



2023 Annual Report of the Physician Health Program

Our Mission:

To promote and support the physical and mental well-being of healthcare professionals thereby contributing to overall safe and competent patient care in Rhode Island

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RI Medical Society Foundation

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Program Office Staff

Kathleen Boyd, MSW, LICSW
Program Director
401-443-2383
kboyd@rimed.org

Rita T. Towers, MSW, LCSW
Clinical Associate
401-443-2389
rtowers@rimed.org

ABOUT THE PHYSICIAN HEALTH PROGRAM

The Rhode Island Medical Society's Physician Health Program is a confidential resource for physicians, PAs, dentists, and podiatrists in Rhode Island who may benefit from help with addressing physical and/or behavioral health concerns that may be affecting their personal and professional quality of life. We offer the following services:

Clinical Services

- Intake Assessment
- Case Management

Ongoing monitoring when indicated for substance use and psychiatric disorders, dual diagnosis, and other behavioral health concerns; advocacy on behalf of healthcare practitioners if warranted.

- Recovery Support Groups for healthcare practitioners

Community Resource & Referrals

Collaboration with the following entities:

- Board of Medical Licensure & Discipline (BMLD)
- Board of Examiners in Dentistry
- Hospitals
- Medical practices/colleagues
- Residency and other training programs
- Community at large (patients, family members, etc.)

Educational

- Advisors to Brown University's Alpert Medical School Student Health Council
- Speaker's Program (Presentations to medical and physician assistant students, residents, fellows, hospitals)
- Regional and national organization involvement (Federation of State Physician Health Programs)



~ Celebrating New Horizons ~

Dear Colleagues,

The Rhode Island Medical Society's Physician Health Program (RIPHP) celebrated **Herbert Rakatansky, MD**, for his forty-five years of leadership as Chair of the Physician Health Committee (PHC) at the Society's annual meeting in September 2023. Dr. Rakatansky formally stepped down as chair but will remain on the PHC as a contributing member. Stepping into the chair position is **Martin ("Marty") Kerzer, DO**, who has been a member and also vice-chair of the PHC since he joined in 1992. We are fortunate to have his expertise and long commitment to physician health. This change in leadership comes at the same time as my retirement as the Program Director. Stepping into the director position is **Steve Carreras, PhD, LCSW**, who has been the dedicated clinical case manager at the Medical Society of the District of Columbia's Physician Health Program since 2016. Besides being a licensed clinical social worker, Steve has a PhD in Social Policy and Management from the Heller School for Social Policy at Brandeis University. So, I leave the program in very good hands.

The past eleven years has been an ongoing process of growth and learning with each new participant in the program. But, like all medicine, each case brings back the knowledge of the importance of approaching the care of participants in a similar manner. Regardless of the struggles and concerns that bring health care practitioners to our program, each person deserves a safe, respectful, and compassionate place to explore options for moving forward in their personal and professional lives. Sometimes a compassionate response comes naturally when someone is open about their pain – sadness, shame, grief, anxiety, depression, substance use – and sometimes, when someone comes with much anger due to feeling misunderstood, mistreated, maligned, or even railroaded – the ability to find that same compassionate response may be harder to find, but no less needed. Distress comes in many different forms and circumstances. Sometimes the opportunity to be "heard", listened to, understood, and "seen", in a concentrated, uninterrupted manner, can be powerful unto itself. Offering a caring connection during difficult times sounds simplistic, I'm sure, but ultimately it can make a tremendous difference in someone's life.

So, here's to New Horizons – the opportunity for new ideas and new visions for the Physician Health Program. Please know that it has been my honor to be part of this very special program.

The following report summarizes the activities and efforts of the Physician Health Program in 2023.

