

<i>Title: [REQUIRED]</i>	
Pharmacy Residency Policies and Procedures Disclosure	
<i>Joint Commission Chapter Section: [REQUIRED]</i> Click here to select a policy section	<i>Date original policy was created: [REQUIRED]</i> 01/10/2022
<i>This policy belongs to: [REQUIRED]</i> Enterprise Pharmacy	
<i>Committee/Council Approval(s): [OPTIONAL]</i> N/A	<i>Date of Approval(s): [OPTIONAL]</i>

PURPOSE *[REQUIRED]*

The following document contains policies and procedures relevant to system pharmacy residency design and conduct.

PERSONS AFFECTED *[REQUIRED]*

Pharmacy residents

DEFINITIONS

Residency Program Director (RPD): Pharmacist responsible for oversight of the pharmacy residency program with the entities listed above. The RPD is listed as the program director with the American Society of Health-System Pharmacy (ASHP).

Assistant Program Director (aRPD): Pharmacist appointed by the RPD and Director/Manager in Pharmacy to act in a leadership support role to the RPD.

Resident: Pharmacist hired into a 12-month role as a post-graduate (PGY (Post Graduate Year)) one (1) or two (2) position.

Preceptor: Pharmacist who participated in the planning or delivery of the pharmacy residency curriculum.

POLICY *[REQUIRED]*

The documents attached to this policy are to be used as policy and procedure documents for all pharmacy residencies in the Geisinger system.

RESPONSIBILITIES

Residency Program Directors will ensure the policies and procedures in this document are followed as part of the conduct of the pharmacy residency programs at Geisinger.

EQUIPMENT / SUPPLIES

N/A

PROCEDURE

Please review the attached documents with pharmacy residents and residency personnel as needed. For residents, the following must be reviewed:

- a. At the time of interview as a candidate to the residency program,
- b. Following the results of the match; by only those candidates matched as residents to the program,
- c. During the pharmacy residency onboarding process.

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The following documents will serve as reference when needed as part of the residency:

- a. Pharmacy Residency Recruitment ([Policy Manager link](#))

ATTACHMENTS

- A. [Personnel Policies for Pharmacy Residents](#)
- B. [Licensure Requirements for Pharmacy Residents](#)
- C. [Certification Requirements for Pharmacy Residents](#)
- D. [Duty Hours for Pharmacy Residents](#)
- E. [Moonlighting as a Pharmacy Resident](#)
- F. [Time off for Pharmacy Residents](#)
- G. [Progression for Pharmacy Residents](#)
- H. [Professional Placement Interviewing for Pharmacy Residents](#)
- I. [Resident Certificate of Completion Requirements for Pharmacy Residents](#)
- J. [Disciplinary Action or Dismissal](#)
- K. [Salary/Stipend and Benefits](#)
- L. [Mandatory Vaccine Policies](#)
- M. [Pharmacy Residency Recruitment](#)
- N. [Financial Support for Professional Meetings](#)

ATTACHMENT A.

Personnel Policies for Pharmacy Residents

All pharmacy residents are to comply with their pharmacy residency contracts; issued annually to all new residents (Attached to policy by residency program type). All residency program directors will adhere to the requirements or potential to meet the requirements when selecting pharmacy residents.

1. Qualifications

- a. Graduate of an ACPE-accredited school of pharmacy or successful completion of Foreign Pharmacy Graduate Examination Committee (FPGEC) certification.
- b. Licensed or eligible for licensure to practice pharmacy in the Commonwealth of Pennsylvania.
- c. Successful completion of pre-employment requirements of Geisinger.
- d. For PGY2 resident applicants only: applicants are completing or have completed an American Society of Health System Pharmacists (ASHP) accredited or candidate-status PGY1 residency.

2. Appointment

- a. Enterprise Pharmacy adheres to the guidelines published by the American Society of Health System Pharmacists (ASHP) with respect to the eligibility and selection of residents. The department participates in the National Residency Matching Program (NRMP).
- b. Selection and ranking for the NRMP is the responsibility of the Pharmacy Residency Program Director with input from the Residency Program Preceptors and facility and system leadership involved in the residency program.
- c. Ranking, salary determination, or other terms of employment shall be made without consideration of race, creed, color, national origin, age, sex, sexual orientation, handicap, or any other factor not pertinent to the scope of responsibilities within the specific position.
- d. Notification of appointment will be made in accordance with the timelines outlined by the American Society of Health-System Pharmacists' accreditation standards and guidance documents.

3. Procedures

- a. Pharmacy residency obligations, licensing standards, and requirements to complete the residency will be included in the residency contract.
 - i. Details of the contract will be shared with pharmacy residency candidates at their interview.
 - ii. Details of the contract will be shared with pharmacy residents prior to their first day of employment as a resident. The contract will, again, be reviewed during the residency onboarding process.
- b. Orientation
 - i. The resident is to attend Geisinger-sponsored orientation events hosted by Graduate Medical Education and/or Human Resources.
- c. Illness/Sick Time/Absence
 - i. Absences for illness/sick time will be managed using the resident's paid time off allotment.
 - ii. The resident's rotation preceptors, program director, and supervisor(s) will receive communication of illness within 2 hours of the start of the resident's shift to be eligible for sick leave. If within 2 hours of the start of the shift, the resident should contact the program director immediately.
 - iii. During-shift illnesses should be reported to Employee Health unless deemed unnecessary by the resident's program director, assistant director, or director.

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- iv. The department standard for satisfactory attendance is no more than 6 days unscheduled time off per year.
- d. Holidays
- i. Geisinger recognizes 6 official holidays. Residents will work the holiday schedule outlined as part of their contract. The recognized holidays include:
 - 1. New Year's Day
 - 2. Memorial Day
 - 3. July 4th
 - 4. Labor Day
 - 5. Thanksgiving
 - 6. Christmas
 - ii. Residents may request consideration to observe holidays of significance not listed above. Requests should be sent to the residency program director for consideration.

