Center.



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Medical Plan Benefit Highlights



New for 2021!

Visit the new HSHS Virtual Benefits Fair through benefits.hshs.org and find the Medical Residents booth. It is designed just like an in-person benefit fair! Visit to learn about your benefits, find helpful resources, and get your benefit questions answered.

Medical and Prescription Drug Coverage

You have two medical options through Aetna:

- Health Maintenance Organization (HMO) – **In Network Only**
- Preferred Provider Organization (PPO)

For many covered services, you must first meet a deductible before the PPO plan options begin to pay benefits. After you meet the deductible, the plans pay a percentage of the cost of services, and you pay the remaining amount. **Preventive care, such as annual routine physical exams and screenings, are covered at 100% when you visit Aetna providers.**

HMO & PPO Plan: In-Network Providers

You have the freedom to receive care from any licensed provider. However, you generally pay less when you receive care from certain providers. When you use in-network providers, you receive:

- Protection against unexpected charges above reasonable and customary (R&C), since network providers charge preferred rates well within R&C limits.
- Freedom from claim forms, since network providers file claims and bill the plan for payment — as a result, your money isn't tied up waiting for reimbursement.
- Savings through lower rates for services negotiated by Aetna, the network administrator.

PPO Plan Only: Out-of-Network Providers

When you visit providers who are considered out-of-network, you receive a lower level of benefit and pay more. If your out-of-network provider's charge exceeds the R&C rate, you will be responsible for paying the amount above R&C, as well as the deductible and/or coinsurance amount that applies to the medical option you select.

Additional information about in-network and out-of-network providers can be found at aetna.com.

Find a Provider

To locate an in-network provider, go to the Aetna Member Website at aetna.com.

The Aetna HealthSM App

The Aetna HealthSM app provides a seamless way to manage your benefits, connect to care, and get health care support. Here are some examples of what you can do with the app:

- View your health plan summary and get detailed information about what's covered.
- View claims details and pay claims for your whole family.
- Search for providers, procedures, and medications.
- Get cost estimates before you get care.

Download the Aetna HealthSM app today by texting "**AETNA**" to **90156** for a link to download the app. Message and data rates may apply.*

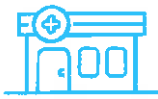
Get Support from Aetna

For assistance, call 1-844-362-0931. An Aetna customer service representative will be available to answer your questions.





To learn more about your prescription drug coverage, call toll-free at 1-888-792-3862. If you need the help of a telephone device for the deaf, call 1-877-833-2779.



Visit an HSHS Pharmacy

HSHS pharmacies can be found in select HSHS facilities and elsewhere in the communities we serve. You can save time in your day by getting your prescription filled at or close to your work location. Experience the ease and convenience of using an HSHS pharmacy.

Prescription Drug Coverage

When you enroll in an Aetna medical option, you will automatically have prescription drug coverage through in-network pharmacies.

When filling a prescription, you have two options:

- Fill up to a 30-day supply at an in-network retail pharmacy.
- Fill up to a 90-day supply using a CVS Caremark® mail order service.

To find out if a retail pharmacy is part of the Aetna network, ask your pharmacy or visit aetna.com during enrollment.

How to get started with CVS Caremark® home delivery:

1. Call or go online: Call 1-888-792-3862 or login to the member website at aetna.com.
2. Request home delivery: By phone, online, or mail an order form.
3. Get refills your way: It's easy to reorder online, by phone, or by mail.

What will I pay?

Depending on your plan, you may pay less for medicine you get through home delivery than at a retail pharmacy. To know for sure, just check your plan details.

Know the Cost of Your Medication Ahead of Time

How? – Log in to your member website at aetna.com. Select Manage Prescriptions, then click on "Pharmacy Coverage and Costs." Choose "Estimate drug costs" to see what you'll pay and get the most value from your plan.

Compare Your Medical Plan Options

	HMO		PPO	
	In Network		In Network	Out of Network
Annual Medical Deductible				
Per Individual	None		\$500	\$1,000
Family Limit	None		\$1,000	\$2,000
Annual Medical Out-of-Pocket Maximum				
Per Individual	\$1,500		\$3,000	\$5,000
Family Limit	\$3,000		\$6,000	\$10,000
Preventative Care	Covered in Full		Covered in Full	40%*
Office Visits				
PCP	\$25		\$25	40%*
Specialist	\$50		\$50	40%*
Walk-In Clinics	\$25		\$25	40%*
Lab and Imaging				
Diagnostic Lab Services	Covered in Full		20%*	40%*
Diagnostic Imaging (X-ray / Advanced)	\$50		20%* / \$150*	40%*
Hospital				
Inpatient	\$350		20%*	40%*
Outpatient	\$50		20%*	40%*
Emergency Room (waived if admitted)	\$300, no coverage if non-emergency		\$300 50%* if non-emergency	\$300 50%* if non-emergency
Ambulance¹	Covered in Full		20%*	20%*
Urgent Care	\$100 copay, no coverage if non-urgent		\$100 copay 50%* if non-urgent	40%* 50%* if non-urgent
Mental Health / Substance Abuse				
Inpatient	\$350		20%*	40%*
Office Visits	\$50		\$50	40%*
Other Services	Covered in Full		Covered in Full	40%*
Skilled Nursing Facility²	\$350		20%*	40%*
Home Health Care²	Covered in Full		\$50*	40%*
Telemedicine	\$25		\$25	40%*
Rehabilitation Services - Outpatient³	\$50		\$50	40%*
Spinal Manipulation⁴	\$50		\$50	40%*
Durable Medical Equipment	20%		20%*	40%*
Other Covered Services	\$50		20%*	40%*
Lifetime Benefit Maximum	Unlimited		Unlimited	
Pharmacy				
Retail Drugs (30-day supply)				
Preferred Generic	Tier 1 \$10		Tier 1A \$3 Tier 1 \$10	20%*
Preferred Brand Name	\$35		\$35	20%*
Non-Preferred	\$60		\$60	20%*
Specialty (preferred / non-preferred)	10%		\$150 / \$300	20%*
Mail Order Drugs (90-day supply)				
Preferred Generic	Tier 1 \$25		Tier 1A \$7.50 Tier 1 \$25	Tier 1A N/A Tier 1 20%*
Preferred Brand Name	\$87.50		\$87.50	20%*
Non-Preferred	\$150		\$150	20%*
Specialty	N/A		N/A	N/A

* after Annual Medical Deductible is met

¹ no coverage if non-emergency

² limited to 60 days per year

³ limited to 60 visits per year

⁴ for HMO plan – limited to 60 visits per year, for PPO plan - limited to 20 visits per year

⁵ for PPO plan – limited to 20 visits per year

More Health Support for You

Anytime Care Program

Have a medical question? You have access to a doctor, 24/7, using Anytime Care. Visit with a doctor online or via telephone about many conditions, including allergies, asthma, cold and flu symptoms, rashes, and sinus infections. The service is available online at www.anytimecare.com, or you can call 1-844-391-4747 and speak with a provider.