Respectfully submitted,

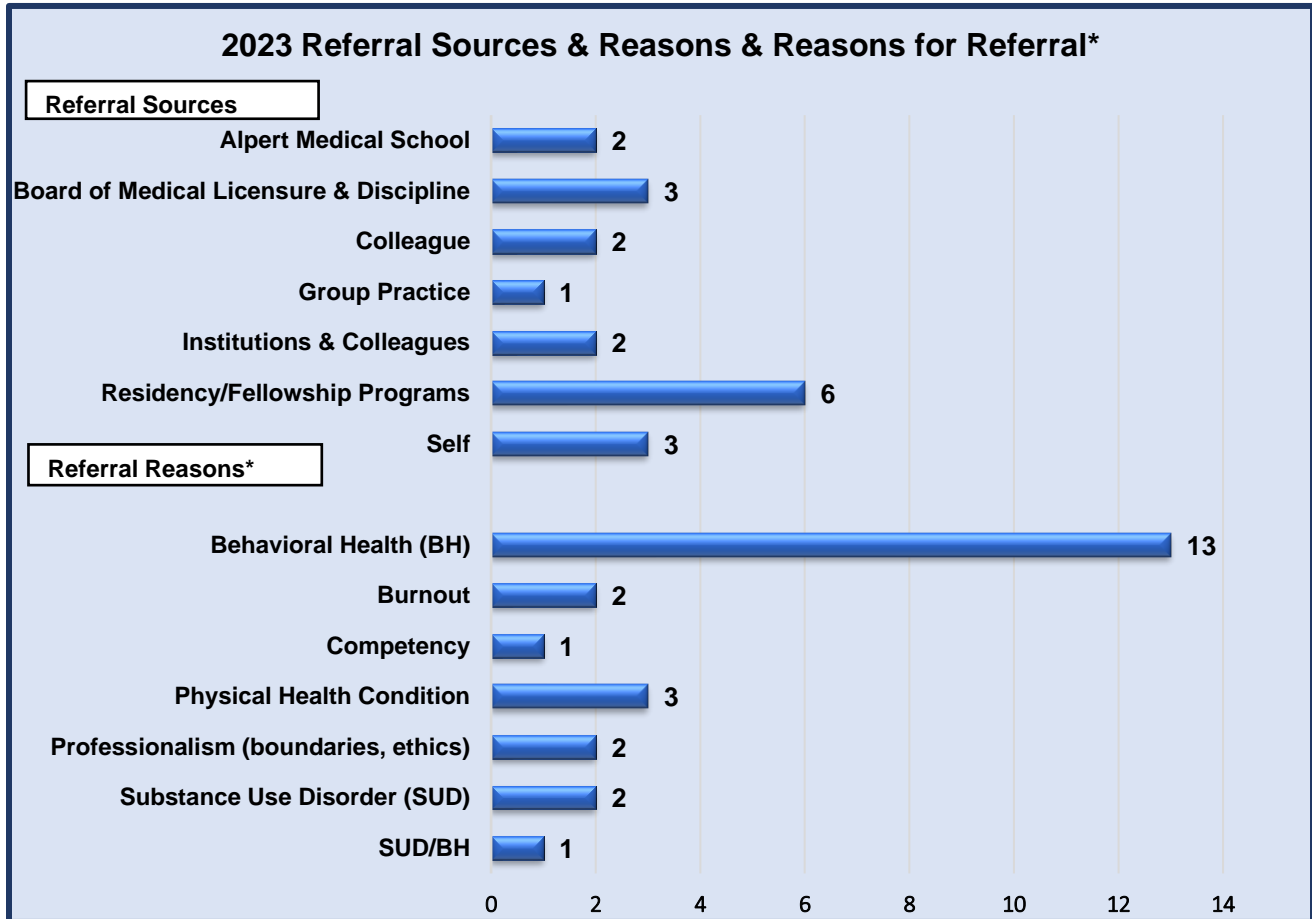
Kathleen Boyd, MSW, LICSW
Director, Physician Health Program

~ Year in Review ~

January 1, 2023 to December 31, 2023

CLINICAL ACTIVITIES

During the past year, the Rhode Island Medical Society's Physician Health Program (RIPHP) received **19** referrals to the program. During the year, we were able to close **35** cases, bringing the year-end active cases to **70**. The sources of our program referrals in 2023 and reasons for the referrals are shown in the chart below:



