The University of Oklahoma
College of Medicine

Area: Graduate Medical Education **Number: 732**

Title: Compensation and Benefits

POLICY

1) This policy is current as of the date it was written. Information about University benefits and leave may be obtained from the University's HR office.

Salary (Stipend)
The GMEC will review annually and provide recommendations to the Sponsoring Institution regarding resident salary (stipends), benefits, and funding for resident positions.

A salary will be paid to each resident on a biweekly basis. Salary levels are based upon the resident's *functional level of postgraduate training* in the specific program in which he or she is currently training. PGY levels attained in previous training programs (if applicable) are not relevant to determining current salary level. Salaries are adjusted periodically based on recommendations as reviewed and approved by the GMEC and upon approval by the major affiliated institutions approved by the ACGME for residency training that provide funding for resident salaries. Salaries are distributed by the central payroll office of the University of Oklahoma Health Sciences Center (OUHSC) and are distributed via electronic direct deposit. Additional information about salary distribution will be provided to the residents by the Residency Program.

Benefits
In addition to the biweekly salary, the University provides employee benefits including medical, basic dental, vision, life insurance, and long-term disability. Full details on employee benefits can be found at http://hr.ou.edu. Health insurance for residents/fellows and their eligible dependents (if any), and disability insurance for residents/fellows are provided on the first day of employment.

Medical coverage is available in a variety of options. The specific tier, and the medical coverage option selected by the resident will determine the additional cost (if any) which must be paid by the resident. Other resident-paid options include an increase over the basic dental, vision and life insurance coverage, and dependent health benefits coverage. Residents are also eligible to participate in the University's voluntary retirement plan at their own expense.

An OUHSC benefits coordinator may be reached by phone at (405) 271-2180 or in person at the Employee Service Center, 865 Research Park, Suite 270.

Professional Liability Insurance
The University provides professional liability insurance for residents and fellows through Academic Partners Insurance Company (APIC), a captive insurance program covering University and OU Health faculty physicians, residents, and students for professional liability claims and

lawsuits, including associated legal expenses. Residents' coverage is limited to assigned educational experiences related to providing professional clinical services through participation in a residency or fellowship program. The coverage for alleged acts or omissions that occurred during the residency or fellowship program are covered, even if the claim or lawsuit is not brought until after the residency or fellowship program is completed. The APIC insurance does NOT cover any other work outside of that assigned by the University.

The University will provide official documentation of the details of the resident or fellow's professional liability coverage before the start date of the residency or fellowship appointment. Written advanced notice of any substantial change to the details of professional liability coverage will be provided to all residents and fellows.

The following guidelines pertain to residents regarding their professional liability insurance coverage:

- Timely completion of the University's mandatory annual risk management training is required by the College of Medicine for all physicians, APPs, and residents.
- All residents are automatically enrolled in professional liability coverage through APIC, which provides Claims Made Malpractice Coverage, with an Embedded Tail which is activated at the date patient care is provided that may lead to a claim or suit.
- Residents who are involved in an adverse outcome or any situation where a claim by a patient can be anticipated against any medical provider, receive communication from an investigator or outside legal counsel, or who have been notified of legal action, must immediately notify OU Health Office of Patient Safety and Risk Management at 405-271-1800.
- Professional activities that occur outside the scope of the residency training program including most external moonlighting activities, are not covered by the residency program policy. Residents engaging in any such professional activities must seek written approval from their Program Director and must apply for and purchase, at their own expense, additional professional liability insurance covering these activities. This coverage cannot be supplied by APIC. The policy on resident moonlighting is listed on the College of Medicine website at: https://hippocrates.ouhsc.edu/policy/pdf/6894f445e5686.pdf

Questions regarding coverage, and reports of adverse events, can be addressed by OU Health Office of Patient Safety and Risk Management at 405-271-1800. A Patient Safety Risk Manage is available 24/7.