The Anytime Care program is available to plan participants in all 50 states.



Employee Assistance Program

The Employee Assistance Program (EAP) provides you and your eligible dependents with support to manage the stress and challenges of life. The program is available to all HSHS colleagues without enrollment, and there is no cost to you.

All services are confidential and provided by professional counselors. The EAP team includes family therapists, clinical social workers, marriage and family therapists, professional counselors and clinical psychologists.

Services include support for:

- Physical and emotional illness
- Marital, relationship and family concerns
- Grief and bereavement
- Career and job issues
- Stress
- Drug and alcohol abuse
- Gambling

For more information or to schedule an appointment, contact ComPsych at 1-877-327-7429, or visit www.guidanceresources.com (enter "HSHS4U" for the organization web ID).

New - Identity Theft Protection

New for 2021, HSHS offers you the opportunity to purchase **Identity Theft Protection** for you and your family. Allstate Identity Protection Pro Plus will offer:

- Proactive monitoring to help you see, manage, and protect personal data
- A \$1 million identity theft insurance policy
- Financial activity monitoring, credit monitoring and alerts, credit assistance, cyber bullying protection, social media monitoring, sex offender alerts, and more
- Physician NPI data, DEA, and other license monitoring
- A team of Allstate experts, available 24/7, to fully manage restoration cases
- **Bi-weekly cost is \$3** for colleague only coverage, or **\$5.77** for you and your family

To learn more, visit the new HSHS Virtual Benefits Fair through benefits.hshs.org.

Dental Coverage



The plan provides two dental plan options to help you care for your teeth and gums:

- Basic Option.
- High Option.

The dental options provide coverage for preventive and diagnostic services and basic and major care. When you enroll in the High Option, orthodontia is also covered for you and your eligible dependents.

Compare Your Dental Plan Options

Dental Option	BASIC	HIGH
Annual Deductible	\$50/person, up to \$150/family maximum	\$25/person, up to \$75/family maximum
Annual maximum benefit	\$800/person	\$1,500/person (not including orthodontia)
Preventive care and diagnostic services, including: <ul style="list-style-type: none"> • Up to two exams in a calendar year • Up to two cleanings in a calendar year • Complete set of x-rays in a 36-month period • Up to two fluoride treatments for children under age 19 in a 12-month period 	100% R&C, no deductible	100% R&C, no deductible
Basic care services, including: <ul style="list-style-type: none"> • Fillings • Extractions • Root canal therapy • Oral surgery • Repair of dentures and bridges 	85% R&C after deductible	85% R&C after deductible
Major care services, including: <ul style="list-style-type: none"> • Crowns • Bridges • Dentures 	50% R&C after deductible	50% R&C after deductible
Orthodontia	Not covered	50% R&C after annual deductible and additional \$25 charge \$1,500/person lifetime maximum benefit

R&C - Reasonable and Customary

Vision Coverage

You can receive vision coverage through the VSP Vision Plan, or as part of your dental or medical coverage. The VSP Vision Plan provides coverage for eye exams, lenses, frames and contact lenses, plus discounts on many vision services and products. No deductible applies to VSP vision benefits.

	VSP Network Providers	Other Providers
Vision Exams (once every calendar year)	Covered in full after \$15 copay	Up to \$45 reimbursement
Lenses (once every calendar year)		Reimbursement
• Single Vision	Covered in full	Up to \$30
• Bifocal	Covered in full	Up to \$50
• Trifocal	Covered in full	Up to \$65
• Lenticular	Covered in full	Up to \$100
• Progressive Bifocals		
- Standard	\$0 copay	Up to \$50
- Premium	\$95-\$105 copay	Up to \$50
- Custom	\$150-\$175	Up to \$50
• UV Coating	\$16 copay	Not covered
• Tint	\$0-\$15 copay	Not covered
• Scratch Resistance	\$17 copay	Not covered
• Anti-reflective (standard)	\$41 copay	Not covered
• Basic Polycarbonate	Children: \$0 copay Adults: \$31-\$35 copay	Not covered
• Other Lens Enhancements	20% - 25% discount	Not covered
Frames (once every calendar year)	\$150 allowance \$170 allowance for featured frames 20% off balance \$150 Costco allowance	Up to \$70 reimbursement
Contact Lenses (once every calendar year in lieu of frames and lenses)		Reimbursement
• Medically Necessary	\$0 copay	Up to \$210
• Elective	\$130 allowance	Up to \$105
• Fit & Follow up	\$0 copay	Not covered
Other	<ul style="list-style-type: none"> • Prescription sunglasses: 20% discount • Low vision aid: 75% of cost up to \$1,000 every 2 years • Laser surgery: 15% discount off regular price (5% off promotional price) at select providers 	Not available



Cigna and EyeMed Vision Discount Programs

Colleagues who enroll in dental coverage have the Cigna Vision discount program. Additionally, if you are enrolled in the Aetna Medical Insurance, you have access to the EyeMed Vision Discount through participating providers. The vision discount programs provide savings on routine eye exams and purchases of frames and lenses, including contacts. To view discount information for vision care services for Cigna Vision, go to benefits.hshs.org.

Flexible Spending Accounts (FSAs)



Flexible spending accounts, or FSAs, help you save by letting you set aside money — on a tax-free basis — to pay for certain eligible out-of-pocket expenses.

Health Care Flexible Spending Account (FSA) – You can contribute up to \$2,750 to your Health Care FSA each year. You can use the money in the account to cover medically necessary expenses that aren't covered by your medical, dental, and vision plans.

Dependent Care Flexible Spending Account (FSA) – The Dependent Care FSA can be used to cover expenses for the care of an eligible dependent (a child or a dependent adult) when you're working, looking for a job, or attending school on a full-time basis. You can set aside up to \$5,000 to pay for eligible dependent day care expenses (\$2,500 if you're married and filing separate tax returns).

About the Dependent Care FSA and Taxes

As you consider a Dependent Care FSA, think about what works best for you: the FSA or the dependent care tax credit provided by federal law.

