Frequently Asked Questions:

1. How large of a problem is substance use disorder among physicians, and how long does it usually take physicians to recover?

2. What kinds of problems will the PHP accept, and can we be sued for reporting a physician?

3. What are the benefits of the PHP and is there any cost?

4. If a person is referred to the PHP, does this threaten his or her license?

5. Is the PHP affiliated with the State Board of Medicine, and how does the PHP work with the board?

6. Why should we have a Medical Staff Health Committee and who should be on the committee?

7. Because of the need for confidentiality, how will committees know the status of a physician in the PHP program?

8. How can the Employee Assistance Program best relate to the Medical Staff Health Committee and the PHP?

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1. How large of a problem is substance use disorder among physicians, and how long does it usually take physicians to recover?

- Physicians are people too. It is as great among physicians as in the general population.
- The good news is that when physicians enter a specialized recovery program, such as the PHP, their prospects for recovery are much higher than those for people in the general public. The initial steps of recovery may be accomplished over a period of months.
- Long-term recovery must be managed just as a chronic condition. It is a lifelong commitment to remain in stable recovery.

2. What kinds of problems will the PHP accept, and can we be sued for reporting a physician?

- The PHP provides services to physicians and other HCPs who are diagnosed with substance use disorders, mental health diagnoses, or behavioral concerns.
- Those with behavioral problems or sexual boundary issues are referred for evaluation. Often these are part of a substance use disorder or psychiatric disorder. Subsequent PHP involvement will depend on the diagnosis.
- Your hospital attorney should be involved in the establishment of your Medical Staff Health Committee. You need to consult with the PHP and keep your attorney apprised in the management of a potential case.
- While the possibility of a suit is always there, that risk must be weighed against the risk of being sued by an injured patient for damage done in the hospital by an impaired physician.

3. **What are the benefits of the PHP and is there any cost?**

- The PHP works. A high percentage of participants adhere to the program and have abstained from drugs or alcohol for five years or longer. A distinctive feature of the PHP is its comprehensive long-term monitoring system.
- The PHP staff answers inquiries from medical staff leaderships, administrations, partners, and spouses about how to approach a physician who may be having a problem. PHP staff can also assist in confronting a physician.
- The PHP has vast experience with treatment facilities nationwide that would be best suited to a particular individual's needs.
- Our medical director is trained in addiction medicine.
- No cost for the referring source.
- The costs participants are responsible for include initial treatment, drug testing, ongoing therapy, and monthly monitoring fees paid to the PHP. Participants are also responsible for all costs associated with their treatment and monitoring. When first entering the program, the PHP charges a case initiation fee. There is also a fee for letters written on a participant's behalf.
- The PHP has a scholarship available to help pay monitoring costs. (Application is available online.)

4. **If a person is referred to the PHP, does this threaten his or her license?**

- No. If the individual is not revealed to the State Board of Medicine at the time of the referral, the referral is confidential and will not threaten his or her license.

5. **Is the PHP affiliated with the State Board of Medicine, and how does that relationship work?**

- The PHP is a program of The Foundation of the Pennsylvania Medical Society. Cases referred directly to the PHP are not reported by the PHP to the State Board of Medicine.
- When the board becomes aware of a case through licensure application, reports directly to the board, etc., the PHP does monitor that physician and report program compliance to the board on a quarterly basis.

6. **Why should we have a Medical Staff Health Committee and who should be on the committee?**

- Medical staffs sometimes subscribe to the folklore that doctors are too smart to develop a substance use disorder. A lack of awareness about substance use disorder can greatly delay intervention and treatment for a colleague making the road to recovery longer, more difficult, and expensive.
- Substance use disorder cases are hard to handle successfully. A body of specialized knowledge found in a committee is far more likely to address the situation professionally than an ad hoc effort.
- Confrontations, poorly assembled without credible evidence, can backfire and wind up in expensive public litigation for the staff and hospital.
- A strong responsibility of the Medical Staff Health Committee is education - it must keep the awareness level of potential substance use disorder problems high among the hospital staff and leadership through formal programs and informal interaction.
- The PHP is a phone call away, but the Medical Staff Health Committee is local. Its members are in the hospital every day. They pick up signals much earlier and will not hesitate to call the PHP if they believe a situation needs attention.

- Today's emphasis on quality and outcomes requires every member of the medical staff to function at his or her best level. It doesn't make sense to assign people to monitor every other aspect of clinical activity and then ignore the health of the staff.
- The committee should reflect the demographics of the staff because different kinds of illnesses cut across all ages and genders. In addition, it is highly recommended that recovering colleagues be included because of their special insights.

7. Because of the need for confidentiality, how will committees know the status of a physician in the PHP program?

- The Medical Staff Health Committee is the advisor to the Executive Committee, and it operates under the protection of the Peer Review Law. With consent, reports can be released from the PHP to designated hospital representatives.

8. How can the Employee Assistance Program best relate to the Medical Staff Health Committee and the PHP?

- If a physician is referred to the Employee Assistance Program (EAP), we suggest that the EAP conduct an initial screening contact just as it would for almost any referral.
- At that point, we strongly recommend that the EAP contact the Medical Staff Health Committee (MSHC) and/or PHP to consult on any additional assessment that may be appropriate, and jointly agree on referrals that should be made.
- The PHP acts as a valuable resource for the MSHC or EAP in these situations. Consultation before recommendations and case dispositions made can prevent many problems.
- Our experience has shown that physicians are very good at minimizing their problems and manipulating EAP personnel because of a physician's powerful role in the hospital. It is very important that a physicians' peer assistance program be utilized to help with intervention and treatment.
- The MSHC can be engaged to help with appropriate intervention or assistance in deciding alternatives for referral.
- Because a physician is not likely to be cooperative during this process, the involvement of the PHP and the MSHC will be very helpful in reaching an appropriate disposition.

If you have additional questions, please give us a call at (866) 747-2255 or (717) 558-7819.