Time Away from Training

Time away from training, consistent with ACGME Institutional Requirements, includes annual leave (vacation), medical (sick), parental, and caregiver leave, and other leaves of absence for any reason, including but not limited to educational leave, jury duty, bereavement, personal legal matters, parent/teacher conferences, or other absences from training granted in accordance with federal and state laws and institutional program policies. Each program may supplement this policy with written procedures regarding application for and use of leave. The Graduate Medical Education Committee will, at least annually, oversee program implementation of policies for vacation and leaves of absence including medical (sick), parental, and caregiver leaves of absence and, in collaboration with programs, will ensure the availability of resources to support resident well-being and education by minimizing impact to clinical assignments resulting from leaves of absence. Programs will ensure that all applicants and residents are informed of program and institutional vacation and leave of absence policies as well as the impact of vacation, leave of

absence, and extended leave of absence on their ability to satisfy requirements for program completion and their eligibility to participate in examinations by the relevant certifying board.

Annual Leave (Vacation)
Each resident earns a maximum of 15 days (M-F)/120 hours of paid annual leave per year which may be used for vacation, employment interviews, bereavement, or other activities as determined by the resident or not specifically covered by other leave benefits. Training regulations imposed by the national certifying boards in some specialties may limit the total amount of leave which may be taken by a resident to a lesser amount which, in such cases may require an extension in training. Earned but unused annual leave may not be carried over from one academic year to another and may not be used to shorten the length of training. No additional payment will be made for unused annual leave upon completion of residency training or at any other time. The annual leave request should be submitted to the Program Director at least 120 days prior to the requested date. Programs may deny requests submitted within 90 days of the requested date.

There is a legitimate need for Program Directors to limit the number of residents who are absent at any one time and to otherwise assure continuity of quality health care for the patients on their service. Annual leave requests shall be honored according to the policy established by each residency program.

Time off for the purpose of employment interviews must be accounted for as annual leave, up to the amount of benefit time earned.

Time off for interviews for fellowships or other additional training must be accounted for as annual leave or educational leave, at the discretion of the Program Director, up to the amount of benefit time earned. **Annual leave must be used if a fellowship interview occurs during a VA rotation.**

In addition to annual leave (vacation), residents may request approval from the Program Director for time away from the program for individual circumstances. In all circumstances, time away from the program may require an extension of training based on the requirements of the national certifying board. Circumstances may include:

1. Jury Duty - Residents summoned for jury duty must provide the program with a copy of the summons and at the completion of jury duty, a statement from the Court Clerk for each day they are required to be present. Residents will be excused from clinical duties. Approved days will be counted as time away from the program; however, they will not be counted against annual leave or medical (sick), parental, and caregiver leave.
2. Bereavement - Residents who wish to take time away for bereavement may use annual leave or leave without pay after annual leave is exhausted. Residents may use sick leave when the bereaved is a family member who would meet criteria according to FMLA requirements.
3. Residents taking time away for personal legal matters, parent/teacher conferences, or other absences may use annual leave or leave without pay after annual leave is exhausted.

NOTE: Resident annual leave does not accrue or roll over from one academic year to the next. For residents who have followed the above policy regarding the timely submission of annual leave requests, the program will make every effort to see that each resident receives their annual leave benefit for the current academic year.

Medical (Sick), Parental, and Caregiver Leave of Absence

Each resident earns a maximum of 15 days (M-F)/120 hours of paid medical (sick), parental, and caregiver leave of absence per year, which may be used as described below. A physician's statement regarding illness or injury and "fitness for duty" may be required for absences for medical (sick), parental, and caregiver leave of absence. Unused medical (sick), parental, and caregiver leave of absence will not be carried forward to the next academic year. No additional payment will be made for unused medical (sick), parental, and caregiver leave of absence upon completion of residency training or at any other time.

1. Medical (Sick) Leave of Absence is leave taken by the resident related to their own illness, injury, treatment, or prevention. The annual allotment of medical (sick) leave of absence may be taken intermittently.
2. Parental Leave of Absence is leave taken by the resident related to maternity, paternity, adoption, and foster care. Parental Leave of Absence may not be taken intermittently.
3. Caregiver Leave of Absence is leave taken by the resident to care for their spouse, partner, child, or parent. Caregiver Leave of Absence may be taken intermittently.