It is important to keep in mind that you cannot take the tax credit for any amounts that are reimbursed through an FSA. In most cases, the Dependent Care FSA provides more savings than the tax credit.

How FSAs Work

Using an FSA is easy and saves you money, but requires careful planning. With an FSA, you put aside money to pay for annual expenses through tax-free payroll deductions, which fund your account(s). By making tax-free contributions, you're reducing your taxable income — **which means more money in your pocket.**

Use your Benny Card for eligible Health Care FSA expenses: Health Care FSA participants will be able to use the FSA Benny card for easy and convenient payment of out-of-pocket expenses. If you receive a service that does not accept the FSA debit card, save your receipt and file a paper claim for reimbursement from your account.

For information about eligible expenses, see IRS Publication 502 (for Health Care FSA-eligible expenses) or IRS Publication 503 (for Dependent Care FSA-eligible expenses), available at www.irs.gov, or visit Tri-Star Systems' website at www.tri-starsystems.com.

Please note abortions, sterilizations, contraceptives, sexual reassignment, in-vitro fertilization, artificial insemination, or embryonic implantation procedures are not considered eligible Health Care FSA expenses due to HSHS ethics/philosophy.



Life and AD&D Insurance

When the unexpected happens, you and your family are protected.

Basic Life and Accidental Death and Dismemberment (AD&D) Coverage

You automatically receive basic coverage of \$50,000.

You are not required to provide evidence of insurability — or proof of good health — for basic life and AD&D coverage.

Voluntary Accidental Death and Dismemberment (AD&D) Coverage

In addition to the basic AD&D insurance coverage provided by HSHS, you can purchase more coverage separate from life insurance for you and for your family through Securian. Your cost for voluntary AD&D coverage is paid on a pre-tax basis.

You may purchase voluntary AD&D insurance for yourself in a coverage amount ranging from \$50,000 to \$250,000. You can also purchase additional coverage for your family in the following coverage amounts:

- **You and spouse only:** Your legal spouse is covered for 60% of your coverage amount.
- **You, spouse and children:** Your legal spouse is covered for 50% of your coverage amount and each child is covered for 15% of your coverage amount.
- **You and children only:** Each child is covered for 20% of your coverage amount.

Supplemental Life Insurance Coverage

You also have additional life insurance options you can purchase on an after-tax basis through Securian, including:

- **Supplemental life insurance for you** from one to eight times your pay, up to \$1 million in additional coverage.
- **Supplemental life insurance for your legal spouse** in \$5,000 increments from \$5,000 to \$50,000. If your spouse is also an HSHS colleague and eligible for basic life insurance, you cannot elect supplemental life insurance for your spouse.
- **Supplemental life insurance for your eligible dependent children** in \$2,500 increments from \$2,500 to \$10,000. When you select supplemental children's life insurance, each child from live birth is covered for the same amount — so if you choose \$5,000 children's life insurance, each child would have \$5,000 in coverage.



Living Care Benefit

The living care benefit can provide financial assistance if you become terminally ill by letting you receive a part of your life insurance benefit while you are living.

For more information about your life and AD&D insurance benefits, including when evidence of insurability is required, visit the Virtual Benefits Fair through benefits.hshs.org and find the Medical Residents booth.

Disability Coverage and Retirement



Disability benefits help protect you and your family by providing a portion of your income if you become disabled and are unable to work because of a personal illness or injury. HSHS provides long-term disability insurance for your financial protection.

Long-Term Disability (LTD)

If your disability extends beyond 26 weeks, you may be eligible for long-term disability benefits.

LTD Coverage

Benefit	Up to 60% of monthly earnings
When benefits begin	After 180 days of disability
Minimum benefit	10% of your gross benefit or \$100, whichever is greater
Maximum benefit	\$10,000/month

For more information about your disability benefits, visit the virtual benefits fair through benefits.hshs.org.



Retirement Program

To help you save for the future, HSHS provides a retirement program that includes a 403(b) Retirement Savings Plan.

HSHS automatically enrolls you at 4% of salary if no action is taken by your 60th day of employment. This program allows you to set aside before or after-tax dollars toward your retirement savings.

For additional information about eligibility, call Transamerica Member Services at 1-800-755-5801 or visit hshs.triretire.com.

Get One-on-One Help Planning for Retirement.

Meet with a Transamerica Retirement Solutions retirement planning consultant to learn how your retirement plan can help you achieve your retirement savings goals. Go to benefits.hshs.org/retirement to schedule your appointment today!

HSHS Wellness Program: LiveWELL



At Hospital Sisters Health System, we support our colleagues' health and well-being so that they can take better care of themselves, while taking care of others. Our wellness program, HSHS LiveWELL, emphasizes whole-person well-being with a focus on our four pillars of health: emotional, physical, financial, and work.

Reward Yourself!

When you participate in LiveWELL, you can earn points for a variety of activities, such as visiting your primary care provider, completing your LiveWELL Assessment, tracking 10,000 daily steps, or exercising weekly. LiveWELL also offers flexibility for completing the program's challenges — participants can complete challenges and earn incentives anytime during the program period.

Complete challenges and activities to earn point goals set for three program levels. Earn from \$15 to \$25 per pay period — **or \$390 or more a year!**

LiveWELL FastPass is back!

The FastPass allows participants to fast pass through to the next level and is offered through different challenges during the year. Be on the lookout for your chance to FastPass through to the next level!

Complete Challenges/Activities

Level 1 SEEK 1,000 points	Level 2 STRIVE 2,500 points	Level 3 SUCCEED 5,000 points
Reward: \$15 wellness incentive per pay period	Reward: \$20 wellness incentive per pay period	Reward: \$25 wellness incentive per pay period

Wellness incentive dollars will be paid on an annual basis at the beginning of the new year.

The New Limeade Mobile App Experience

The new HSHS LiveWELL program year brings a new look and experience to the wellness program user platform powered by Limeade. In preparation for the new experience, you will be prompted in the coming weeks to download the new Limeade ONE app on your device. If you're already registered, you will need to authenticate your credentials by using your existing username and password.

Join the Fun

To be eligible to participate in LiveWELL, you must be an HSHS benefit-eligible colleague or a spouse who is covered under the HSHS Medical Resident HMO or PPO Plan.

Register by visiting hshs.limeade.com and clicking "Get Started." *Please note that if you are already participating in LiveWELL, you do not need to re-register. However, you will need to authenticate your credentials on the new Limeade ONE app.*

You can learn more about LiveWELL on the HSHS Benefits Website, benefits.hshs.org. For questions, call the HSHS Colleague Service Center at 1-855-FYI-HSHS or email at fyi@hshs.org.