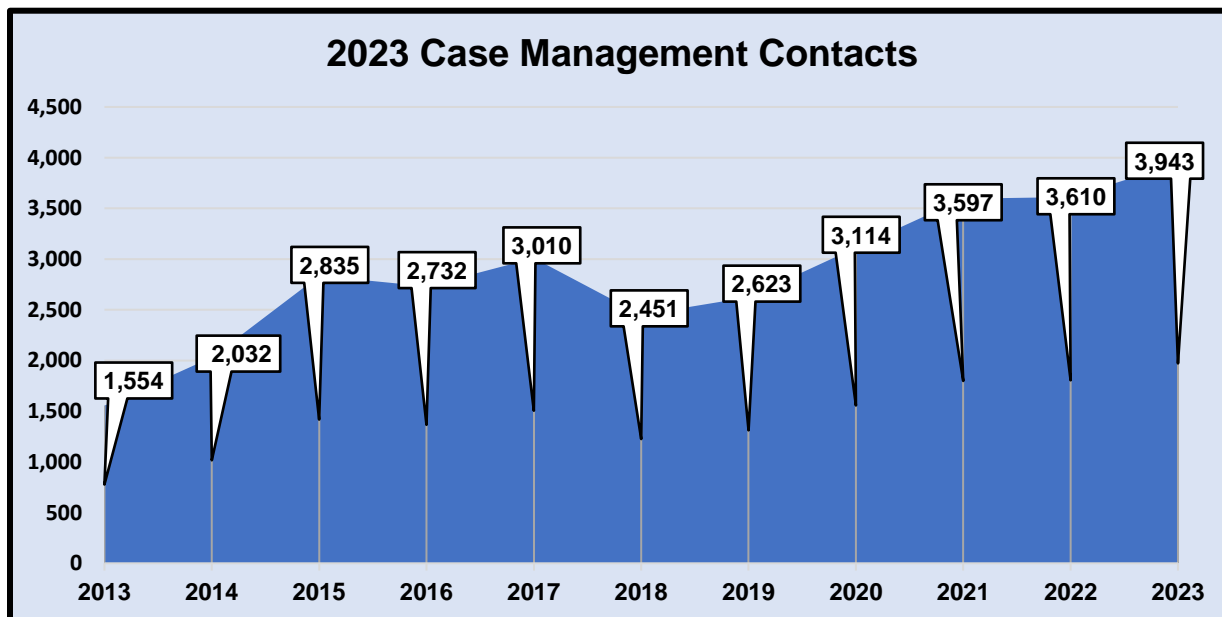
**Please note some cases were referred for more than one reason.*

In 2023, we again had significant referrals in the behavioral health category as well as several referrals related to underlying, serious medical conditions. There are often overlapping reasons for referrals related to underlying health and/or mental health conditions, including substance use disorders.

Of the **19** referrals to RIPHP in 2023, only one represented a case that was re-opened, meaning the individual had previous contact with our program. The breakdown of the status of these cases is shown below:

Disposition of 2023 Referrals	N = 19	%
Monitoring Agreements: SUD	3	16.0
Monitoring Agreements: BH	3	16.0
Supportive Case Management: Periodic Review for support with no formal monitoring agreement	7	37.0
Consultation only	1	5.0
Deceased due to medical condition	1	5.0
Did not follow up with referral to program and/or refused recommendations	4	21.0