ATTACHMENT B.

Licensure Requirements for Pharmacy Personnel

Resident shall maintain, throughout duration of their residency agreement, a valid pharmacist license from the Pennsylvania State Board of Pharmacy. The NAPLEX and Jurisprudence exams should be taken prior to starting the Program, or within the 30 days of the start of the Program. Resident must complete the licensure process and be officially licensed to practice pharmacy in the Commonwealth of Pennsylvania within 60 days of their first day employed as a pharmacy Resident with Geisinger. Failure to obtain a valid pharmacist license within 60 days shall result in initiation of performance improvement plan per Policy 04.305 Employee Performance Improvement & General Standards of Conduct. Licensure is required to complete the pharmacy practice experience requirements of our program. The Resident will be expected to continue training and upon licensure may be required to work additional days to make up for missed requirements. Failure to pass the licensure exam within one hundred twenty (120) days of the Resident's hire date will result in immediate termination of the residency program for the Resident (termination of employment).

Resident agrees to provide Geisinger with immediate written notification of any action which is taken, or which is contemplated to be taken against the pharmacist license issued by the Commonwealth of Pennsylvania, including but not limited to: disciplinary action such as suspension, revocation, limitation, or other restrictions. Geisinger shall have the option to terminate the residency agreement or suspend its obligations pending the outcome of any such disciplinary proceeding. Furthermore, the resident agrees to provide Geisinger with a copy of any pharmacist license issued by another state and agrees to provide Geisinger with immediate written notification of any action which is taken, has been taken, or is contemplated to be taken against any such pharmacist license from any state, including, but not limited to, disciplinary action such as suspension, revocation, limitation, or other restrictions.

ATTACHMENT C.

Certification Requirements for Pharmacy Residents

In both outpatient and inpatient settings, residents must complete the certification (or recertification) process to work as a pharmacist under the system collaborative practice agreements. The following exams must be completed by the specified residents by the specified dates:

Acute Care Practice Areas (PGY1 programs at GCMC, GLH, GMC (Geisinger Medical Center), GWV; PGY1/2 HSPAL (Health System Pharmacy Administration and Leadership); PGY2 GMC)

Anticoagulation: within 120 days of start date

Antimicrobial Stewardship: determined by RPD at first resident planning meeting

Code/Stroke: determined by RPD at first resident planning meeting

Pharmacokinetics: within 120 days of start date

Ambulatory Care Practice areas (PGY1 programs at GC)

Anticoagulation: by August 30 of the residency year

Asthma: determined by RPD at first resident planning meeting

COPD (Chronic Obstructive Pulmonary Disease): determined by RPD at first resident planning meeting

Diabetes: determined by RPD at first resident planning meeting

Heart Failure: determined by RPD at first resident planning meeting

Hypertension: determined by RPD at first resident planning meeting

Lipids: determined by RPD at first resident planning meeting

Osteoporosis: determined by RPD at first resident planning meeting

Failure to meet the above certifications for collaborative practice by the specified date, either listed above or as part of the resident plan, will result in the resident not being able to meet the requirements to complete the residency program. Within 30 days of the listed date, residents not on track to meet the specified date(s) will be placed on a performance improvement plan.

ATTACHMENT D.

Duty Hours for Pharmacy Residents

Resident shall be present and available for duties assigned to Resident by the program Director, including night, weekend, or any special duty assignment which Resident may be given at the discretion of the Program Director. The Program Director is responsible for the appropriate scheduling of duty time, including provision of adequate off-duty hours.

A pharmacy residency is a full-time obligation; therefore, the Resident will manage activities external to the residency so as not to interfere with the goals and objectives of the program. The primary purpose of the residency is education. To successfully garner the full benefit of learning opportunities afforded, it is expected that the Resident will be actively engaged in pharmacy practice for hours beyond that of a traditional clinical staff pharmacist. Fluctuations in workload, cross-coverage, change of service, unusual service demands or patient loads, etc. may all dictate the hours of Resident service.

Geisinger shall, however, maintain an environment conducive to the health and well-being of the Resident. The customary and usual schedule for Resident pharmacists on the service to which the Resident is assigned shall adhere to duty hour's requirements of ASHP (<https://www.ashp.org/-/media/assets/professional-development/residencies/docs/duty-hour-requirements.ashx>). Duty hours must be limited to 80 hours per week, averaged over a four-week period. Residents must have a minimum of one day in seven days free of duty when averaged over four weeks. Residents should have 10 hours free of duty between scheduled duty and must have at a minimum 8 hours between scheduled duty periods. The Resident is responsible to track all duty hours utilizing the monthly time sheet.

ATTACHMENT E.

Moonlighting as a Pharmacy Resident

Residents are not permitted to work outside the Geisinger for remuneration outside the scope of the educational activities and regularly assigned duties of the residency agreement. Residents may assume additional duties for remuneration within the Enterprise Pharmacy Department of Geisinger at the discretion of the Residency Program Director. The Resident must have achieved satisfactory progress on all goals and objectives as well as met all project deadlines to be considered for additional duties. Any additional duties outside of the residency program will be included in the total duty hours in accordance with the standards of ASHP (<https://www.ashp.org/-/media/assets/professional-development/residencies/docs/duty-hour-requirements.ashx>).

For PGY1 Pharmacy Residents

Residents meeting all criteria to be allowed moonlighting hours may do so at a maximum allowable of 16 hours per 4 weeks on a rolling 4-week basis.

For PGY2 Pharmacy Residents

Residents meeting all criteria to be allowed moonlighting hours may do so at a maximum allowable of 32 hours per 4 weeks on a 4-week rolling basis.

ATTACHMENT F.

Time off for Pharmacy Residents

Time off, both paid and unpaid, will follow the Enterprise Pharmacy Attendance, Paid Time Off, Personal Time Policy unless otherwise noted by the residency manual or with approval from the residency program director and assistant director or director of pharmacy.