HSHS Discount Program (PerkSpot)

PerkSpot gives you access to exclusive discounts on:

- Automotive
- Beauty & Fragrance
- Books & Media
- Financial & Life Services
- Health & Wellness

For more information, visit <https://hshs.perkspot.com/login>.



Hospital Sisters
HEALTH SYSTEM

LiveWELL



Cost of Coverage

You and HSHS share the cost of your benefits.

HSHS pays for:		You pay for:	While HSHS pays the majority of the cost, you and HSHS share the cost of:
Basic Life and AD&D Insurance	Employee Assistance Program	Vision	Medical
Long-Term Disability Coverage	LiveWELL Wellness Program	Flexible Spending Accounts	Dental
	HSHS 403(b) Plan	Voluntary AD&D Supplemental Life	
		Anytime Care Program	
		Identity Theft Protection	

You pay your share of most benefit costs before federal, state and Social Security taxes are calculated. Note: Coverage for an eligible legally-domiciled adult (LDA) may be taxed. Visit benefits.hshs.org for more information.

If you elect supplemental life insurance for yourself, your spouse or your child(ren), you pay for this coverage with after-tax deductions. Premiums for supplemental life coverage for you and your spouse are age-based; for children, the premiums are a flat amount, regardless of the number of children.

See the following charts for your 2021 medical, dental and vision coverage costs.

2021 Biweekly Colleague Medical Insurance Deductions

Medical	Colleague Only	Colleague + Spouse/LDA + Child(ren)
HMO	\$18.02	\$52.67
PPO	\$17.58	\$52.45

2021 Biweekly Colleague Dental Plan Deductions

Dental	Colleague Only	Colleague + Spouse/LDA	Colleague + Child(ren)	Colleague + Spouse/LDA + Child(ren)
Basic	\$1.77	\$15.22	\$11.39	\$24.79
High	\$7.46	\$26.90	\$28.37	\$47.78


2021 Biweekly Colleague Vision Plan Deductions

Vision	Colleague Only	Colleague + Spouse/LDA	Colleague + Child(ren)	Colleague + Spouse/LDA + Child(ren)
VSP	\$3.55	\$7.09	\$7.59	\$12.12

Contact Information

If you have questions about ...	Contact ...
Enrolling	The HSHS Colleague Service Center 1-855-FYI-HSHS, fyi@hshs.org
Medical <ul style="list-style-type: none"> • Customer Service • Claim information • ID cards • Prior authorization • Teladoc 	Aetna www.aetna.com 1-844-362-0931 www.teladoc.com/aetna 1-855-835-2362
Prescription Drugs	Aetna www.aetna.com 1-888-792-3862
Dental <ul style="list-style-type: none"> • Claim information • Dental providers 	Cigna HealthCare www.cigna.com 1-800-244-6224
Vision	Vision Service Plan (VSP) www.vsp.com 1-800-877-7195
Flexible Spending Accounts <ul style="list-style-type: none"> • Health Care FSA • Dependent Care FSA 	Tri-Star Systems www.tri-starsystems.com 1-800-727-0182 (phone) 1-800-315-0737 (fax)
Disability Insurance <ul style="list-style-type: none"> • Long-Term Disability 	UNUM www.unum.com 1-866-295-3007, Monday – Friday, 7 a.m.- 7 p.m. CST
HSHS 403(b) Plan	Transamerica Retirement hshs.triretire.com 1-800-755-5801
Employee Assistance Program	ComPsych www.guidanceresources.com (enter "HSHS4U" for the organization web ID) 1-877-327-7429
HSHS Discount Program	The HSHS Colleague Service Center 1-855-FYI-HSHS, fyi@hshs.org https://hshs.perkspot.com/login

This guide is intended to be only an overview of benefits for Medical Residents. More details about how the benefits work are included in the summary plan descriptions for those benefits. Hospital Sisters Health System reserves the right to change, suspend, freeze or end benefit plans at any time.

	Name of Policy: Selection, Evaluation, Supervision, Graded Responsibility, Promotion/Non-Promotion and Dismissal of Residents Policy	
	Last Approval Date: November 20, 2020	Effective Date: November 20, 2020

For the purposes of this policy, the term “Resident” refers to Residents and Fellows

SELECTION

The selection of residents in each program shall be carried out by the Residency Program Director with the assistance of the teaching staff. Programs will select applicants who are eligible for appointment to accredited residency programs. (See Policy on Resident Eligibility and Employment Authorization)

Programs will select applicants on the basis of their preparedness, ability, aptitude, academic credentials, communication skills, and personal qualities such as motivation, integrity and coachability. Programs will not discriminate with regard to race, religion, national origin, citizenship, sex, age, handicap or other factors prohibited by law. Programs must engage in practices that focus on mission-driven, ongoing, systematic recruitment and retention of a diverse and inclusive workforce of residents, faculty and staff. The School of Medicine will participate in the National Resident Matching Program as an Institution.

EVALUATION

Each residency program must demonstrate that it has an effective plan for assessing resident performance throughout the program and for utilizing the results to improve resident performance. This plan should include

1. The use of assessment methods that produce an accurate assessment of residents’ competence in patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice.
2. Input and guidance from the Clinical Competency Committee (CCC)
3. Assessment of residents’ achievement of specialty-specific Milestones
4. Mechanisms for providing regular and timely performance feedback to residents that includes at least
 - Regular verbal and written Feedback
 - Written semiannual evaluation that is communicated to each resident in a timely manner
 - Maintenance of a record of evaluation for each resident that is accessible to the resident.
4. A. process that uses the results of multiple assessment instruments and evaluators to achieve progressive improvements in residents’ competence and performance, and to appropriately allow for the assumption of graded responsibility and authority. Appropriate sources of evaluation include faculty, patients, peers, self, and other professional staff. With input from the CCC, the program director must provide a final evaluation for each

resident who exits or completes the program. The evaluation must, for graduating residents, verify that the resident has demonstrated the knowledge, skills, and behaviors necessary to enter autonomous practice. The final evaluation must be shared with the resident on completion of the program and become part of the resident's permanent record maintained by the institution.

SUPERVISION

Supervision of the residents shall be carried out by the designated teaching faculty under the direction of the Residency Program Director, and in accordance with the SIU Policy on Patient Care Activities and Supervision Responsibilities for GME Trainees and Attending Physicians. Each program shall establish a written program-specific supervision policy consistent with this institutional policy and the respective ACGME Common and specialty/subspecialty-specific Program Requirements.