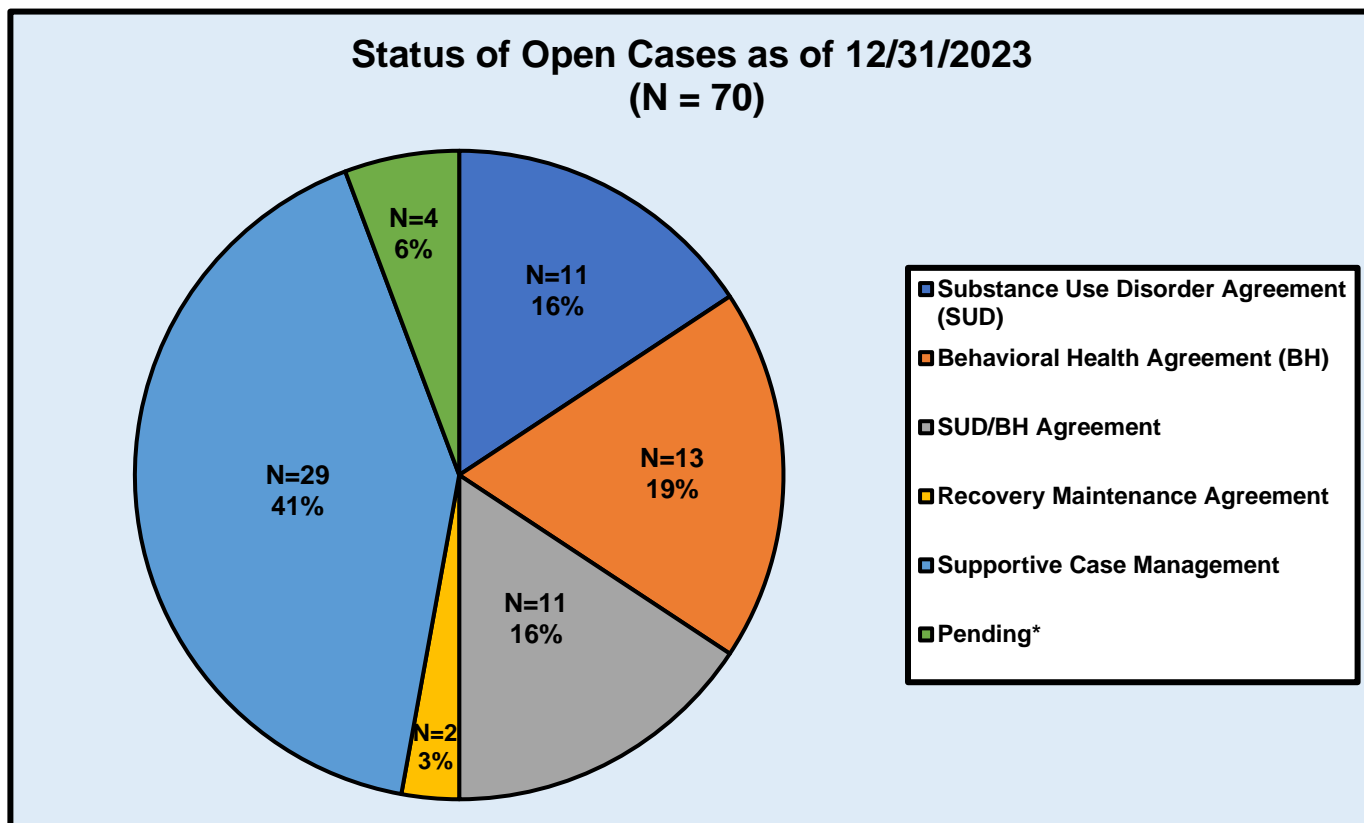
The following chart shows case management activities since 2013 when we began keeping track of this data. Case management for a single case can involve multiple collateral contacts, administrative tasks, such as advocacy and compliance letters, and daily monitoring of any toxicology results for each participant who is under a substance use disorder monitoring agreement. Examples of case management activities include participant phone calls, texts/emails, and in-person meetings as well as collateral phone calls, emails, and correspondence on behalf of a participant.



Thirty-five cases were closed by the end of the year. Cases are closed when a participant completes his/her monitoring agreement or after a disposition has been determined, following the evaluation phase, that does not require monitoring or case management support by the RIPHP. In some instances, cases are closed due to lack of cooperation or discontinued contact by participants who have not responded to outreach efforts. The chart that follows summarizes these closures:

Disposition of Cases Closed in 2023	N= 35
Evaluation/Consultation only	3
Substance Use Disorder Agreement completed	5
Behavioral Health Monitoring Agreement completed	4
Dual Diagnosis Monitoring Agreement completed	3
Recovery Maintenance Agreement completed	1
Completed period of supportive case management; ongoing monitoring unnecessary	8
Case closed due to non-compliance with monitoring agreement	2
Case closed due to death of practitioner	2
Did not follow through with referral to RIPHP and/or refused recommendations and participation	7

