ADVOCATE HEALTH CARE SYSTEM
GRADUATE DENTAL EDUCATION
RESIDENT PHYSICIAN AGREEMENT
2016/2017 ACADEMIC YEAR

This Agreement, entered into this _____day of_____, ______ by Advocate North Side Health
Network, hereafter referred to as ("Advocate") d/b/a Advocate Illinois Masonic Medical Center,
an Illinois Not-For-Profit corporation, hereinafter referred to as ("Hospital") and
_______________, DDS/DMD, hereafter referred to as ("Resident").

WHEREAS, the Hospital has established an accredited clinical training program in graduate
dental education, hereafter referred to as ("Program"); and

WHEREAS, the Resident/Fellow (hereafter universally referred to as "Resident") is a graduate
dental student who has been accepted for enrollment in an advanced graduate dental training
Program; and

WHEREAS, institutions offering programs in graduate dental education must assume
responsibility for the educational validity of all such programs; and

WHEREAS, satisfactory completion of this one year of graduate dental education is necessary
for advancement to the next level of the Program or for receipt of certificate of Program
completion.

WHEREAS, excellence in patient care shall not be compromised or jeopardized by the needs
and prerogatives of the Program, nor shall the educational mission of the Program be
compromised by an excessive reliance on the Resident to fulfill institutional obligations; and

WHEREAS, the parties mutually agree that patient safety and quality health care along with
supervised graduate dental education is a priority of the parties, that there is a need for flexibility
within the working relationship of the parties, and that an understanding of the rights and
responsibilities of both parties is important at the outset of and throughout their relationship.

NOW, THEREFORE, in consideration of the mutual covenants, obligations and agreements set
forth herein, the parties hereby agree as follows:

I. Appointment

A. Duration of Appointment: Begins on ("Commencement/Start Date") ______, 20___
and ends on _________________, 20___.

B. Name of Graduate Dental Education Program:
_______________________________________.

C. Level of Training: PGY ____.
II. Requirements for Resident Prior to Commencement of Agreement

This Agreement will be declared null and void by the Hospital and shall not become effective if the Resident has not met all requirements as set forth below prior to the commencement date.

A. State of Illinois Licensure: The Resident agrees to acquire and maintain the appropriate State of Illinois License (at Resident’s expense) as defined by the Illinois Dental Practice Act no later than 9/30/2016 as allowed by the Illinois Dental Practice Act (225/17 ILCS 25/17 (h), (v)). A Resident will not be permitted to continue in the Program under any circumstances after the above defined date until the appropriate license has been obtained. The Resident is responsible for notifying the Program Director immediately, in writing, if any such license is revoked or otherwise restricted.

B. Employment Eligibility (if applicable): The Resident agrees to comply with all legal and immigration requirements, if applicable, necessary to obtain and maintain appropriate visa status required to pursue graduate dental education in the USA. Visa application and maintenance expense will be paid by the Resident. A Resident will not be permitted to begin or continue in a Program without a valid visa/work authorization. The Resident is responsible for notifying the Program Director immediately in writing if his/her visa is revoked or otherwise restricted.

C. Post Offer Physical/Drug Screening/Criminal Background Check: As per Advocate Human Resource Policy: Post Offer Physical Exam: SYS.014.006, Residents must complete a post offer physical examination and drug screening through the Advocate Employee Health Service prior to starting employment. Residents are also subject to the Advocate Employee Occupational Health Policy: Immunity of Clinical Associates: SYS.014.019. Failure to pass drug screening pursuant to the provisions of the Human Resources policy will result in non-hiring or termination of employment. Results of a positive drug screen will be subject to applicable legal reporting requirements. Residents are also subject to the Human Resources Policy: Applicant Background Checks: SYS.014.010 which requires a criminal background check prior to employment.

D. Professional Liability Insurance
Resident must qualify for professional liability insurance coverage provided by Advocate Health Care.

III. Compensation and Benefits

A. Compensation: The Hospital shall provide the Resident with an annual salary of $___________. Paychecks shall be delivered in accordance with Hospital policy.