It shall be the Residency Program Director's responsibility to see that such supervision is adequate and appropriate to maintain both the optimal education environment and excellent quality of patient care. Residents will be supervised by teaching faculty in a way that gives residents progressively increasing responsibility according to their level of competence, ability and experience. Availability of the teaching staff will be structured in a way to ensure appropriate supervision. Determining the level of responsibility for each resident will be the responsibility of the Residency Program Director with input from the teaching staff.

GRADED RESPONSIBILITY

The responsibility given to residents in patient care should depend upon each resident's knowledge, problem-solving ability, manual skills, experience, and the severity and complexity of each patient's needs. The privilege of progressive authority and responsibility, conditional independence, and a supervisory role in patient care delegated to each resident must be assigned by the program director and faculty members. The program director must evaluate each resident's abilities based on specific criteria. When available, evaluation should be guided by specific national standards.

PROMOTION / NON-PROMOTION

Each program must establish written policies describing the program requirements for promotion to the next level of training. The program director, with input from the program's CCC, will determine at least annually whether each resident has progressed satisfactorily to advance to the next level of training and/or demonstrated the skills necessary to supervise junior residents.

The criteria for advancement shall be based upon the following parameters, all of which need to be judged as competent for each level of advancement:

- A. Medical Knowledge
- B. Clinical Competence in Patient Care
- C. Interpersonal and Communication Skills
- D. Professionalism (includes absence of impairment)
- E. Attitudes
- F. Practice-Based Learning and Improvement
- G. Systems-Based Practice

Specific criteria and requirements for advancement from one year to the next will be set by each individual program. In general, the following will be required for promotion from one training level to the next:

PGY 1 to PGY 2:

- Acceptable progress in areas A through G
- Ability to supervise PGY1's and students
- Ability to act with limited independence

PGY 2 to PGY X:

- Acceptable progress in areas A through G
- Ability to supervise/teach
- Ability to act with increasing independence


PGY X to Graduation:

- Competence in areas A through G
- Ability to act independently

Program policies with respect to promotion/non-promotion to the subsequent year of training shall comply with all ACGME Institutional, Common and Program Requirements, and be in accordance with the Academic Deficiency Policy. The decision for promotion or non-promotion shall be made by the Residency Program Director with consultation from the CCC. A decision to withhold advancement or deny reappointment shall be taken only after documented counseling of the resident apprising them of the reason for such potential action, and documentation that the deficiencies have not been sufficiently corrected within a reasonable time. If a resident believes that they have been dealt with unfairly in the above process, redress may be sought through the Due Process and Resident Complaint Policy.

DISMISSAL

Dismissal, non-renewal of contract or non-promotion of a resident whose performance is unsatisfactory will be communicated in writing to the resident-in accordance with GMEC policies on academic deficiencies and corrective action. Appeals of dismissal actions shall be handled through the Due Process and Resident Complaint Policy.

	Name of Policy: Vacation and Other Leaves of Absence	
	Last Approval Date: November 16, 2012	Effective Date: November 16, 2012

Provides the resident with vacation, educational leave, family and medical leave, parental leave, bereavement leave, sick leave and military leave as follows:

VACATION

The resident may be permitted to take up to three (3) weeks per year of paid vacation.# A week of vacation will be defined as 5 weekdays (Monday – Friday) and 2 weekend days (Saturday – Sunday). Use of vacation leave shall be subject to approval in advance by the Program Director with the concurrence of the Affiliated Hospital. In determining whether to grant the resident’s request for vacation, the Program Director may take into consideration patient care and the operational needs of the residency program. The resident shall be responsible for arranging appropriate coverage of patient care and other obligations as necessitated by the requested vacation; which arrangements shall be coordinated by the chief resident and the Program Director. Delinquent medical records, time records, logs and evaluations must be made current before the resident begins vacation. The resident shall not be entitled to accumulate unused vacation leave beyond the term of appointment.

If the physician appointment is terminated in the middle of the year, the vacation the resident has available to him/her will be pro-rated by month. Residents who leave mid-contract will not have access to all 3 weeks of vacation.

Residents who leave the country for vacation or other reasons and are then unable to return to the US may not have their position held beyond the approved vacation time granted by the Program Director, at the sole discretion of the Program Director and the Affiliated Hospital.

EDUCATIONAL LEAVE

The resident may be permitted to take up to one (1) week per year of paid educational leave at the discretion of the Program Director.# Use of educational leave shall be subject to approval in advance by the Program Director with the concurrence of the Affiliated Hospital. In determining whether to grant the resident’s request for educational leave, the Program Director may take into consideration patient care, the operational needs of the residency program and the educational value to the resident of the requested educational leave. The resident shall be responsible for arranging appropriate coverage of patient care and other obligations as necessitated by requested educational leave, which arrangements shall be coordinated by the chief resident and the Program Director. Delinquent medical records, time records, logs and evaluations must be made current before the resident begins educational leave. The resident shall not be entitled to accumulate unused educational leave beyond the term of appointment.

FAMILY AND MEDICAL LEAVE

The resident may be permitted to take up to twelve (12) weeks per year of family and medical leave without compensation (other than paid vacation and/or sick leave used in accordance with the policies of the Affiliated Hospital) during the term of appointment, in accordance with the Family and Medical Leave Act of 1993, state law, and the policies of the Affiliated Hospital. The resident shall make requests for family and medical leave in accordance with the existing policies of the Affiliated Hospital and should consult those policies for further information.

BEREAVEMENT

The resident may be permitted to take up to three (3) calendar days per year of paid bereavement leave for a member of his/her immediate family, subject to approval in advance by the Program Director with the concurrence of the Affiliated Hospital. For these purposes, the immediate family is defined as spouse, child, parent, brother, sister, grandparent, grandchild, and corresponding in-laws. The policy of the Affiliated Hospital will be followed. The resident shall not be entitled to accumulate unused bereavement leave beyond the term of appointment.

SICK LEAVE

The Resident may be permitted to take up to two (2) weeks per year of paid sick leave, to be used in accordance with the existing policies of the Affiliated Hospital. # If the resident is successful in being re-appointed to the residency program, sick leave may be accumulated and carried to successive appointment years. Sick days shall be documented by the program coordinator and an up-to-date report of the number of sick days used by the resident shall be available from the residency program and/or the Office of Residency Affairs. All paid sick leave not taken is forfeited and is not compensated upon termination of the resident's contract.