Paid Time Off (PTO):

Residents receive 10 paid days off immediately upon hire and do not need to accrue paid time off to be eligible for use. All PTO is subject to RPD approval. PTO will be used for all absences throughout the year including but not limited to vacation days and sick days. Residents may be eligible for salary continuation for times of extended illness or injury. Salary continuation may be used at the discretion of the residency program director and director/assistant director of pharmacy. No more than 5 total PTO days may be used during any 4-week learning experience period for non-illness related absences. All requests for leave must be submitted in writing.

The residents are responsible for their assigned staffing service and are responsible for assuring that these service commitments are met in the event of an unforeseen absence. Paid time off cannot be used in place of staffing requirements. If a resident calls in sick during a scheduled staffing shift, the staffing shift must be made up.

Unused paid time off is not eligible to be carried over from year to year. Upon termination of employment, you lose the balance of paid time off.

For other instances of time off and policies about the total time away from residency, please see *ATTACHMENT K. Stiped/Salary & Benefits*

ATTACHMENT G.

Progression for Pharmacy Residents

Guidelines for **Suspension, Disciplinary Action or Dismissal of Residents** based on failure to make satisfactory progress in the residency as stated in the Enterprise Pharmacy PGY1 Pharmacy Resident Agreement.

“A Resident may be dismissed, for cause, during an appointment period. A decision for termination will be decided upon with input gathered from the RPD, the Director of Pharmacy, the Resident’s preceptors and mentor, the Residency Advisory Committee, and the Human Resource Representative. Examples of cause for dismissal include, but are not limited to, the following:”

“9. If a Resident is failing to make satisfactory progress across the continuum of the residency curriculum by January 1st, a Geisinger performance improvement plan will be initiated (per Policy 04.305). This plan will specify in detail what goals and objectives need immediate attention, what learning experiences must be repeated (if any), what the expectations are, and what actions will be taken if improvement is not seen within a specified time period.

10. If a resident is found to not maintain satisfactory progress at any time after January 1st, a performance improvement plan will be initiated (per Policy 04.305) as above.”

Definition of failure to make satisfactory progress across the continuum of the residency curriculum by January 1st will constitute:

- Documentation of an objective with 2 or more consecutive or non-consecutive ratings of Needs Improvement (NI) reported on the resident's taught and evaluated (TE) grid for rotations completed through the end of November.
- Documentation of 2 or more unresolved NI ratings assessed from all objectives in the residency reported on the resident’s TE grid for rotations completed through the end of November. An unresolved NI is defined as a rating of NI which has not advanced to Satisfactory Progress (SP) or achieved due to lack of opportunity for evaluation.
 - For an objective that is evaluated as part of a quarterly evaluation associated with a longitudinal rotation, if Q1 evaluation has NI (Needs Improvement) and the Q2 evaluation is anticipated to remain as NI.

When a resident meets the criteria for failure to make satisfactory progress in the residency, the following actions will be taken:

- RPD and/or ARPD will meet with the resident to discuss the situation and review the contractual obligation towards SP to afford the resident all opportunities to successfully complete the residency and receive a completion certificate.
- Resident may be required to change their rotation schedule for the month of December to align the objectives marked as NI with opportunities for evaluation based upon those assigned to upcoming learning experiences.
- The transition meeting will be utilized to highlight the area(s) where focused improvement must occur.
- If the objective(s) remain as NI at the end of the December rotation, a performance improvement plan will be initiated per contractual requirements.
- If the objective(s) improve to SP at the end of the December rotation, close monitoring of progress will occur on a regular basis.

- If the objective(s) revert to NI after progression to SP in the second half of the residency, a performance improvement plan will be initiated immediately.
- If an objective is marked as NI for the first time between January-May, a Performance Improvement Plan will be initiated, per contractual requirements, and the Clinical Competency Committee or equivalent will convene to determine a plan to address the situation.
- If an objective is expected to be marked as NI for the first time in June, the Clinical Competency Committee or equivalent will convene and a discussion with the RPD/ARPD will occur to determine a plan to address the situation.
- If an objective which was previously marked Achieved for Residency is later marked as NI at any time, the Clinical Competency Committee or equivalent will convene to determine a plan to address the situation.
- If a preceptor is aware of a resident who may be struggling or failing to meet requirements at any point in the year, they are asked to notify the RPD/ARPD so that appropriate adjustments can be made to the learning experience or upcoming rotation schedule and/or support provided prior to the end of the rotation/year.

The Clinical Competency Committee or equivalent will meet ad hoc to monitor the resident's progress until sustained progression is demonstrated.

ATTACHMENT H.

Professional Placement Interviewing for Pharmacy Residents

Resident pharmacists, PGY1 and PGY2, may take up to 3 full days for professional interviews associated with employment or additional residency training. These days will not count against the resident PTO allotment.

In the event the interview is only a half-day, and the resident may participate in residency programming for the other half, the interview day may be charged as 0.5 instead of 1.0 professional interview days.

Residents must arrange with their co-residents and pharmacy manager if their interview will interfere with their staffing responsibilities.

Professional interview days may not be used for travel days. If an interview does not occur on a day the resident has requested to not be at work, the day may not be used for professional interview. Travel to and from an interview will require PTO if it occurs on a scheduled residency day before or after the interview.

ATTACHMENT I.

Resident Certificate of Completion Requirements for Pharmacy Residents

Certification of completion of the program will be contingent upon Resident successfully completing the core requirements of the Program, returning all property of the Geisinger such as books, equipment, scrubs and scrub cards, etc., and having settled any other professional or financial obligations to the Geisinger. The certificate will be issued in accordance with the provisions of the ASHP Regulations on Accreditation of Pharmacy Residencies and signed by the RPD and the Chief Executive Officer of the organization. A certificate will not be issued to anyone who does not complete the program's requirements. Failure to meet any of the completion requirements will result in a program certificate not being awarded. If any objective below has a date associated with it, a performance improvement plan may be enacted at the discretion of the program director.

