

P/P TITLE: Time Away from Practice for Physicians	P/P #: 200.601	PAGE: 1 of 3	ORIGINAL DATE: 10/12/2013	REVISED DATE: 07/13/2015
REVIEWED BY: The Executive Committee of C.H. Wilkinson Physician Network Board of Directors and Human Resources			APPROVED BY: Board of Directors	

Purpose

The purpose of this policy is to state the policy on time away from practice for physicians.

Definitions

- Scheduled workday** is defined as a day on which the practice is open for the purpose of treating patients.
- Time worked** in a scheduled workday is defined as time spent in the practice during a scheduled workday for the primary purpose of physically treating patients. Duties also include documenting the treatment to the patient's chart and following up on other treatment procedures (i.e. reviewing and communicating lab results, completing prescription requests, etc.). Time worked will also include meetings and court appearances/depositions which are required by CHRISTUS Physician Group as part of the business relationship. A day spent in the practice for purposes other than physically treating patients (i.e. for documentation to patient charts only) will not be considered time worked unless **prior** written approval is obtained from the Regional Director or Chief Operating Officer.
- Time Away from Practice** ("TAP") is defined as a regularly scheduled workday in which the "time worked in a scheduled workday" definition is not satisfied.
- Base compensation** is defined as a base salary for which a physician is paid on a regular basis and which is not solely dependent upon the physician's financial performance.
- Pure productivity compensation** is defined as the salary for which the physician is paid based solely upon the physician's financial performance.
- Part-Time** is defined as a physician working 20 or more hours per week, but less than 36 hours per week, in a clinical or teaching setting.
- Full-Time** is defined as a physician working 36 or more hours per week in a clinical or teaching setting.

REVIEW PERIOD:	REVIEW DATES:					
<input type="checkbox"/> Annual	01/09/2014	06/12/2014	07/13/2015			
<input type="checkbox"/> Biennial						
<input checked="" type="checkbox"/> Other:						

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Procedures

A. Procedures for Time Worked:

1. **Physicians under the base compensation model** will be paid for a full day when work is performed on a regularly scheduled workday according to the definitions stated above. For any day which is not deemed as being a regularly scheduled work day (i.e. weekends, holidays), time spent on call or making hospital/nursing home rounds will not be considered as time worked for purposes of compensation. EXCEPTION: In the rare circumstance where total time spent in the clinic, hospital, or nursing home exceeds 4 (four) hours on a weekend or holiday, then that day will be deemed a regularly scheduled workday. Any exception must be documented and approved by the local practice manager/administrator and then submitted to the Chief Operating Officer of CPG for final approval.
2. **Physicians under the pure productivity compensation model** are excluded from the time worked provision and will be paid their regular draw in accordance with the employment agreement regardless of whether or not they worked as scheduled. However, each physician is expected to be at work as scheduled.

B. Time Away from Practice Procedures

All physicians are expected to fulfill patient and organizational needs by being at work as scheduled. It is recognized, however, that physicians will need to take time off from work periodically. TAP includes, but is not limited to vacation, holidays, continuing medical education and sick days. For physicians starting after the beginning of the fiscal year (July 1), the number of TAP days available will be prorated based on the remaining days of the fiscal year, rounding to the nearest whole day. TAP will follow Human Resources Policy for bereavement and Jury Duty which can be found on the CHRISTUS intranet. Part-time physicians will likewise have their TAP days prorated based on their full-time equivalent (FTE), with the number of days also being rounded to the nearest whole day. Physicians must take TAP in increments of at least one (1) day. TAP days cannot be carried over from one fiscal year to the next, nor is it possible to "cash-out" any unused days whether due to the termination of employment or the end of the fiscal year. For the purpose of determining and administering TAP, the following procedures are to be followed:

Years of Service	Days per Fiscal Year
0-3	28
4 +	32

1. **Requests for TAP for vacation, anticipated sick time, or other personal leave** must be submitted to the practice manager/Regional Director for approval at least thirty days in advance. Exceptions to the advance notice period may be made in emergency situations. It is the physician's responsibility to insure that the appropriate coverage for call has been obtained for the period of the absence. No more than 50% of the practice partners should be off at any

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one time. The need for locum tenens is to be avoided whenever possible. TAP will be made available according to the applicable guidelines as mentioned in this policy.

2. **Emergency absences** which are sudden and unanticipated must be communicated to the practice manager/Regional Director as soon as possible in order for patients to be rescheduled or redirected to another physician in a timely manner. If the physician is absent due to illness/injury for three or more days, the physician may be required to submit a return to work statement signed by a treating physician prior to returning to work.
3. **Holidays** will be considered TAP unless the physician satisfies the “time worked” definition. TAP for holidays do not require a prior request. For purposes of this policy, holidays shall include:
 - a. New Years’ Day
 - b. Good Friday
 - c. Memorial Day
 - d. Independence Day
 - e. Labor Day
 - f. Thanksgiving Day
 - g. Day after Thanksgiving
 - h. Christmas Day
4. **The maximum amount of TAP during any 12 month period** should not exceed the maximum amount stated in the chart above. Physicians under the pure productivity compensation model are subject to the same time off limits as physicians under the base salary compensation model of the same classification (full time or part time). Excessive absenteeism may result in disciplinary action up to and including termination for cause. Excessive absenteeism due to illness will be addressed on an individual basis.
5. **This policy addresses TAP for** holidays, vacation, illness/injury, and other personal matters. It does not necessarily cover all possible circumstances for which an absence may be granted. Management will grant additional leave governed by the Family and Medical Leave Act or other applicable federal and state laws as appropriate.
6. **Time Away from Practice days will be prorated during any notice of termination** periods of the physicians Employment Agreement. Prorated days will be given at the sole discretion of the employer after review of the facts and circumstances for termination.
7. **All Academic Faculty Physicians** will receive 5 additional CME days to be used for their academic program preparations and participation requirements. Program Director, Assistant Program Director and Medical Directors of the program will receive an additional 2 days for academic leadership CME. Physicians must document that the additional days away from practice (5 CME days for academic faculty or 7 CME days for faculty academic leadership) are used for an approved CME I category program approved by the American Academy of Family Medicine (AAFM).

Exceptions to any of the procedures listed above must be approved by the Chief Executive Officer and/or Chief Administrative Officer.