PARENTAL LEAVE

Maternity Leave

Maternity leave will be granted upon request to all pregnant residents. The resident may be permitted to take up to a total of twelve (12) weeks of family and medical leave per year without compensation in accordance with the federal Family and Medical Leave Act of 1993, state law, and the policies of the Affiliated Hospitals. Maternity leave will be paid leave by initially using any available sick (up to 2 weeks) or vacation leave (up to 3 weeks). Once available vacation and sick leave is exhausted, any additional maternity leave will be family leave without pay. Maternity leave greater than twelve (12) weeks duration, except in cases of illness of mother or infant, will require approval by the Residency Program Director. Health insurance and other benefits will be provided while using vacation and sick leave. Health insurance and other benefits may be continued at the resident's expense while on family leave without pay.

The pregnant resident should notify the Residency Program Director as soon as possible regarding her need for a maternity leave. The resident and program director should develop a plan regarding timing and duration of maternity leave. Leave which exceeds that period of time defined by the resident's specialty board as a leave of absence for which time need not be made up, must be made up at the end of the usual training interval. Upon return to work the resident will be reinstated without loss of training status, provided that her return is on the date previously approved by the program director. If leave is requested for more than twelve (12) weeks due to medical reasons, approval for return to the training program will be at the discretion of the Residency Program Director. For leave beyond twelve (12) weeks a doctor's certificate verifying the condition of the resident may be requested. In those cases where a resident must make up time missed in order to fulfill board requirements, the resident will be paid for days worked and the institution will continue benefit coverage during the extension of training time. Schedule accommodations will meet the needs of the resident and the program (including other residents) so that special requirements of that discipline are met.

Adoption

The resident may be permitted to take up to twelve (12) weeks of family and medical leave per year without compensation in accordance with the federal Family and Medical Leave Act of 1993, state law, and the policies of the Affiliated Hospitals. The resident must discuss the impending adoption with the Residency Program Director in as much advance as possible, and leave should be granted to any mother or father during the first month after adoption of a child. Adoption leave will be paid by initially using any available vacation leave. Once available vacation time is exhausted, Family Leave will be unpaid

and health insurance and other benefits may be continued at the resident's expense. If leave exceeds that period of time defined by the resident's specialty board as a leave of absence for which time need not be made up, it will be made up at the end of the usual training interval. In those cases where a resident must make up time missed in order to fulfill board requirements, the resident will be paid for days worked and benefit coverage will continue during the extension of training time.

Paternity Leave

The resident may be permitted to take up to twelve (12) weeks of family and medical leave per year without compensation in accordance with the federal Family and Medical Leave Act of 1993, state law, and the policies of the Affiliated Hospitals. Such leave should be requested in as much advance as possible, and should be granted to any father during the first month after delivery or adoption of a child. Paternity leave will be paid by initially using any available vacation leave. Once available vacation time is exhausted, Family Leave will be unpaid and health insurance and other benefits may be continued at the resident's expense. If leave exceeds that period of time defined by the resident's specialty board as a leave of absence for which time need not be made up, it will be made up at the end of the usual training interval. In those cases where a resident must make up time missed in order to fulfill board requirements, the resident will be paid for days worked and the institution will continue benefit coverage during the extension of training time.

ADDITIONAL TIME TO COMPLETE WORK

If any specialty or sub-specialty Board requirements are more stringent than those outlined in this section, then the respective Board requirements shall govern and supersede these. In the event that the resident accumulates a total of more than the maximum allowable days of absence from the Residency Program during a year (including vacation, educational, child care, bereavement and sick leave, suspension [with or without pay] or other absence), the resident shall be notified in writing by the Program Director as to whether such absence necessitates remedial work in order to fulfill the requirements of the Residency Program and Specialty Board. Such notification shall be provided to the resident prior to any planned leave (or at the earliest practicable time after any unplanned leave) which causes the resident to exceed this limit of absence from the Residency Program.

JOB SEARCH

Successful career placement of the resident is a goal of the Residency Program. The Program Director may grant up to six (6) calendar days total during the last two years of training for this purpose, using prudent discretion. If approved by the RRC, this time may be counted as work days when tabulating days for RRC accreditation.


ACCUMULATION OF LEAVE TIME

Residency employment agreements are for a maximum of one year. The resident shall not be entitled to accumulate unused vacation, educational, job search, or bereavement leave from one period of appointment to the next. Nor shall the resident be entitled to any allowance or compensation for such leave not used during the contract period in which it is earned.

MILITARY LEAVE

All affiliated hospitals have current policies regarding military leave for their employees which preserve the employee's position and coordinate benefits, such as health insurance. In the event that it becomes necessary for a resident or fellow to be called into active duty, the policy of the employing hospital will become effective. It will be the responsibility of the resident to work with the appropriate employing hospital to ensure that the necessary paperwork is completed before the resident leaves for duty.

For duty hour/time reporting purposes, a number of days in a week of leave time will be determined by the respective residency program. For example, a week may be defined as 5 days (ambulatory rotation) or 6 days (inpatient rotation).

 SIU SCHOOL <i>of MEDICINE</i>	Name of Policy: USMLE/COMLEX Exam Policy	
	Last Approval Date: June 18, 2021	Effective Date: June 18, 2021

RESIDENTS WITH MD DEGREE

- I. All MD applicants to residency programs at SIU School of Medicine are required to pass Steps I and II of the United States Medical Licensing Exam (USMLE) before beginning a PGY-1 position. In response to the discontinuation of the USMLE Step 2 Clinical Skills (CS) Exam, ECFMG developed alternate [pathways](#) that will allow a qualified international medical graduate to meet the requirements for ECFMG certification.
- II. During the PGY-I or PGY-II year, all MD residents in SIU School of Medicine training programs must pass Step III of the USMLE. Progression to the PGY-III year will not be allowed until the exam has been passed. All exam attempts must be recorded in New Innovations.

If a resident's contract ends due to not meeting this requirement, the program can choose to hold a position for the resident for up to three months. In order to return to the program, an exam transcript of scores must be provided reflecting all attempts and the passing score. The program can then offer a PGY-III contract. If the resident has not passed the exam within the three month deadline, the program must seek approval from the Designated Institutional Official (DIO) to continue to hold the position.