B. Benefits: Resident will receive the following benefits subject to the terms and conditions of the Hospital’s current benefit plans or policies. Details of any other additional/optional benefits provided to the Resident as per individual Hospital policy are outlined in Exhibit A, attached and incorporated by reference herein. The benefits listed below may be unilaterally modified by the Hospital from time to time.
1. **Medical, Dental, Vision**

Multiple coverage options for participation in the Hospital’s Comprehensive Plans within the limits of the coverage and conditions, effective the first day of employment. All options are subject to payroll deduction. Complete information will be provided to the Resident prior to selection. Health, dental, vision and flexible spending coverage are subject to an annual enrollment process, or a qualifying event under the terms of the plan.

2. **Disability Insurance**

Short Term Disability (STD) cost is covered by the Hospital and residents are automatically enrolled the first day of employment. Complete Information will be provided to the Resident prior to selection.

Long Term Disability (LTD) cost is covered by Advocate and every resident is automatically enrolled effective the first day of the 7th month of employment. Complete Information will be provided to the Resident prior to selection.

3. **Life Insurance**: The Hospital will provide employer paid group life insurance to the Resident equal to one and one-half times the annual salary. In addition, the Resident may purchase Optional Life Insurance; complete information will be provided prior to selection.

4. **Worker’s Compensation**: The Hospital will provide Worker’s Compensation coverage to the Resident.

5. **Paid Time Off**: Paid Time Off (PTO) is defined as vacation time and personal days. Resident paid time off is an assigned benefit and is not accrued or granted according to worked hours. PTO is to be used in accordance with the Advocate Graduate Medical Education Policy on Vacation and Leave of Absence: 20 vacation days/year (Monday- Friday) and 3 days for unplanned absences/year.

Resident Paid Time Off, i.e. vacation time and personal days, must be approved in advance by the Program Director. Paid Time Off is not cumulative, i.e. it does not carry over from year to year. Unused paid time off will not be paid out at the end of the contract year.

6. **Leave of Absence/Unpaid Leave**: All Residents are entitled to benefits under the Human Resource Policy: Leave of Absence: SYS.013.010 which includes Family/Medical Leave including maternity/paternity benefits, or Personal Leave of Absence. All Leaves of Absence, either those subject to Federal and State statutes or otherwise, must be coordinated and/or approved by the Program Director and may affect the Resident’s graduation date.

Repeat of training and/or make up time required to fulfill criteria for completion of residency is determined by the Program Director consistent with the standards of the American Dental Association (ADA) and the Commission on Dental Accreditation (CODA). Residents who take a Leave of Absence for any reason during the specialty training period will be informed in writing by the Program Director of the effect of the Leave of Absence/Unpaid Leave on both program completion and eligibility for specialty board examination, if applicable.
Each Program Director is responsible to review the Policy on Leave of Absence with the Resident and its effect on program completion and board exam eligibility.

7. **Professional Liability Insurance:** During the term of this agreement, Advocate will provide professional liability insurance for the Resident covering all clinical activities within the scope of the Program and the Resident Physician Agreement. Such limits will be $1 million per occurrence and $3 million in the annual aggregate. These limits are not in addition to the Advocate’s Self-Insured Retention, but are included in the underlying Advocate Hospital professional liability coverage. Defense costs and indemnity settlement or award payments will be made on behalf of Resident for claims involving the alleged negligent acts or omissions of the Resident within the scope of the agreement. Insurance coverage for Resident will also be subject to all of the Trust and Liability Program coverage terms and conditions. Resident understands that any settlement involving his/her medical conduct may require Advocate to report such claim settlement to the National Practitioner’s Data Bank or additional regulatory agencies.

The decision to appoint defense counsel and resolution of any litigated or non-litigated case is within the sole authority of Advocate. Resident agrees at all times to fully cooperate in the defense and investigation of any and all claims or lawsuits. Advocate Professional Insurance Coverage provided under this agreement only applies to medical care rendered at Advocate owned or operated facilities ("Advocate Network"). For all training activities or rotations at sites outside the Advocate Network, Resident must obtain specific approval by submitting a written request, with the approval of his/her Program Director, the site Designated Institutional Official, and the Risk Management Department. The request must demonstrate benefit to the education of Resident plus benefit to the Program and Advocate. Approval for coverage for training outside of the Advocate Network can only be granted by and is within the sole discretion of the Risk Management & Insurance Department for Advocate Health Care Network. Such coverage does not extend to any moonlighting or other activities performed outside the training program.