Core requirements to successfully complete the program include:

- ~~Possess a valid pharmacist license from the Pennsylvania State Board of Pharmacy within one hundred twenty (120) days of the Residents hire date.~~
- Completion of all R1 goals/objectives with a status of Achieved for Residency by the end of the residency. Completion of 100% of the remaining goals/objectives for the program with at least 75% of the objectives having a status of Achieved for Residency. All objectives must have a minimum status of satisfactory progress. Individual programs may require a higher minimum expectation but may not require less than identified as part of this policy. Programs with a higher minimum requirement will communicate this to residents during the interview, contracting, and orientation process.
- All evaluations must be completed in accordance with ASHP Accreditation Standard as outlined in the Resident Agreement
- Completion of all certifications by the dates defined by the residency program director and/or system policy.
- Completion of major project, which includes meeting all project deadlines and submission of written manuscript of completed project to the RAC.
- Assigned projects (MUE, drug review, class review, and management project) have been completed.
- Presentation of at least one major CME program.
- Poster or platform presentation at one or more regional or national professional meetings:
 - PGY1: Poster presentation at ASHP Midyear Clinical meeting & platform presentation at Eastern States Conference
 - PGY2: Poster presentation at ASHP Midyear Clinical Meeting & additional presentation at specialty conference.
- Completion of one order set review*
- Completion of minimum staffing requirements as described in residency contact/manual.
- Adherence to the organization's attendance standards.

*Currently required for the following programs: PGY1 Geisinger Medical Center

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ATTACHMENT J

Disciplinary Action & Dismissal

A Resident may be dismissed, for cause, during an appointment period. A decision for termination will be decided upon with input gathered from the RPD, the Director of Pharmacy, the Resident's preceptors and mentor, the Residency Advisory Committee, and the Human Resource. Examples of cause for dismissal include, but are not limited to, the following:

1. A violation of the policies, rules, and regulations of the Geisinger or a violation of the directions of the Program Director and/or of the director or coordinator of the service to which the Resident is assigned.
2. An abuse, sexual harassment, or assault of any individual.
3. A refusal of evaluation for suspected impairment that impacts performance as described in the system physician impairment policy.
4. A refusal of rehabilitation for a diagnosed impairment that impacts performance.
5. Any conduct which is or would be detrimental to Geisinger Operations, activities, or interests.
6. Deficiencies in maintaining current medical records.
7. Lack of evidence of continuing self-education.
8. Persistent strife in interpersonal relations in the workplace.
9. If a Resident is failing to make satisfactory progress across the continuum of the residency curriculum by January 1st, a Geisinger performance improvement plan will be initiated (per Policy 04.305). This plan will specify in detail what goals and objectives need immediate attention, what learning experiences must be repeated (if any), what the expectations are, and what actions will be taken if improvement is not seen within a specified time.
10. If a resident is found to not maintain satisfactory progress at any time after January 1st, a performance improvement plan will be initiated (per Policy 04.305) as above.
11. Failure to adhere to Geisinger rules and regulations pertaining to password-protected secured information, patient confidentiality, and to HIPAA regulations.
12. Any breach on this Agreement.

Suspension, disciplinary action, or dismissal will be handled pursuant to the Human Resources policies established by Geisinger. (see Policy Manager, [Performance Improvement & General Standards of Conduct](#))

ATTACHMENT K.

Salary/Stipend & Benefits

1. PGY1 Pharmacy Resident Salary/Stipend: 47,476 (52 weeks)
2. PGY2 Pharmacy Residency Salary/Stipend: 50,273 (52 weeks)
3. Pharmacy Residency Benefits: pharmacy residents will receive the same benefit options as full-time employees of Geisinger. Benefits will begin upon resident election for benefits plan, where selection and opt-in are required. Updates will be provided periodically by Human Resources to ensure the most current information is available. If additional information or clarification is needed, Human Resources may be reached at 570-808-7885.

Updated information as of February 1, 2021

GEISINGER MEDICAL CENTER PHARMACY RESIDENT BENEFITS SUMMARY

Geisinger System Services on behalf of its affiliate entities under the common corporate control of the Geisinger Health, collectively referred to as Geisinger, provides various levels of benefits to full-time Pharmacy Residents. Geisinger's comprehensive program includes opportunities for education and development, competitive compensation and benefits, and supports work life balance. Geisinger offers a flexible benefit plan where the costs are shared between the employer and the Resident.

HEALTH INSURANCE

MEDICAL

Residents may choose between the Provider Choice & PPO plans. Each plan provides immediate coverage with no pre-existing condition clause. Residents will be responsible for a contribution to participate in the medical coverage. The Provider Choice plan covers one extensive network that includes two groups of providers: Geisinger and Partner providers (members of the Keystone ACO (Accountable Care Organization), Evangelical Community Hospital, Hershey Medical Center, Mount Nittany Medical Center, St. Luke's University Health Network and Wellspan) and Participating providers in the GHP (Geisinger Health Plan) network. You will pay varying copays and other out-of-pocket costs depending on where you receive care. Find out who participates at <https://www.geisinger.org/health-plan/find>.

With the PPO plan, members are not required to designate a single primary care physician. You have the freedom of choice to use physicians and hospitals within the Geisinger Health Plan (GHP) provider network, or to go outside of the network to use the services of other physicians and hospitals. However, when you access providers outside the GHP network, the financial costs for which you will be responsible will be much higher than using the providers in the GHP network. See the Benefits Guide for details.

MYHEALTH REWARDS PROGRAM

MyHealthRewards Program is designed to encourage and support employees to identify and follow a pathway to better health for themselves and their families. Key elements of the program include:

- Enroll in this incentive-based program by visiting go.geisinger.org/myHealthRewards to register.
- Take the wellness assessment survey by the established due date. This provides you with a broad snapshot of your current health and will determine if you are at risk for certain health conditions.