Beyond the 15 days of paid medical (sick), parental, and caregiver leave of absence, additional options may be available including:

1. Leave of absence with pay for medical (sick), parental, and caregiver leave of absence for qualifying reasons.
    a. Consistent with ACGME Institutional Requirements, residents who anticipate or experience a situation requiring medical (sick), parental, and caregiver leave for qualifying reasons may request leave as follows:

        1. Once during training in the program, residents will be provided with six weeks of medical (sick), parental, and caregiver leave of absence for qualifying reasons consistent with applicable laws.
            a. Medical (sick), parental, and caregiver leave is available starting the first day the resident is required to report.
            b. During the first six weeks of the first approved medical (sick), parental, and caregiver leave of absence residents will be provided with the equivalent of 100 percent of their salary.
            c. Health and disability insurance availability continues for residents and their eligible dependents during any approved medical (sick), parental, and caregiver leave of absence.

        2. Residents requesting medical (sick), parental, and caregiver paid leave of absence for qualifying reasons must submit a request form including projected beginning and end dates for the leave and the qualifying reason. The request must be submitted to the Program Director. The program director must provide accurate information regarding the impact of an extended leave of absence upon the criteria for satisfactory completion of the program and upon a resident's or fellow's eligibility to participate in examinations by the relevant certifying boards which should be documented on the request form. The resident must notify the program of changes to the request should they arise.
            a. Qualifying reasons for medical (sick), parental, and caregiver leave include:

i. Medical: A serious health condition that makes the resident unable to perform the functions of their job.
ii. Parental: The birth of a child or placement with the resident of a child for adoption or foster care and to bond with the child. Caregiver: To care for a spouse, child, stepchild, or parent with a serious health condition. Other remote family members, including in-laws are not included.

2. Leave of absence without pay
    a. Residents may be approved for leave of absence without pay contingent upon recommendation by the Program Director and approval by the GME Office. The University complies with the Family Medical Leave Act. Requests for extended leave of absence for FMLA qualifying reasons may require documentation from a healthcare provider and should be submitted through the Leave Administrator.
        1. During the year in which a resident requests medical (sick), parental, and caregiver leave, all available annual medical (sick), parental, and caregiver leave (up to 3 weeks) and annual (vacation) leave (up to 3 weeks) will be applied to account for the requested paid time off. If all six weeks are used during the episode of medical, parental, and caregiver leave, one additional week of annual (vacation) leave will be provided for use by the resident for vacation.
            a. Residents with a full leave balance will generally utilize leave as follows:
                i. 3 weeks medical (sick), parental, and caregiver leave
                ii. 3 weeks annual (vacation) leave
                iii. 1 additional week paid annual (vacation) leave.
            b. Residents with a partial or no leave balance will generally utilize leave as follows:
                i. Up to 3 weeks medical (sick), parental, and caregiver leave
                ii. Up to 3 weeks annual (vacation) leave
                iii. Up to 6 additional weeks paid medical (sick), parental, and caregiver leave
            c. Any paid time off reserved for use as annual (vacation) is to be available during the appointment year(s) in which the leave is taken and may not be carried over into subsequent years of the program.
            d. The process for submitting and approving requests for additional medical (sick), parental, and caregiver leave includes:
                i. Complete the Medical (sick), Parental, and Caregiver leave of absence request form.
                ii. Submit the request to the Program Director for review and approval.
                iii. For instances of foreseeable leave of absence, residents must submit requests at least 30 days in advance of the beginning date.
                iv. Meet with the program director to review
                    1. Past, current, and projected leave utilization including annual (vacation) leave, medical (sick), parental, and caregiver leave, conference leave, jury duty leaves, bereavement leave, and all other absences from the program.
                    2. Current board certification requirements regarding allowable time away from training including impact of leave on eligibility for specialty and subspecialty

certification.

3. Requirements for satisfactory completion of the program including competency expectations including fulfillment of board specialty and subspecialty requirements, ACMGE requirements, and institutional and program requirements.
4. Projected extensions of training that may occur as a result of time away from the program.

v. Residents must meet all specialty board, program and competency requirements but may, solely at their own discretion, elect to use less than the allowable medical (sick), parental, and caregiver leave in lieu of extending training.

2. Requests for additional leave beyond the first six weeks or for subsequent occurrences of medical (sick), parental, and caregiver leave must be submitted to the Program Director. Residents must use annual leave allotments, FMLA (if eligible), and unpaid leave according to program and university policies.