Extended reporting of claims for alleged acts or omissions of Resident is provided following the expiration of this agreement so long as they occurred during the term and scope of the agreement. All provisions and requirements in this paragraph will survive the expiration and/or termination of the agreement.

8. **Living Conditions:** All residents will be provided: On-call housing, 3 new lab coats in the PGY 1 year and 2 replacement coats in the PGY 2-7 year as needed and $1,000 per year meal allowance to be paid semi-annually. Personal housing must be obtained and fully paid for by the Resident.

Details of any other optional/additional living conditions benefits provided by the Hospital are outlined in Exhibit A, attached and incorporated by reference herein.

**IV. Hospital Responsibilities**

A. **Institutional Accreditation:** Maintain Institutional accreditation for patient care services with the accrediting agency approved by Advocate.
B. **Program Accreditation:** Provide oversight of all CODA sponsored Residency Programs via the Graduate Medical Education Committee to ensure that the Program provides quality education and is in compliance with all accreditation requirements. Both the Hospital and the program are responsible to provide orientation and ongoing education and updates, as necessary, to residents(s) regarding all applicable policies and procedures to include but not be limited to Duty Hours and Moonlighting.

C. **Environment of Training:** Provide a suitable environment for graduate dental education consistent with the standards promulgated from time to time by the Commission on Dental Accreditation (CODA). This includes responsibility for promoting an ethical, professional and educational environment that supports Resident learning and achievement of the core goals and proficiencies of the General Practice Residency as defined by CODA. The Hospital is also committed to promoting safety and quality education through carefully constructed duty assignments, standardized transitions of care, and faculty supervision and availability.

D. **Commitment of Resources:** Provide sufficient Institutional resources to the best of its ability to ensure effective implementation and development of all Hospital sponsored and administered Programs in compliance with both Program and Institutional accreditation requirements.

E. **Designation of Director:** Designate a Program Director to serve as the person or persons responsible for the implementation of this Agreement and for the overall supervision of the Resident.

F. **Resident Involvement:** Provide opportunity for involvement of the Resident in areas of interest for his /her education or patient care through appointment to appropriate Hospital councils or committees.

G. **Education and Work Environment:** Provide an educational and work environment in which residents may raise and resolve issues without fear of intimidation or retaliation.

H. **Evaluation:** Provide the Resident with regular feedback on performance, ability, knowledge and patient care skills. Provide a written evaluation of his/her work and performance by the appropriate Program Director or designee at least 3 times annually. Maintain a personal record of evaluation/performance which is accessible to the Resident.

I. **Remediation:** Provide a program of remedial opportunities to the Resident who needs to develop or enhance skills or behaviors as deemed necessary by the Program Director and faculty.

J. **Grievance/Due Process:** Inform the Resident of, and make available the Advocate Graduate Medical Education Policy on Grievance describing how the Resident can adjudicate his/her complaints and grievances related to the work environment or issues related to the Program or faculty and the Advocate Graduate Medical Education Policy on Due Process/Appeals which addresses any academic or disciplinary actions taken against a Resident that could result in dismissal, non-renewal of a Resident Agreement, non-promotion, or other actions that could significantly threaten a Resident's intended career development.
K. Impairment and Substance Abuse: Inform the Resident and make available, the Advocate Human Resource Policies: *Fitness for Duty- Behavior, SYS 013.029 and Fitness for Duty- Drug and Alcohol Abuse, SYS.013.007* as the applicable Advocate policies dealing with resident physician impairment, including impairment related to substance abuse.

Advocate will provide the Resident with an educational program regarding physician impairment, including substance abuse.

L. Harassment: Inform the Resident and make available, the Advocate Human Resource Policy: *General and Sexual Harassment: SYS.013.015* prohibiting harassment in any form and describing the protocol for addressing complaints consistent with the law and due process.