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- Attend one of many health screenings that will be held conveniently throughout the health system. You will be screened for body mass index, blood pressure, cholesterol, and blood glucose levels. You will also be asked if you are “tobacco-free.”
- If you meet all the predetermined health goals, you will receive a reduction in your health benefit contributions in 2022.
- If you indicated you were not tobacco-free, you will be directed to participate in a free tobacco cessation program through Geisinger that will be open to employees and spouses/domestic partners.
- You must register and meet your goals to receive a discount on your health benefit contributions in 2022.

MENTAL HEALTH AND SUBSTANCE ABUSE

GHP manages behavioral health services for participants of Provider Choice and PPO. For pre-authorization, please call GHP at (888) 839-7972.

PRESCRIPTION

When a Resident chooses Health Insurance through Geisinger they are automatically enrolled in the prescription drug plan. If you waive medical coverage, you are not eligible to participate in the Prescription Drug Plan. Once you pay the deductible per calendar year, you are responsible for a co-pay per prescription. The amount you pay depends on whether the drug is a generic, preferred brand name, or non-preferred brand name.

Several important points to note about the prescription drug plan are listed below:

The pharmacy network includes contracted pharmacies and retail pharmacy chains at convenient locations; the copay varies depending on pharmacy location. A mail order prescription drug program is available for individuals taking medications on a regular basis (maintenance) for conditions such as high blood pressure, diabetes, depression, and cholesterol. Diabetic supplies (test strips and syringes) are covered without a prescription. Diabetic supplies are free at Geisinger Pharmacies under the free medication program. Cosmetic drugs are not covered.

Free medications for hypertension, high cholesterol, and diabetes: After meeting the standard deductible for the coverage selected, Health Plan members can obtain free medications from a list of nearly 200 generic and brand name drugs used to control hypertension, cholesterol, and diabetes. View the list of approved medications on-line at <https://geisinger.sharepoint.com/sites/Benefits2021/Shared%20Documents/Forms/AllItems.aspx?sortField=Modified&isAscending=false&id=%2Fsites%2FBenefits2021%2FShared%20Documents%2FGeisinger%20Zero%20Copoly%20Drug%20flyer%2011%2E16%2E2020%2Epdf&parent=%2Fsites%2FBenefits2021%2FShared%20Documents>. Medications are available only through Geisinger Pharmacies and are subject to GHP formulary rules.

DENTAL PLAN

Geisinger offers two comprehensive dental plans through Delta Dental. The Basic Plan provides coverage for regular dental exams, x-rays, cleanings, fillings, and other services. The Enhanced Plan has the same benefits as the Basic Plan but includes orthodontia coverage for dependent children up to age 19. All covered dental procedures, except diagnostic and preventive services, are subject to an annual per person deductible, with a family limitation for In-Network and Out-of-Network dentists. There is an annual maximum per person for services provided by Delta Dental PPO and Premier participating dentists and an annual maximum per person for services provided by non-participating dentists.

VISION

Geisinger provides an eye care plan through VSP (Vision Service Plan). Coverage is available for routine vision exams, glasses and/or contact lenses and laser vision correction discounts.

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GROUP TERM LIFE INSURANCE

House staff members can elect Group Term Life Insurance. Included are Basic Life Insurance coverage and Accidental Death and Dismemberment (AD&D) coverage. Accidental death coverage is an additional amount of life insurance coverage, and dismemberment coverage provides financial protection if an employee suffers the loss of a limb, eyesight, etc. You may elect to purchase optional Life Insurance coverage to a specified maximum.

BUSINESS TRAVEL ACCIDENT INSURANCE

As a Geisinger employee, you are automatically covered for Business Travel Accident Insurance, including Life Flight® coverage.

LONG TERM DISABILITY (LTD)

Long-Term Disability (LTD) Insurance is available to full-time employees. Long-Term Disability coverage is designed to cover any lengthy disability that continues for more than six months. A pre-existing condition limitation applies to newly hired employees. A pre-existing condition limitation applies to newly hired Residents.

LIABILITY INSURANCE

The Geisinger pays the full premium to provide commercial insurance for professional liability. The system also pays the full premium for extended coverage under the Catastrophic Loss Fund of Pennsylvania. Being named in a lawsuit or identified as a witness and called as a deponent in a lawsuit is not grounds for adverse action regarding your position with the Geisinger. It is understood that professional liability lawsuits occur and that individuals involved in providing care may be named in lawsuits or drawn into lawsuits as witnesses.

FLEXIBLE SPENDING ACCOUNT (FLEX)

This benefit offers you the option to redirect a portion of your pay, through payroll deduction, into Flexible Spending Accounts (FSAs). The money that is deposited into your FSA is deducted from your pay on a pre-tax basis (before Federal and Social Security taxes are calculated).

Because you do not pay taxes on the money that is contributed to an FSA, you decrease your taxable income and potentially increase your take-home pay. The plan limits for health care or dependent day care will be in accordance with national guidelines. Our plan limits for 2020 are \$2,700 for the healthcare FSA and \$5,000 for the dependent care FSA.

The following summarizes other benefits and human resources programs available to Residents:

RETIREMENT PROGRAMS

All employees are immediately eligible to make voluntary contributions and participate in Geisinger Retirement Plans. The amount contributed to your retirement account by Geisinger is specific to your work location and is explained in the Retirement Benefits Insert. The maximum contribution is determined by the IRS each year.

TIME OFF

Time off, both paid and unpaid, will follow the Enterprise Pharmacy Attendance, Paid Time Off, Personal Time Policy (<https://geisinger-main.policymedical.net/policymed/anonymous/docViewer?stoken=b56d3615-2484-49b0-9ca8-8024d9b5d6ef&dtoken=9a8aeaa2-48e3-4f29-b46b-5eea91a3680b>) unless otherwise noted by the residency manual or with approval from the residency program director and assistant director or director of pharmacy.