NOTE: A request for medical (sick), parental, and caregiver leave of absence may be denied if it is determined that it was not submitted in good faith.

Off-Cycle Residents

Residents starting off-cycle will receive a pro-rated amount of paid annual and medical (sick), parental, and caregiver leave during their first and last year of training. For year one of training an accrual rate of 10 hours per month for annual leave and 10 hours per month for medical (sick), parental, and caregiver leave of absence will be applied based upon the 1st day of the month that the resident begins training through the remainder of the academic year which ends on June 30th. For the last year of training an accrual rate of 10 hours per month for annual leave and 10 hours per month for medical (sick), parental, and caregiver leave of absence will be applied beginning on July 1st and will continue accruing through the last day of the month that training is completed. The maximum allowed annual leave and medical (sick), parental, and caregiver leave of absence is 15 days/120 hours for each per 12-month period. Programs will submit the Leave Adjustment Form with the pro-rated hours to Payroll Services for the first and last year of training.

Extended Leaves of Absence

Leaves of absence generally and broadly refer to resident requests to take leave from work to manage personal and family needs, personal or family illness, pregnancy, military service, etc. Residents MUST follow the procedure/guidelines of their training program in requesting and scheduling leaves of absence. Failure to follow program policies may result in the request being denied. Each resident must submit a leave request in writing to their Program Director and to the Leave Administrator for FMLA leave requests. Program Directors, or their designees, have the final authority to approve leave of absence requests. The total time allowed away from a GME program in any given year or for the duration of the GME program will be determined by the requirements of the applicable specialty board and will be tracked by each program. In general, extended leaves of absence of 6 months or more in an academic year will result in termination of residency or, in certain situations, repeat of prior completed training. Extension of training is at the discretion of the Program Director and subject to availability of funding and space in the program. Residents are encouraged to refer to the specialty board for specific details regarding extended leaves of absence.

If the leave of absence is for **personal reasons**, as determined by prior approval of the GME Office, and not for medical reasons and the resident has accrued annual leave, the leave of absence

will be paid to the extent of the accrued annual leave. *Once the annual leave is exhausted, the remainder of the leave of absence will be unpaid*. Any leave of absence without pay must be approved by the Program Director and the DIO. During leave without pay, some benefits, such as health insurance, may not be paid by the University.

Administrative Leave
Administrative leave may be awarded for an emergency as defined by the GME Office, and may be with or without pay, depending upon the circumstances, as determined by the GME Office. In the event of inclement weather, residents are expected to present to work to provide direct patient care in hospitals and clinics that remain open. Should a clinic or service close due to the weather, the Program Director may elect to allow the resident to remain at home or may reassign the resident to another location.

Holiday Leave
Residents do not receive credit or additional pay for holiday time during clinical rotations. Since hospitals and some clinics do not observe a holiday schedule for patient care, residents are expected to follow their assigned schedule. If annual leave time is scheduled during a holiday period, then the holiday must be scheduled as annual leave. If the resident is assigned to a clinic that observes a holiday schedule, then the resident need not count that time toward his/her annual leave time. Residents should check with their Program Director's office for further clarification of holiday leave time.

Educational Leave
Educational leave is limited to the time of participation in a professional meeting related to the resident's area of specialty or may be used for the time required to interview for fellowships or other additional training. Residents should be aware that some specialty boards count educational leave as time away from training and may require an extension of their training dates.

Interviews for fellowships or other additional training must be accounted for as annual leave or educational leave, at the discretion of the program director, up to the amount of benefit time earned. Residents may request up to five days of educational leave each year. Unused educational leave may not be carried over to subsequent years of training. The request should be submitted to the program director at least 120 days prior to the requested leave date. No requests will be approved within 90 days of the requested date. The meeting can be no more than one week in duration and must be within the USA. Approval is granted solely at the discretion of the Program Director, who also determines the travel reimbursement policy for the individual residency program.

International travel for educational leave is subject to the requirements in GME policy 724 regarding resident off-campus experiences. Of special note in GME policy 724 are instructions for visa holders seeking off-campus or international educational experiences, instructions for all residents regarding university approval of sites for educational experiences outside the United States, and rules for booking travel and applying for travel reimbursement.