M. Accommodation for Disability: Inform the Resident and make available, the Advocate Human Resource Policy: *Reasonable Accommodation, SYS.013.001* pertaining to qualified applicants and Advocate employed Residents requesting accommodation for disability.

N. Hospital Sponsored Counseling: Inform the Resident and make available, the Advocate Human Resource Policy: *Employee Assistance Program, SYS.013.034* regarding access to sponsored counseling and other support services on a confidential basis, including matters related to Resident impairment.

O. Confidentiality: The Hospital expressly acknowledges its obligations as a provider of health care and as an educational institution to maintain as confidential the records of the Resident. These records may be delivered to other health care treatment institutions or prospective employers only upon written request to the Hospital by the Resident in such form as designated by the Hospital. Records will be furnished to appropriate governmental agencies as required by law.

V. Resident Responsibilities

A. Compliance with Laws, Regulations and Accreditation Requirements: The Resident acknowledges that the Hospital has certain obligations in connection with applicable laws, regulations and accreditation standards. The Resident further acknowledges that the Hospital, from time to time, may adopt policies, procedures, and/or documentation requirements in connection with the implementation of such laws, regulations, and accreditation standards. The Resident agrees to cooperate fully with the Hospital in compliance with all applicable laws, regulations and accreditation standards as may be enacted or amended from time to time and with all implementing policies, procedures and/or documentation requirements now in existence or as may be adopted or amended by the Hospital from time to time.

B. Educational Activities: The Resident agrees to participate fully in the educational activities of the Program, including rotations, continuity and/or community clinics, and the performance of scholarly and research activities as assigned by the Program Director, attend all required educational conferences, assume responsibility for teaching and supervising Residents and students and participate in assigned Hospital, Medical Staff and Program activities. This includes compliance with all required computer based
training modules as assigned. The Resident also agrees to submit faculty and Program evaluations in a timely manner as requested.

C. Development of Program of Study: The Resident agrees to develop and follow a personal program of study and professional growth with guidance from the Program Director and faculty in order to demonstrate ability to assume graded and increasing responsibility for patient care. Furthermore, the Resident agrees to participate in safe, effective and compassionate patient care under supervision commensurate with their level of training and responsibility.

D. Professionalism: The Resident agrees to conduct himself/herself in a professional manner consistent with Advocate, Hospital and Medical Education Department policies. The Resident agrees to accept and respect the Mission, Values and Philosophy of Advocate Health Care and its values of equality, compassion, excellence, partnership, and stewardship and to treat all patients, colleagues, associates and visitors in a respectful and courteous manner and to adhere to Advocate’s Behaviors of Excellence.

E. Health Services Compliance: The Resident agrees to comply with Hospital or Advocate System requirements concerning either periodic health monitoring, vaccination or additional required testing relating to the Resident’s ongoing health status.

F. Participation in Committees: The Resident will participate, if appointed, on Hospital and/or Program committees or councils that relate to Resident education or improvement in patient care.

G. Medical Records: The Resident acknowledges that all patient related records are the property of the Hospital and agrees to cooperate fully with Hospital, Program and Medical Staff policies regarding the completion of medical records.

H. Confidentiality: The Resident agrees to maintain the confidentiality of all written, oral or computerized information relating to the Hospital, patients and family members and to adhere to the Advocate HIPAA Health Care Business Conduct principles at all times. The Resident understands that his/her assigned electronic log-on constitutes his/her legal electronic signature and agrees to not share the assigned log-on or password.

I. Quality Improvement/Risk Management: The Resident agrees to participate in and cooperate with Quality Improvement/Risk Management activities as directed by the Program Director and to provide such information as may be required to fulfill the Quality Improvement/Risk Management efforts of the Hospital. The Resident also agrees to participate in the defense of any claims arising during residency both during the term of this Agreement and after completion of the Program.

J. Return of Materials: At the time of the expiration or in the event of termination of the Agreement, the Resident shall return all Hospital and/or Program property, including but not limited to books, equipment, keys, pagers; complete all necessary records; and promptly settle all professional and financial obligations.