Paid Time Off (PTO):

The information in this document is current as of the date printed or received electronically by the user. The details of this document are subject to change based on official Geisinger policy and procedures. The details of this document are the most accurate representation of policies and procedures governing the residency programs and are intended for use by the programs and their potential applicants to disclose information about the residency programs.

Residents receive 10 paid days off subject to RPD approval. PTO will be used for all absences throughout the year including but not limited to vacation days and sick days. No more than 5 total PTO days may be used during any one-month learning experience period. All requests for leave must be submitted in writing.

The residents are responsible for their assigned staffing service and are responsible for assuring that these service commitments are met in the event of an unforeseen absence. Paid time off cannot be used in place of staffing requirements. If a resident calls in sick during a scheduled staffing shift, the staffing shift must be made up.

Unused paid time off is not eligible to be carried over from year to year. Upon termination of employment, you lose the balance of paid time off.

Funeral Leave:

Full-time Residents may be eligible for up to a maximum of three days paid funeral leave. Funeral leave is granted depending on your relationship to the deceased.

Jury Duty:

Residents asked to serve on a jury are eligible for regular pay.

Sick and Family Medical Leave (FMLA):

Because the term of a pharmacy residency is 52 weeks, Residents are not eligible for FMLA. A personal leave may be granted to the resident upon review of the circumstances by the Program Director and Director of Pharmacy. All eligible PTO must be used first. If more time is requested, the leave may be granted but without pay. All requirements for the Program must be met concerning the effect of the leave on satisfying the criteria for completion of the training program. Geisinger will accommodate requested leaves and requirements for additional training whenever possible.

Requested absence for illness after all PTO has been used must be approved by both the residency program director and assistant director or director of pharmacy for the residency program. If a resident requires more than one instance of unpaid absence for illness, a note from a physician, advanced practitioner, or member of employee health will be requested when the resident returns to work.

If during the residency year a resident's cumulative leave, as defined by the total of scheduled and unscheduled days not participating in core or elective residency program, is longer than 33 days, the resident will not be able to complete the requirements of the residency program. The residency program does not permit program extension beyond the agreed upon end of the academic year. *The 33-day limit will be attributed in the following manner:*

- Paid leave (10 days)
- Off-site conference attendance (up to 10 days)
- Professional Interview days (up to 3 days)
- Salary Continuation/Non-paid leave (cannot be used as non-paid equivalent of vacation; the purpose may include, but is not limited to extended illness, bereavement, etc.; salary continuation and extended PTO will be used in concordance with system HR policy): up to 10 days

For a resident with time away from the program greater than 25 days, but less than 33 days, a Performance Improvement Plan will be developed in conjunction with the resident, RPD and resident mentor to assure that requirements for the residency are successfully met. The document will outline a plan for successful completion of the program. It may be determined that the resident will not be able to successfully complete the core requirements of the program. The plan will be presented to the Residency Advisory Committee for approval. The residency program cannot be extended beyond the program's end date.

Non-Qualification for Unemployment Compensation

It is understood and agreed that services performed by Resident in fulfillment of obligations in a pharmacy residency are services performed in the hospital by an individual who has successfully completed and graduated from a pharmacy school chartered or approved pursuant to the laws of the Commonwealth of Pennsylvania and do not constitute employment as defined by the Pennsylvania Unemployment Compensation Law. Therefore, Resident further acknowledges, understands, and agrees for the above-stated reason that Resident shall neither qualify for, apply for, or be entitled to unemployment compensation benefits at the conclusion or termination, for any or no reason, of this Agreement, or any extension thereof.

OTHER BENEFITS/SERVICES

Geisinger's Employee Assistance Program

Geisinger offers counseling and guidance to individuals who may need confidential assistance with personal problems. Guidance Resources provides confidential, professional assistance to employees and their family and can help resolve personal situations and concerns that may affect the individual's well-being and/or job performance.

Direct Deposit:

Direct deposit is the preferred method of paying compensation. Residents are paid biweekly and are strongly encouraged to enroll in direct deposit for safety, security, and dependability provided by the program.

Social Security:

Monthly retirement, disability, and survivor benefits are provided, subject to Social Security requirements. Both the Residents and Geisinger pay a tax to help fund these benefits.

For more information about residency benefits, Geisinger Human Resources at 570-808-7885.

ATTACHMENT L.

Mandatory Vaccination Policies

For the most updated policy, please visit: <https://www.geisinger.org/-/media/OneGeisinger/pdfs/ghs/about-geisinger/vendor-relations/policy-mandatory-vaccines.pdf?la=en>

As a condition of employment, appointment to the medical, residency, or allied staff, or access to facilities covered by this Mandatory Vaccine Policy, all Persons Affected must receive Geisinger mandatory vaccines or have a documented approved exemption. The Mandatory Vaccine Policy is to ensure that the applicable vaccines will be required for all Persons Affected in accordance with the CDC's most recent recommendations. Vaccines will be offered free of charge for all Geisinger employees, faculty, medical staff, residents, fellows, trainees, volunteers, observers, and students. Specified Vendors or contingent workers shall require the mandatory vaccines and bear the cost of vaccine administration for their workforce subject to this policy. Administration is subject to market availability.

MANDATORY VACCINES:

Please note, a full vaccination history will be required as part of employment and may be more comprehensive than the list below. This list (below) is required to be current for all employees.