RESIDENTS WITH DO DEGREE

- I. All DO applicants to residency programs at SIU School of Medicine are required to pass either Parts I and II (CE and PE) of the Comprehensive Osteopathic Medical Licensing Examination-USA (COMLEX) or Steps I and II of the United States Medical Licensing Exam (USMLE) before beginning a PGY-1 position.
- II. During the PGY-I or PGY-II year, all DO residents in SIU School of Medicine training programs must pass Part III of the COMLEX or Step 3 of the USMLE. Progression to the PGY-III year will not be allowed until the exam has been passed. All exam attempts must be recorded in New Innovations.

If a resident's contract ends due to not meeting this requirement, the program can choose to hold a position for the resident for up to three months. In order to return to the program, an exam transcript of scores must be provided reflecting all attempts and the passing score. The program can then offer a PGY-III contract. If the resident has not passed the exam within the three month deadline, the program must seek approval from the Designated Institutional Official (DIO) to continue to hold the position.

TRANSFERRING RESIDENTS

- I. Residents transferring from another program to a residency or fellowship program at SIU School of Medicine at the PGY-III level or higher are required to have passed USMLE Step III or Part III of the COMLEX prior to starting their position. A transcript of all exam attempts must be provided.

FELLOWS

- I. All applicants to fellowship programs at SIU School of Medicine are required to pass USMLE Step III or Part III of the COMLEX before beginning a fellowship position.



2021-2022 RESIDENT FACT SHEET (for Springfield Programs)

2021-2022 STIPENDS:

PGY I	\$58,026	PGY V	\$64,300
PGY II	\$60,100	PGY VI	\$65,193
PGY III	\$61,000	PGY VII	\$67,690
PGY IV	\$62,200		

PAID LEAVE (Vacation / Sick / Bereavement / Education)

All trainees (residents and fellows) may be permitted up to (maximum number dependent on Board requirements):

- 3 weeks of vacation
- 2 weeks of sick leave
- 1 week of educational leave
- 3 calendar days of bereavement leave

CHILD CARE LEAVE

Trainees are permitted to take up to twelve (12) weeks of leave without compensation in accordance with the Family and Medical Leave Act of 1993, after the birth of a child or the placement of a child with the resident/fellow for adoption or foster care. Contact the Office of Graduate Medical Information for details.

WORK HOURS

Each program will have work hours optimal to the care of patients and in compliance with the general and special requirements of the ACGME.

PARKING / SLEEP ROOMS/ MEALS

- Free parking
- Secured sleeping rooms are furnished for all trainees who are on in-house call and nap rooms are available to residents/fellows at both hospitals.
- Trainees have access to food services twenty-four hours per day at both hospitals.

BENEFITS*

Residents and fellows are employed by either Memorial Medical Center or HSHS St. John's Hospital, and are provided benefits through their employing hospital.

- Health insurance is provided at a minimal charge; an optional family plan can be purchased.
- Dental insurance is provided for the resident/fellow and family for a small fee.
- A Vision Plan is offered.
- Group Term Life insurance is provided at no cost; additional coverage may be purchased.
- Long Term Disability insurance is provided at no cost.
- 403(b) Retirement Plan is offered.


PROFESSIONAL LIABILITY INSURANCE

Residents and fellows are provided professional liability coverage by the hospitals. It will provide legal defense and protection against awards from claims reported or filed during and after the completion of the training program if the alleged acts or omissions of the trainee were within the scope of the program, in accordance with the affiliated hospitals' self-insured trust and liability policy.

*Programs may provide additional varying benefits, reimbursements, or incentives.

	Name of Policy: RESIDENT ELIGIBILITY AND EMPLOYMENT AUTHORIZATION	
	Last Approval Date: October 18, 2019	Effective Date: October 18, 2019

Southern Illinois University School of Medicine does not discriminate on the basis of race, religion, national origin, citizenship, gender, sexual orientation, marital status, age, disability or other factors prohibited by law in its Residency Programs. Eligible applicants must be graduates of medical schools accredited by the LCME, graduates of colleges of osteopathic medicine accredited by the AOA, or medical school graduates holding a valid certificate from the ECFMG. Additionally, applicants for advanced GME positions or fellowships must meet all ACGME requirements for pre-requisite GME training. Employment in an affiliated hospital is a required component of the residency program and, thus, all applicants accepted for admission into the Residency Programs will be required by law to provide verification of employment authorization in the United States at the commencement of employment as a resident with an affiliated hospital. The School of Medicine and its affiliated hospitals do not, as a matter of policy or practice, sponsor residents for H visas or benefits, except under extraordinary circumstances that would provide an appreciable benefit to the affiliated hospitals, as determined by the affiliated hospitals and the Office of Graduate Medical Education.

	Name of Policy: MEDICAL LICENSE POLICY FOR RESIDENTS	
	Last Approval Date: September 16, 2016	Effective Date: September 16, 2016

All residents at SIU training programs are required to obtain and maintain an active medical license. It is the resident's responsibility to maintain an active license. PGY-1 and PGY-2 residents must obtain a temporary medical license and are required to apply for the license in a timely fashion once agreeing to start at SIU. Residents cannot practice until they have been issued an active license.

The Office of Residency Affairs will provide the affiliated hospitals with a printout from the Illinois Department of Financial and Professional Regulations (IDFPR) online verification page when a license is issued. The Office of Residency Affairs will provide a license, printed from the IDFPR online portal, to the respective training program and one will be placed in the resident's institutional file.

If a resident or fellow separates from their program for any reason prior to its conclusion, the Office of Residency Affairs will notify IDFPR in accordance with state law. Separation is defined by IDFPR as 1) any interruption exceeding 45 days, whether continuous or aggregate, in any 365 day period with the exception of maternity or paternity leave; 2) non-renewal of a person's contract.

Residents at level PGY-3 or above may either obtain a temporary medical license or a permanent license. Once a resident obtains a permanent license, the resident is required to also obtain state and federal DEA numbers. Programs will notify the Office of Residency Affairs if a resident moves from a temporary to a permanent license.

Although many individuals at the program level and the Office of Residency Affairs assist residents in remembering that a license will expire, it is ultimately the residents' responsibility to maintain an active license. Residents who fail to do so cannot practice and will be immediately suspended without pay until a license is reissued.


FOR NEUROLOGY BOARDS:

<https://www.abpn.com/faqs/>

What are the Board's Requirements for Certification?