K. Nondiscrimination: In performing under this agreement, the Resident shall not discriminate on the basis of race, sex, color, age, religion, national origin, disability, health status, sexual orientation, source of payment, or ability to pay for services rendered.
VI. Other Terms and Conditions

A. Hours of Duty

The Resident understands and agrees that the hours of duty will vary with the clinical services to which he/she is assigned; that there are no pre-determined hours of duty; and that the hours will be based in part by the clinical service to which he/she is assigned, the needs of the patients, and the needs of the Hospital to provide safe, and effective patient care. It is the responsibility of the Program and Hospital to establish dental rotations and assignments in keeping with ACGME duty hour requirements as per the Advocate Graduate Medical Education Policy on Duty Hours, Fatigue Management and Mitigation. It is the responsibility of the Resident to adhere to the duty hour guidelines and to complete in a timely manner any Program or Hospital monitoring requirements related to duty hours, as requested.

B. Moonlighting: Moonlighting is defined as voluntary, compensated, medically related work (not related to training requirements) performed either; within the institution in which the Resident is training; at any of its related participating sites, or at an outside institution unrelated to the Resident's training program. No Resident can be required to engage in such moonlighting activities. Residents may not engage in moonlighting without prior notification to and written permission of the Program Director as per the Advocate Graduate Medical Education Policy on Moonlighting. The Program Director reserves the right to prohibit moonlighting if such employment may interfere with the Resident's duties and obligations to the Program or interfere with his/her clinical performance. Moonlighting activities, whether occurring within the sponsoring hospital or elsewhere, are not covered by Advocate's Professional Liability Insurance as detailed in this Agreement.

C. Restrictive Covenant: Hospital shall not require Residents to sign a non-competition guarantee.

D. Termination, Promotion/Re-Appointment

1. Termination for Cause: The Hospital may terminate this Agreement at any time for cause, effective upon receipt of written notice to the Resident. Cause shall include but not be limited to:
   a. Professional incompetence,
   b. Failure by the Resident to obtain or maintain appropriate professional license or valid visa/work authorization,
   c. Serious neglect of duties or violation of Hospital rules, regulations or policies by the Resident,
   d. Conduct by the Resident seriously and clearly prejudicial to the best interests of the Hospital,
   e. Acts of fraud, dishonesty or misconduct determined to render the Resident professionally unfit to practice,
   f. Conviction of the Resident of any crime punishable as a felony,
   g. Exclusion from or sanction by the Medicare, Medicaid or other public health program.

Termination of the Resident Agreement is subject to the Advocate Graduate Medical Education Policy on Due Process/Appeals.
2. **Termination of Agreement by Resident:** The Resident may terminate this Agreement and withdraw from the Program after written notice to and discussion with the Program Director. Written notice must be given in reasonable period of time; not less than 90 days prior to the Agreement term date.

3. **Conditions for Promotion/Reappointment:** The Hospital’s appointment of the Resident shall be for one year and promotion/reappointment to a subsequent year of residency (if applicable) shall require the execution of a new agreement.

   Promotion/Reappointment to the next level of training is at the sole discretion of the Program and is expressly contingent upon the resident’s successful achievement of Program specific promotion/graduation criteria; satisfactory performance evaluations; full compliance with the terms of this Agreement; continuation of the Hospital’s and Program’s accreditation; and Hospital’s financial ability.

4. **Non-Promotion/Non-Renewal of Appointment:** Should the Program decide not to promote/reappoint the Resident to a subsequent year of training (if applicable), the Program will provide the Resident with written notice of intent within a reasonable period of time; not less than 90 days prior to the Agreement term date. Non-reappointment/non-promotion is subject to the Graduate Medical Education Policy on Due Process/Appeals.

5. **Non-Renewal by Resident:** If the Resident intends not to seek reappointment, he/she agrees to give the Program Director written notice within a reasonable period of time; not less that 90 days prior to the Agreement term date.

