I. Scope and Purposes

This Policy governs all physicians, psychologists, and dentists in the School of Medicine involved in clinical care activities (Clinicians) and the revenue generated by such Clinicians. Every Clinician has made a written commitment to comply with the Rules of Practice for the Faculty Physician (Faculty Handbook 2.103, med.stanford.edu/academicaffairs/handbook/2.103.doc), and this policy updates and replaces these Rules. The clinical care activities and revenue of all Clinicians shall be governed by this Policy. Except as provided in this Policy, full-time Clinicians (as defined below) may not have or maintain a private practice of medicine or dentistry.

II. Definitions

A. Individuals Covered by the Policy

All Clinicians who engage in patient care services as part of their employment at Stanford University are covered by this Policy. This policy excludes trainees (including trainee/instructors), who are covered under different policies but includes part-time faculty.

B. Practice Income

1. Practice income is all Clinician medical fee-for-service or contract income derived from direct, indirect or consultative patient care services requiring physician or other licensure, whether such activities are recurrent or non-recurrent in nature, provided by the Clinicians as part of their employment by Stanford University, regardless of the source of payment for those services or the purpose for which the Physician service/opinion is rendered. In addition, income generated by adjunct Clinicians who engage in patient care may be practice income when performed as part of their Stanford duties. All practice income shall be assigned to Stanford Hospital and Clinics ("SHC") or Lucile Packard Children's Hospital ("LPCH") by all Clinicians who generate such income. Except as provided in this Policy, none of such persons shall have any right or title to such practice income. Nonclinical activities of individual Clinicians shall not be covered by this Policy.

2. Consulting on disputed medical claims or testifying as an expert witness on the medical condition or treatment of any person is excluded from practice income when the service meets all of the following criteria:
(a) Is based solely on a review of medical records (including x-rays, tracings, lab results and photographic material) of a person who is not a current patient of any Clinician or of SHC or LPCH, AND

(b) Does not involve use of any SHC or LPCH staff, laboratories or other facilities, AND

(c) Does not involve personally examining or interviewing the person.

3. Practice income includes all medical direction income, including but not limited to income from serving as a medical director for any diagnostic or therapeutic facility, or any other nonprofit or for-profit enterprise where the medical director has responsibility for the quality of medical service(s) rendered.

(a) Payment for serving only as a member of an advisory board or governing board of such an organization is not practice income but is subject to disclosure as a possible conflict of commitment or interest.

(b) Any Clinician whose commitment to Stanford is part-time (that is, any commitment less than 100% or 1 FTE):

   (i) If the Clinician receives no benefits from Stanford (generally meaning less than 50% time), a list of other employer(s) shall be provided to the Vice Dean, to be included in the Clinician's personnel file

   (ii) If the Clinician receives partial benefits from Stanford (generally meaning less than 75% time but more than 50% time), the Clinician must obtain an exemption from Practice Income for any clinical income which is unrelated to the Clinician's Stanford commitment. Such an exemption must be in writing, agreed to by the Division Chief and Department Chair, approved by the Vice Dean, and documented in the Clinician's appointment letter or, for an already-employed Clinician, in an annual letter of agreement.

   (iii) If the Clinician receives full benefits (generally meaning 75% time or more) but is less than 100% time, the Clinician must obtain an exemption from Practice Income for any clinical income which is unrelated to the Clinician's Stanford commitment. Such an exemption must be in writing, agreed to by the Division Chief and Department Chair, approved by the Vice Dean, and
documented in the Clinician’s appointment letter or, for an already-employed Clinician, in an annual letter of agreement.

4. No exception to this Policy will be effective unless such exception has been reviewed and approved in writing by the Chair and Division Chief of the relevant Clinician's Department and the Vice Dean, and malpractice coverage has been agreed to by SUMIT or separate malpractice coverage is provided, is satisfactory to the School and to SUMIT, and is documented in writing.

5. Resolution of questions on whether specific types of payments are practice income or can be received as personal payments will be resolved by the Vice Dean.

III. Approved Practice Sites

1. The approved practice sites for the Clinicians are the facilities of SHC and LPCH, and other hospitals and ambulatory care facilities, including the Blood Center, owned, or managed by, or under an affiliation or other agreement with the University or SHC or LPCH; and other health care agencies, institutions, and places designated by the Dean or his or her designee as sites of approved practice. The requirement to practice only in approved practice sites applies to all international as well as domestic locations. The specific practice site or sites for any individual Physician will be determined by the cognizant Chair or Division Chief.

2. No full-time Clinician may ever maintain a clinical practice outside of the approved practice sites. The practice location requirements for part-time Clinicians are defined in the individual 's employment letter, as approved by the relevant Department Chair and the Vice Dean, and, for international sites, the Senior Associate Dean for Global Health.

3. The provision of telemedicine services should be reviewed for licensure requirements on a case-by-case basis. State laws vary, and may change from year to year or as a result of litigation. Such practice should be governed under a contract for outreach and be confirmed for coverage with SUMIT prior to undertaking any services.

4. Provision of Clinician services at sites other than approved practice sites on a routine or non-recurring basis must be approved in advance by the Vice Dean and the Department Chair and documented in writing. Any income derived from such activities shall be practice income. Rendering emergency care (a "good Samaritan" action) is an exception to such restriction on practice location.
5. Contact through the internet, whether by an affected individual, another clinician, or a family member of an affected individual, should be thoughtfully reviewed and, if an answer is deemed appropriate, may be provided with the following disclaimer: "NOTE: My response to your question is not medical advice but my informal assessment of the [photo/description] you have sent. My assessment is not a basis for any action or inaction for this individual, and, as with all medical issues, is not intended to nor does it replace the evaluation and determination of a medical professional who can make a diagnosis and render appropriate care. I have not had the opportunity to review the complete medical records nor had the opportunity to examine [you/the patient]; my assessment can only be based upon the limited information [you have/I have been] provided."

IV. Malpractice Coverage

1. Malpractice coverage is provided only for patient-related activities performed by Clinicians as part of their official duties within approved practice sites, including outreach locations to which Clinicians are assigned as part of their duties.

2. SUMIT malpractice insurance has specific restrictions and provisions for coverage. Each licensed Clinician considering any clinically related activity outside an approved practice site should consult the Vice Dean and the Insurance Manager for SUMIT. All questions or issues regarding coverage or any request for any exception should be resolved with SUMIT and confirmed in writing with SUMIT, the Vice Dean and the Department Chair.

V. Unauthorized Practice of Medicine

Under no circumstances may any Clinician practice medicine outside of the location in which he or she is licensed. For example, a Clinician licensed only in California may not provide clinical care outside of California, whether in the United States or any other jurisdiction, barring the application of special circumstances allowing such practice. Any Clinician considering practice outside a jurisdiction of licensure should consult the Vice Dean to determine whether any exception applies.

VI. Rights and Obligations of Clinicians

Clinicians shall have the rights and obligations respectively provided for them in their individual appointment letters, this Policy and all applicable University, School and Department rules, regulations, and
policies. Each Clinician shall have the obligation to know and understand such requirements, and, if in doubt, shall be obligated to obtain answers from the cognizant Chair or the Vice Dean.

VII. Duties of Clinicians

All Clinicians shall provide services to patients in the respective hospitals and other locations in which they serve, respecting and following all relevant policies, rules and regulations including but not limited to those related to patient care, billing and compliance.

VIII. Effective Date

This Policy is effective on May 15, 2011. This policy replaces the Rules of Practice for the Faculty Physician.

ADOPTED:

Dean, Stanford University School of Medicine

Updated: June 24, 2014