

**NAME OF MEDICAL SOCIETY**  
**Physician Wellness Program Policies (Outsource Model)**

As a no-cost benefit to its members, NAME OF MEDICAL SOCIETY provides a limited number of appointments to any one or more of its contracted psychotherapists.

**Contracted Therapists**

We have selected several different therapists based on their reputation, location, and professional courtesy in delivering these services to our members. Therapists are paid per hourly session at the rate of \$XXX. They include Doctoral Level Psychologists, Licensed Clinical Professional Therapists, and Licensed Clinical Social Workers. Some have additional licensure as family and marriage or addiction therapists or have received national board certification. All therapists must hold current and appropriate State of XXXX licenses for the services they provide.

Our clinicians have been sensitized to the stressors faced by medical providers, including unforeseen medical outcomes, dealing with bureaucracy, loss of autonomy, depression, functional addictions, work/life balance, etc. They may be invited to NAME OF MEDICAL SOCIETY/ABBREVIATION events to introduce the program or to become more sensitized to challenges faced by physicians.

Should a counselor lose qualifications for licensed service, fail to renew licensure, lose or fail to renew professional services liability insurance, relocate counseling practice from XXXX County, or in any other way fail to maintain professional qualifications for this service, the contract with that counselor will be immediately cancelled.

**Services**

Access to these services is completely voluntary and based solely on a member's own initiative. Members may access up to NUMBER (X) one-hour appointments with our therapists during a single twelve-month period, based on the date of the first appointment. Services may include individual or family therapeutic counseling, psychological evaluation or referrals. If ongoing therapy is desirable, the member may make separate payment arrangements with the therapist.

Members may utilize more than one of our therapists as part of this benefit based on preference, availability, treatment focus, etc. However, only a total of 8 one-hour sessions will be paid for by NAME OF MEDICAL SOCIETY/ABBREVIATION.

**Confidentiality**

All services are confidential within the therapist-member client relationship. Limited handwritten and locally stored therapeutic notes will be kept by the therapist. There are a limited number of legal circumstances in which a therapist may be required to break confidentiality, such as imminent danger to self or others, which are outlined in the Informed Consent form.

NAME OF MEDICAL SOCIETY/ABBREVIATION will have no knowledge of which members have accessed these services. Billing for these services will be made through a firewalled third-party channel located out of state whose role will be to aggregate demographics, verify NAME OF MEDICAL SOCIETY/ABBREVIATION membership status and forward on approved bills for payment. The third party biller may contact therapists with any questions or to notify them when

members utilize more than one therapist participating in the program in order to coordinate the limited number of appointments allowed.

Contracted therapists are not allowed to communicate the identity of program utilizers to NAME OF MEDICAL SOCIETY/ABBREVIATION for any reason without the express written consent of the member.

There may be limited times where a therapist believes an NAME OF MEDICAL SOCIETY/ABBREVIATION member client is impaired in a way that threatens them to safely provide medical care, therapists may consult with the NAME OF MEDICAL SOCIETY/ABBREVIATION PHYSICIAN WELLNESS PROGRAM Medical Director or PRN about appropriate resources, including self-referral to the STATE PHYSICIAN HEALTH PROGRAM or STATE PROGRAM for Recovering Nurses. However, all consultation information will be limited to de-identified data and members' identities will not be communicated or implied, directly or indirectly without the express written consent of the member.

### **Eligibility**

In order to access services, program utilizers must be current with their NAME OF MEDICAL SOCIETY/ABBREVIATION membership dues (including the 3-month grace period following the beginning of the calendar year) at the time of making appointments.

Participants maybe any of NAME OF MEDICAL SOCIETY/ABBREVIATION enrolled members including:

- a doctor of medicine or osteopathy
- nurse practitioner
- physician's assistant
- medical resident
- retired members living within NAME OF MEDICAL SOCIETY/ABBREVIATION territory
- medical students doing rotations or attending classes in XXXX Counties.

Therapists will take primary responsibility for verifying the eligibility of the physician before billing for the first session. They can do so with the Physician Finder tool on the XXXXX website.

The Services do not include counseling or other services for relatives of a Member unless the Member is present and participates in the counseling session. The client of record shall remain only the NAME OF MEDICAL SOCIETY/ABBREVIATION Member.

### **Appointments**

Appointments will be for one hour sessions and can generally be made within 1-2 weeks' time. Urgent appointments to deal with an acute situation may be made at the discretion of the therapist.

Contracted psychologists will be listed on the NAME OF MEDICAL SOCIETY website under NAME OF PROGRAM, along with their treatment foci, credentials, and a photo. Members may self-select their therapist of choice and call one directly for an appointment, stating they are a member of NAME OF MEDICAL SOCIETY/ABBREVIATION. If they would like a recommendation based on particular issues, they may call the NAME OF MEDICAL

SOCIETY/ABBREVIATION office or program medical director anonymously for direction. Obviously, this might result in loss of confidentiality.

Appointment availability will usually be provided during daytime business hours; however, some of the therapists allow for early morning, evening, and weekend hours to better accommodate our members.

### **Missed/Late-Canceled Appointments**

Members who arrive late to scheduled appointments are subject to being limited to the hour reserved by the therapist's, based on their discretion and schedule, and will still count as one of the allotted appointments per year.