6. **Program Closure/Reduction:** In the event that the Hospital and/or Program are closed or there is a reduction in the total number of Residents in the Program, the Hospital will inform the site Associate Designated Institutional Official, the Graduate Medical Education Committee and the Program/Residents as soon as possible. Notification will be both verbal and written. The Program and Hospital will use its best efforts to allow the Residents to complete the Program. In the event that continuation/completion is not feasible, the Hospital will use its best efforts to transfer the Resident to another accredited Program.

E. **Notice:** Any notice given in connection with this Agreement shall be in writing and delivered by hand or certified mail, return receipt requested as follows:

   To Hospital:
   
   Name of Hospital
   Address of Hospital
   City, State, Zip Code

   Attn: Name of Site Associate Designated Institutional Official

   With a Copy to:
   
   Advocate Health Care
   3075 Highland Pkwy
   Downers Grove, Illinois 60615

   Attn: Chief Academic Officer
   Advocate Designated Institutional Official
To Resident:
Name of Residency Program
Address of Hospital
City, State, Zip Code

Attn: Name of Resident

Any party may change the address stated herein by giving written notice of the change in accordance with this paragraph.

F. Medical Staff Membership: no provision of this Agreement shall be construed in any manner as an assurance of or guarantee of initial appointment to Medical Staff Membership during or at termination of training.

G. Amendment and Assignment: This Agreement may be amended only in writing and signed by both parties. This Agreement may not be assigned to another party.

H. Governing Law: This agreement shall be construed under the laws of the State of Illinois.

I. Entire Agreement: This Agreement contains the entire understanding of the Hospital and the Resident and supersedes all negotiations, prior or contemporaneous discussions, or agreements or understandings, whether written or oral.
IN WITNESS WHEROF, this agreement has been executed by the Hospital and the Resident on the date first written above.

BY SIGNATURE BELOW, all parties attest that they have read and understood the terms of the Agreement as set forth above.

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Resident</th>
</tr>
</thead>
<tbody>
<tr>
<td>By: _________________________</td>
<td>Signature</td>
</tr>
<tr>
<td>James Benz, DDS</td>
<td>Date</td>
</tr>
<tr>
<td>Program Director</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Advocate Health Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>By: _________________________</td>
</tr>
<tr>
<td>Robert Zadylak, MD</td>
</tr>
<tr>
<td>Date</td>
</tr>
<tr>
<td>Associate Designated Institutional Official</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Chief Academic Officer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thomas Hansen, MD</td>
</tr>
<tr>
<td>Designated Institutional Official</td>
</tr>
</tbody>
</table>
### EXHIBIT A
**ADVOCATE ILLINOIS MASONIC MEDICAL CENTER**  
**2016 – 2017 RESIDENT PHYSICIAN AGREEMENT**  
**ADDITIONAL/OPTIONAL RESIDENT BENEFITS**

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Education Allowance</strong></td>
<td>As per individual Program/Fellowship.</td>
</tr>
<tr>
<td><strong>Lab Coats Laundry Service</strong></td>
<td>Laundry service for lab coats is provided at no cost to the resident.</td>
</tr>
<tr>
<td><strong>Flexible Spending Accounts</strong></td>
<td>All residents are eligible to enroll in a plan to set aside pre tax dollars to pay for health care or dependent care expenses. Information to be provided prior to enrollment at orientation and the annual open enrollment period.</td>
</tr>
<tr>
<td><strong>Retirement Savings Plan (401K)</strong></td>
<td>All residents are eligible to opt in or out of a plan to use pre tax dollars to contribute toward a retirement account. Contribution and vesting information is provided prior to enrollment at orientation and the annual open enrollment period.</td>
</tr>
<tr>
<td><strong>Financial Services</strong></td>
<td>Participation in a credit union/bank that offers a variety of financial services.</td>
</tr>
<tr>
<td><strong>Direct Deposit</strong></td>
<td>Deposit of your bi-weekly paycheck directly to your checking and/or savings account.</td>
</tr>
<tr>
<td><strong>Fitness Room</strong></td>
<td>Located in Barr Tower. All residents are eligible to participate.</td>
</tr>
<tr>
<td><strong>Parking</strong></td>
<td>Residents may choose to pay for covered/secured parking at a discounted rate. Payment is per payroll deduction.</td>
</tr>
</tbody>
</table>