- Seasonal Influenza Vaccination
- COVID-19 Vaccination (either both doses of Pfizer/Moderna, one dose of the J&J vaccine, or as otherwise approved by the FDA (Food and Drug Administration))
- Tetanus, Diphtheria, and Pertussis Vaccination (*Adacel* or *Boostrix*) – those who work in a building where patient care occurs

FOR RESIDENCY PROGRAMS

Geisinger has a mandatory vaccination policy for all employees to be immunized against COVID-19. Immunization is considered, at this time, receiving a full immunization series without boosters. Proof of vaccination or exemption is not required to apply and interview with residency programs. Following the match and during the Human Resources processes for employment, matched candidates will be asked to submit proof of vaccination or a request for exemption. For a new employee/resident to be in compliance with the policy, the proof of full vaccination or request for exemption must be approved by the system. Approval of exemptions are not guaranteed. We are unable to provide advance rulings on requests for exemptions ahead of the residency match. In the event the resident is unable to successfully meet compliance with the policy, they will not be allowed to start the residency program and the contract will be terminated. Residents are expected to be in compliance with the policy (vaccination or exemption) by the first day of the residency as indicated by their first day of orientation with Graduate Medical Education (GME).

ATTACHMENT M.

Pharmacy Residency Recruitment

The purpose of this document is to describe the systematic approach for the recruitment of Post Graduate Year 1 (PGY1) and Post Graduate Year 2 (PGY2) pharmacy residents to the Geisinger Health System Pharmacy Residency Programs.

Pharmacists and pharmacy personnel involved in pharmacy residency programs will adhere to the procedures outlines below as part of the resident recruitment, interview, and selection process.

Each pharmacy residency program is responsible for maintaining a more detailed document, outlining the screening, interview, and rank process used in Phase I, Phase II, and the post-match scramble for the residency match. This document should be reviewed annually and maintained as part of the residency administrative documentation.

Procedure

1. PGY1 Programs

- a. **Application:** Information on applying to the PGY1 pharmacy residency program is posted on the residency website and printed materials used at recruitment events. The health system will utilize PhORCAS (Pharmacy Online Residency Centralized Application Service) to receive applications. The deadline for application is posted on the residency website and printed materials used at recruitment events. Only complete applications are considered for evaluation; however, exceptions may be necessary for delinquent letters of recommendation or transcript transmission due to delays beyond the applicant's control.
- b. **Application review and interviewing:** A committee of preceptors will utilize a residency application evaluation form to systematically evaluate each applicant's qualifications. Based on the results of the application review and other objective information available to the application review committee, invitations for on-site interviews are extended and scheduled. The PGY1 program directors will schedule interviews with appropriate candidates. Interviews will be conducted on site or virtually and will include time with the Residency Program Director, Management Team, Preceptors, and Residents. All interviewers will have access to the candidate's documents via the PhORCAS system and/or an internal file storage system and will review those documents prior to the interview.
- c. **Rank list:** Based on the results of the application and interview scoring, as well as other objective information available, the pharmacy residency program director (RPD), with input from preceptors and residents and facility and system leadership, will create a rank list. The RPD will submit the rank list to the National Matching Service (NMS).
- d. **Phase II and Post-Match:** In the event the residency program does not match all its residency spots in phase I of the match and programs pursue candidates in phase II or the post-match process, the above steps should be followed exactly as described above to include: accepting applications, application scoring, inviting candidates for formal interview based on ranked application evaluation scores, deliberation on interview performance, and subsequent ranking by the RPD. If in the post-match process, the RPD will extend offers to interview candidates in the order in which they were ranked.

2. PGY2 Programs

PGY2 programs utilize the same process for application submission as the PGY1 program. Each program employs

a committee of preceptors for the evaluation of the applications. A scoring rubric is used by the Residency Program Director (RPD) and preceptors to decide which applicants to invite for on-site interviews.

- a. **Application:** Information on applying to the PGY2 pharmacy residency program is posted on the residency website and printed materials used at recruitment events. The health system will utilize PhORCAS (Pharmacy Online Residency Centralized Application Service) to receive applications. The deadline for application is posted on the residency website and printed materials used at recruitment events. Only complete applications are considered for evaluation; however, exceptions may be necessary for delinquent letters of recommendation or transcript transmission due to delays beyond the applicant's control.
- b. **Application review and interviewing:** A committee of preceptors will utilize a residency application evaluation form to systematically evaluate each applicant's qualifications. Based on the results of the application review and other objective information available to the application review committee, invitations for on-site interviews are extended and scheduled. The PGY2 program directors will schedule interviews with appropriate candidates. Interviews will be conducted on site or virtually and will include time with the Residency Program Director, Management Team, Preceptors, and Residents. All interviewers will have access to the candidate's documents via the PhORCAS system and/or an internal file storage system and will review those documents prior to the interview.
- c. **Rank list:** Based on the results of the application and interview scoring, as well as other objective information available, the pharmacy residency program director (RPD), with input from preceptors and residents and facility and system leadership, will create a rank list. The RPD will submit the rank list to the National Matching Service (NMS).
- d. **Phase II and Post-Match:** In the event the residency program does not match all its residency spots in phase I of the match and programs pursue candidates in phase II or the post-match process, the above steps should be followed exactly as described above to include: accepting applications, application scoring, inviting candidates for formal interview based on ranked application evaluation scores, deliberation on interview performance, and subsequent ranking by the RPD. If in the post-match process, the RPD will extend offers to interview candidates in the order in which they were ranked.