Missed appointments, without at least 24 hours' notice by the member, will be counted as one of the allotted appointments per year, but may only be billed at half the normal session rate by the therapist. However, therapists may simply reschedule the appointment and not bill/count the appointment as missed at their own discretion.

### **Locations**

NAME OF MEDICAL SOCIETY/ABBREVIATION has chosen convenient locations for its members in XXXX County. Each site has a professional, quiet waiting area. If physicians are extremely concerned about anonymity, they may make arrangements with their particular therapist such as arriving off the top of the hour, texting before entering the facility, or whatever is acceptable to both.

### **NAME OF PROGRAM Committee**

The NAME OF MEDICAL SOCIETY/ABBREVIATION NAME OF PROGRAM Committee is a standing committee chartered by the NAME OF MEDICAL SOCIETY/ABBREVIATION Board of Directors to manage this program and related activities and resources. It is comprised of member physicians, doctoral level psychologists, a member psychiatrist who serves as the program medical director, and the NAME OF MEDICAL SOCIETY/ABBREVIATION executive director and others whom the committee may choose to select to be involved. At least one representative from the current NAME OF MEDICAL SOCIETY/ABBREVIATION board of directors shall be a part of the committee.

The committee is responsible for producing meeting notes, reports, policy changes, and evaluations for the board as requested or required.

### **Medical Director**

The Medical Director will be an NAME OF MEDICAL SOCIETY/ABBREVIATION member psychiatrist willing to serve as a volunteer with the NAME OF MEDICAL SOCIETY/ABBREVIATION Board of Directors as oversight. Their responsibilities will include:

- Chair the NAME OF PROGRAM Committee with administrative assistance from the NAME OF MEDICAL SOCIETY/ABBREVIATION executive director
- Along with the NAME OF PROGRAM Committee, to manage and develop appropriate policies and procedures so that the program meets the community standard of care
- Along with the NAME OF PROGRAM Committee, Evaluate the program's effectiveness and report its findings to the NAME OF MEDICAL SOCIETY/ABBREVIATION board on a regular basis

- Along with the NAME OF PROGRAM Committee, to promote the program within the medical community
- Allow self to be listed publicly as the medical director
- Act as a liaison for contracted therapists providing resources them with challenging cases, referral needs, communication with the NAME OF PROGRAM Committee, and so forth.

The Medical Director will NOT do any peer review of contracted services provided to individual member clients.

It is understood that according to STATE statute, "...officers, directors, and volunteers who serve the nonprofit corporation or organization without compensation and trustees of the charitable trust who serve without compensation shall be personally immune from civil liability arising out of their conduct..." (LINK TO RELEVANT STATE STATUTES)

### **Marketing**

NAME OF MEDICAL SOCIETY/ABBREVIATION will utilize its web-site, email list, brochures and handouts to communicate directly with its member about this program. It will also work with hospital systems and large group employers to disseminate information to its members. Eventually, NAME OF MEDICAL SOCIETY/ABBREVIATION will also market the program directly to potential members as a benefit of joining NAME OF MEDICAL SOCIETY/ABBREVIATION through membership in the IMA. It is not the intent of NAME OF MEDICAL SOCIETY/ABBREVIATION to draw public attention to this program at this time, preferring to keep its existence known mostly in the medical community.

Neither NAME OF MEDICAL SOCIETY/ABBREVIATION nor CONTRACTOR will not use any photos of local physicians as "clip-art" to promote this program and will use generic, out-of-area sources instead. Only quotes or testimonials that have been authorized and given express written permission to utilize for this program will be used to promote it.

Aggregated demographics will be used for internal evaluation purposes and may be used to demonstrate the reach of the program.

### **Program Integration**

These services will not be integrated into ANY mandated program by the State Board of Medicine, Physicians Recovery Network, peer review boards, or other disciplinary efforts around licensure, credentialing or employment. However, NAME OF MEDICAL SOCIETY/ABBREVIATION will seek endorsement by such programs as a voluntary means of seeking support and assistance for its members.

### **Program Demographics**

Demographics on program utilizers will be collected by the therapist and forwarded to NAME OF MEDICAL SOCIETY/ABBREVIATION through its third-party billing service. This will be collected by the therapist during each session and forwarded along with billing. Demographics need only be reported for the first session during each twelve-month period for participants.

- Age;
- Gender;
- Primary medical specialty;

- Employment status: hospital system based, independent large group  $\geq 8$  providers or independent small group  $< 8$  providers;
- Presenting problem (i.e. depression, marital, financial, litigation, etc.);
- Referral types;
- Urgency of appointment;
- Number of appointments per member;
- Have you filled this card out with this or another therapist within the last twelve months?

### **Program Survey**

An anonymous program survey and stamped envelope will be provided to the physician during the first appointment with a verbal reminder given by the clinician to fill it out at the end of treatment.

### **Finances**

This program will initially be funded out of the NAME OF MEDICAL SOCIETY/ABBREVIATION General Fund. However, in the future, it may be funded out of the NAME OF MEDICAL SOCIETY/ABBREVIATION Foundation through donations, corporate contributions, and/or grants.