To be Board-certified in psychiatry, neurology or neurology with special qualification in child neurology, a candidate must:

1. Be a graduate of an accredited medical school in the United States or Canada or of an international medical school listed by the [World Health Organization](#).
2. Complete all training in either a U.S. program accredited by the ACGME or approved by the ABPN or in a Canadian program accredited by the Royal College of Physicians and Surgeons of Canada as well as meet the other requirements specified in the reciprocity agreement.
3. Have an active, full, unrestricted medical license* in the U.S. or Canada as defined in the separate [General Information and Board Policies Manual](#) on this website. Applicants are required to update their active, full, unrestricted medical licenses in their [ABPN Physician Folios](#) account.
4. Have satisfactorily completed the Board's specialized training requirements described on this website.
5. Apply online and submit an application through [ABPN Physician Folios](#). Required documents should be emailed, mailed or faxed to 847.229.6600 separately.

	Name of Policy: Away Rotations/Elective and Required	
	Last Approval Date: June 18, 2021	Effective Date: July 1, 2021

Away rotations at SIU School of Medicine are a time limited experience that must meet unique educational goals which are not available at the local sites established by the training program. A program's training sites are approved by the employing hospitals as an integral and recurring component of the program to meet accreditation requirements, and an agreement or contract has been established outlining the terms of this affiliation.

The requests outlined in this policy fall outside of the established training sites and must be submitted by the Program Director, according to the following guidelines.

1. The Program Director must approve any away rotation (required or elective) and submit a written request to the Office of Graduate Medical Education (OGME), which will then be brought before the GMEC for review. This request must contain all of the required components outlined in this policy. Once the request packet is complete, it must be submitted to OGME as follows:
 - a. Springfield Programs: *minimum of four months prior* to the start date of the rotation.
 - b. Affiliate Programs: *minimum of three months prior* to the start date of the rotation.
2. Throughout the course of the training period outlined in the Resident Agreement, a resident employed by a Springfield hospital is limited to one month total of away rotation training. The maximum number of months for away rotations for the affiliate programs is at the discretion of the program and employing hospital.
3. The minimum length of any away rotation is two weeks. If a resident would like to visit a site less than two weeks, it will need to be done as an observership.
4. The GMEC will review the request. If the committee approves the educational value of the rotation, it will designate the rotation as elective or required. An OGME representative will notify the program of the committee's decision after the meeting. There are additional requirements for Springfield programs, addressed under **SPRINGFIELD ONLY**.
5. Residents participating in away rotations should consult with the HR department of their employing hospital before departure to verify health insurance coverage. Residents are responsible for obtaining verification documentation from HR if the receiving institution requires any (i.e. proof of background check, vaccination records, training verification, etc.).
6. Resident rotations outside of the United States must comply with the International Travel for Away Rotations Policy.

REQUIRED COMPONENTS FOR ALL AWAY ROTATION REQUESTS

1. A letter from the Program Director to the GMEC Chair, which includes the following:
 - a. Indicates whether the program considers the request an *elective* or *required* away rotation, as defined below:
 - i. *Elective Away Rotation*: The time limited experience is valuable to the resident, but is **not essential** to meet RRC requirements. In addition, it is not available at the local sites established by the training program.
 - ii. *Required Away Rotation*: The time limited experience **is essential** to meet RRC Requirements and is not available at the local sites established by the training

program. **If the request is for a required rotation, the PD letter must include why the rotation is necessary to meet RRC requirements.**

- b. Dates of rotation.
 - c. Location of experience, including the address of the facility or facilities where the training will take place.
 - d. Description of the rotation, including a rationale for why the educational goals cannot be obtained in the core training program.
 - e. Verification that the experience provides sufficient clinical credit so that additional time to complete the program will not be required.
 - f. Verification that copies of all required program and institutional affiliation agreements have been provided to OGME with the request packet. The resident is responsible for obtaining drafts of all required agreements *prior* to OGME submission, and must verify the requirements with the receiving institution. If these are not provided in their entirety, the rotation is at risk of being cancelled despite GMEC approval. If an institutional agreement is required by the employing hospital or the receiving institution, it must indemnify the employing hospital, unless waived by the employing hospital. There is a SIUSOM institutional affiliation agreement template that can be implemented if the receiving institution will accept it.
 - g. Minimally, the programs must have a Program Letter of Agreement that verifies appropriate supervision.
2. Goals and objectives: Must be included with the PLA.
 3. A CV from the site supervisor/local director (SIU Faculty only exception).
 4. The program director should be present at the GMEC meeting at which the rotation is presented.

SPRINGFIELD ONLY

After GMEC approves and designates the request as an elective or required rotation, the request must then be reviewed by the Institutional Residency Affairs Coordinating Committee (IRACC)*. If IRACC approves the rotation request, the subsequent information and procedures will apply. For Springfield residents, an Institutional Agreement that indemnifies the employing hospital must be in place for all Away Rotations, whether Elective or Required.

1. Elective Away Rotations:
 - a. The employing hospital will continue the resident's stipend and fringe benefits while on the elective rotation, **not** including malpractice insurance.
 - b. Malpractice Insurance: The resident, the resident's program, or the receiving institution must provide malpractice insurance that meets the receiving institution's minimum requirements for the rotation and provide evidence of such coverage to OGME a minimum of 30 days prior to the start date of the rotation.
2. Required Away Rotations:
 - a. The employing hospital will continue the resident's stipend and fringe benefits while on the required rotation.
 - b. Malpractice Insurance:
 - i. The program director and resident should make every effort to obtain malpractice insurance through the receiving institution. If secured in this manner, evidence of coverage must be provided to the OGME and the Institutional Agreement must indemnify the employing hospital.
 - ii. If the receiving institution is unwilling or unable to provide malpractice insurance, the employing hospital will provide malpractice insurance for the

resident while on the required rotation. A certificate of insurance will be generated for the receiving institution.

*A finite amount of resources are available for support of resident away elective rotations. For priority consideration, all requests for away elective rotations in the upcoming academic year should be submitted by April 1st. If the number of requests that receive educational approval by GMEC exceeds the available funding, requests will be prioritized according to the following criteria.

Decisions regarding prioritization of request will be made by GMEC prior to IRACC consideration.

Higher preference will be given to rotations with:

- a. Unique content/experience that is not available locally.
- b. Clinical/academic/scholarly experiences that are not locally available and that are instrumental in earning an advanced degree (i.e. MPH, MPHE, etc.)
- c. A unique research experience that is not available locally.

Lower priority will be given to:

- a. Rotations for which medical mission is the primary goal.
- b. "Audition" electives where one of the primary aims is to improve the resident's competitiveness for a fellowship position.

If an elective request is approved educationally by GMEC, and funds are not available to provide stipend and benefits, the resident is at liberty to pursue the elective utilizing vacation and educational leave.