Because of the tax implications of direct reimbursement to residents from outside entities being viewed by the IRS as earned income, travel reimbursement must be processed by following current OU travel procedures and carried out by their department. Reimbursement will be based only on those items supported by actual receipts and in accordance with current departmental and University travel policy. **Residents must consult their Program Director's office well in advance of attending any such event in order to obtain guidance on these matters.**

Family Leave (FMLA)
Federal law mandates that, **after one year of University employment**, qualified employees may take up to 12 weeks of leave (available paid leave and then unpaid leave) during any 12-month period for (1) the birth and care of a newborn child; (2) the placement of a child for adoption or foster care and to care for the newly place child; (3) the care of a spouse, parent, or child or stepchild with a serious health condition; and (4) a serious health condition; and 5) certain qualifying exigencies arising out of a covered military member's active duty status, or notification of an impending call or order to active duty status, in support of a contingency operation. The most up to date information can be found on the Human Resources webpage at https://hr.ou.edu/Employees/Holidays-Time-Off-Leave/Family-Medical-Leave-FMLA.

Residents are required to use all available annual paid medical (sick), parental, and caregiver leave as well as all available annual (vacation) leave. Subsequent time off, outside of the time granted once during residency for medical (sick), parental, and caregiver leave consistent with ACGME Institutional Requirements, will be unpaid. The University will continue to pay the cost of the University-provided insurance coverage for residents for the 12 weeks of FMLA protected leave. The residents will continue to be responsible for payment of premiums for any elective coverage. It is the resident's responsibility to contact Human Resources to determine premium payment requirements.

The following guidelines pertain to resident requests for FMLA:

- **Maternity/Paternity Leave**
  Available sick leave, annual leave time, or leave without pay may be used in accordance with the Family Leave Act guidelines as described above. Specific questions should be addressed to the Program Director.

- **Requests for Family Leave**
  Residency program schedule changes require considerable planning to assure that patient care and residency colleagues' education are not impacted negatively. Employees must provide 30 days advance notice of the need to take FMLA leave when the need is foreseeable. Therefore, requests for family leave should be made in writing to the Program Director as soon as the need is known. When 30 days' notice is not possible, the employee must provide notice as soon as practicable and generally, must comply with normal call-in and other time and attendance procedures. The University also requires both periodic reports of the employee's status during the course of the leave and his or her projected date of return to work.

Effect of FMLA or Extended Leave of Absence on Specialty Board Requirements
Depending on specialty board requirements, periods of leave may extend the length of the residency training needed to meet the specialty board requirements. Information regarding eligibility for specialty board examinations and requirements is available through your program director and each individual specialty board. This information should be carefully reviewed and discussed with your program director prior to requesting leave.

Resources for Counseling and Psychological Support Services
Counseling and support services are available for a variety of resident issues including, but not limited to, the following: study and test-taking skills, reducing test/evaluation anxiety, depression, stress management, difficulty sleeping, and other counseling and psychological issues.

The Employee Assistance Program provides assistance for employees in dealing with personal problems including alcohol and drug abuse or dependency, mental or emotional disturbance, or other conditions that may adversely affect their job performance. The Employee Assistance Program can

be contacted at 1-800-327-5043. Residents may also use Student Counseling Services located in the David L. Boren Student Union on the 3rd. floor, Room 300, telephone 271-7336. Services are available 8:00 a.m. to 5:00 p.m. Monday-Friday. The Physician Wellness Program through the Oklahoma County Medical Society provides confidential counseling sessions with a community psychologist. Appointments can be made by calling 405-340-4321.

Guidelines for impaired physicians are covered in the *Resident Handbook* section on the Physician Recovery Program in place through the Oklahoma State Medical Association Oklahoma Health Professionals Program, Inc. In addition, the University of Oklahoma Staff Handbook includes a policy on Prevention of Alcohol Abuse and Drug Use on Campus and in the Workplace. The complete policy is also available upon request from the Human Resources Office. The HR office can be reached by phone at (405) 271-2180. The OU Staff Handbook policy can be accessed online at: https://apps.hr.ou.edu/staffhandbook.

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