3. Early Commitment Process for PGY1 Residents with Geisinger

- a. All pharmacy residents in Geisinger are eligible for the early commitment process to any residency program accepting early commitment applications. PGY1 candidates may be from the same or external Geisinger facility to the PGY2 residency program. Any applicant must be able to demonstrate substantial and consistent contact and involvement with the residency program director or assistant program director of the PGY2 program for which they would like to be considered a candidate for early commitment.
- b. Resident applicants are not eligible for early commitment if they meet any of the following criteria:
 - i. Documented inability to meet project deadlines.
 - ii. Documented and unresolved "Needs Improvement" for any objective in PharmAcademic.
 - iii. Active performance improvement plan currently in place.
- c. The PGY1 resident will submit a letter of interest to the PGY2 RPD, copied to the PGY1 RPD, the pharmacy director for the PGY2 program's primary practice facility, and the System Director for Knowledge Management. The letter should include the following attachments: an updated curriculum vitae and 3 letters of recommendation from current preceptors, program director, or research or

teaching mentor within the resident's PGY1 program (document attached). PGY1 PhORCAS application files may be requested at the discretion of the program director. The application process must meet the following criteria:

- i. A signed letter of interest and accompanying materials must be delivered to the PGY2 RPD by the last Friday in October of the residency year.
 - ii. Copies of the signed letter must be delivered to the PGY1 RPD and the director of pharmacy.
 - iii. Candidates will be reviewed by the PGY2 residency program director using a pre-screening rubric designed to determine whether to invite the candidate for a formal interview.
 - iv. A formal interview with the RPD and, at minimum, two PGY2 residency preceptors and an interview with the management team will be scheduled no later than the second Friday in November of the residency year.
 - v. Letters offering positions to selected applicants must be delivered no later than the third Friday of November at 1700 hours of the residency year.
 - vi. The signed acceptance letter must be forwarded to the RPD and copied to the director of pharmacy by 1700 hours of the following business day. The written acceptance letter, and the contract, signed by both the resident, the PGY2 RPD, is a formal commitment to pursue the designated PGY2 residency during the following year.
 - vii. Final date to confirm letters of agreement and fees for early commitment of PGY2 positions to the Residency Matching Program (RMP) for current PGY1 residents is traditionally in the middle of December and will be established by ASHP.
 - viii. After the date that is established by the ASHP, residency sponsors may not make early commitment offers and must offer all positions through the Residency Matching Program (RMP), unless the sponsor does not intend to fill some positions.
 - ix. Match fees (equivalent to those paid by applicants to participate in the Match) for positions filled through an early commitment process will be paid to National Matching Service (NMS) by the sponsor offering the PGY2 residency program. PGY1 residents pursuing PGY2 residency positions not filled through the early commitment process pay an application fee to NMS to participate in the Match.
- d. The responsibilities of the PGY2 program director include:
- i. Discuss early commitment policy and process with any interested PGY1 resident. The interested residents will be informed of the deadlines and that their formal presentations will be assessed as part of an eventual application process. The RPD will schedule tentative interview dates for all members of the interview teams.
 - ii. Inform PGY2 preceptors of formal presentation opportunities for review and provide screening forms.
 - iii. Once the resident has officially applied for the program, the RPD will select 2 preceptors to complete a prescreening of the applicant. The preceptors and RPD will meet to determine if the candidate will be invited for a formal interview.
 - iv. If the candidate has been invited for an interview, the RPD will confirm previous tentative dates for interviews with selected preceptors from RAC (Residency Advisory Committees) and with management team. Once the candidate(s) have been interviewed, a special meeting will be held of the RAC or designated recruitment subcommittee to determine if the candidate will be offered a letter of acceptance.
 - v. Prepare and deliver a formal offer letter for the PGY2 resident position by the third Friday of November of the residency year.
 - vi. Adhere to all application deadlines listed above.
 - vii. Participate in ASHP PGY2 residency matching program according to all ASHP established guidelines and regulations.

- viii. If it is felt that the program is not ready to accept an early commitment applicant by the offer letter deadline, the applicant will be notified. The program will pursue other candidates at the ASHP Midyear Clinical Meeting but will retain the resident's application and consider the resident for the position at the normal recruitment time. All applicants not accepted through the early commitment process will go through the Match process.

- e. Multiple applications for early commitment to the same PGY2 programs will be managed as follows:
 - i. All applications will be screened for viability in the PGY2 early commitment process.
 - A. Interaction with the respected PGY2 program RPD
 - B. Demonstrated interest in the program prior to the call for PGY2 early commitment applications.
 - ii. In the event an RPD identifies more than 1 viable candidate for their PGY2 program, the program will NOT use the early commitment process in their recruitment plan for that year and will notify all applicants the program will go through the ASHP match.
 - iii. PGY2 program directors can appeal 3.e.ii (above) to pursue early commitment for more than 1 applicant using the following process:
 - A. Notify the System Director, Knowledge Management of their request to pursue multiple early commitments.
 - B. Convene a meeting of the PGY2 RPDs (Residency Program Directors) and System Director of Knowledge Management to discuss the reason for the appeal.
 - C. The RPD may pursue early commitment of multiple early commitment candidates after unanimous approval of the request by the PGY2 RPDs and System Director of Knowledge Management.

ATTACHMENT N.

Financial Support for Professional Meetings

Geisinger provides financial support to residents to attend professional meetings required by their programs. The amount may not cover the entire cost of the meeting as the cost for meeting attendance fluctuates from year to year based on registration, travel, and lodging.

PGY1 residents typically attend the ASHP Midyear Clinical Meeting and the Eastern States Conference for Pharmacy Residents and Preceptors. PGY1 residents receive up to \$1,500 to cover meeting- and travel-related expenses.

PGY2 residents typically attend the ASHP Midyear Clinical Meeting and a second professional meeting which aligns with their professional course of training. PGY2 residents receive up to \$2,500 to cover meeting-related expenses.

FLIGHTS

Airfare for travel to meetings must be arranged through Geisinger's travel agency, Boscov's. All flights will be paid for using a corporate account card. Residents who book flights outside of Geisinger's travel agency will not be eligible for reimbursement of the cost of the flight.

LODGING

Residents should book their hotel rooms using personal credit cards or other means. Residents should seek reimbursement for lodging costs after returning from the professional meeting or event. Residents should abide by Geisinger's [Travel and Business Expense policy](#) when booking hotel rooms or other venues.

REGISTRATION

Residents may seek reimbursement for meeting registration costs after returning from the meeting. Geisinger will reimburse resident registration fees up to the amount paid to register as an early registrant and member (where applicable).

OTHER

Please see Geisinger's [Travel and Business Expense policy](#) for additional details about daily meal allowances, taxi services, and other travel-related expenses.