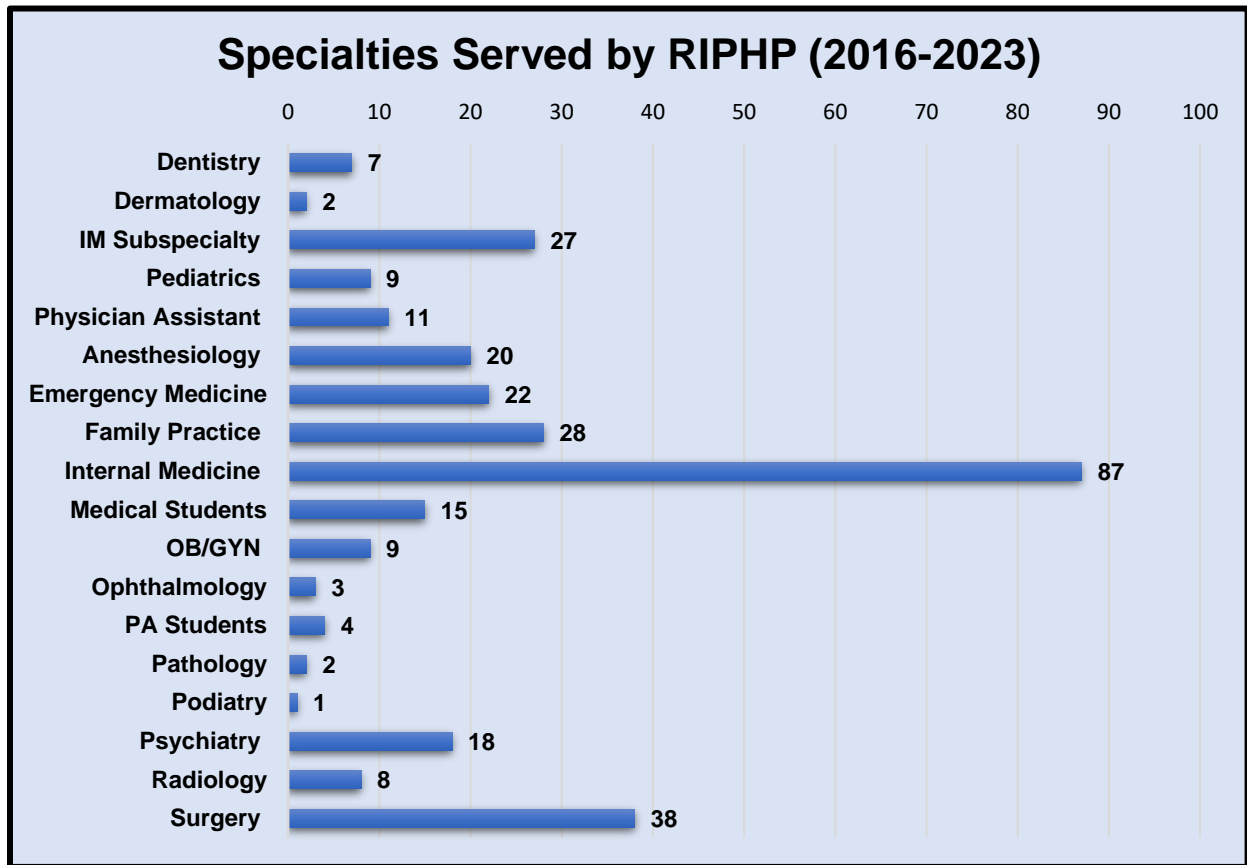
The chart below reflects the number of open cases as we begin 2024.



**Pending cases may be awaiting further evaluation, follow-up and/or outreach, or awaiting closure.*

While we know that the total number of practitioners assisted over the life of this program is large (800 cases to date), at this time we are following **46** physicians, **1** podiatrist, **12** residents, **9** medical students, and **2** PA students. Our interventions have resulted in a significant increase in medical resources available to the Rhode Island citizenry.

The following chart gives a breakdown of the various specialties that have accessed our services over the past seven years.



COMMUNITY RESOURCE

Every year at the Physician Health Program, we receive calls and emails inquiring about various concerns ranging from requests for information on treatment resources to finding guest speakers on health topics which affect healthcare practitioners. In 2023, the program received **36** requests for advice, consultations, and resource information. The types of requests received are indicated in the following chart:

2023 Requests for Consultation and/or Resource Information	N=
Concerns about colleagues and/or patients with substance use and/or behavioral health issues	4
Organizations/other healthcare professionals seeking treatment and/or other resource information	21
General Information about the RIPHP	5
Information on physician wellness and burnout	3
Information regarding assistance resources for other health care professionals (i.e., APPs, nurses)	3

EDUCATIONAL ACTIVITIES

The Physician Health Program educates physicians, physician assistants, residents, fellows, medical and PA students, health care administrators, hospitals and the general public regarding addiction and other illnesses which can affect healthcare practitioners. In 2023, we provided presentations to Lifespan, Kent Hospital, Roger Williams Medical Center, Landmark Medical Center, and Prospect/Charter Care Medical Associates. In addition, we serve as guest lecturers for physician assistant classes Johnson and Wales University. We also presented to the National Council on Dental Health.

The RIPHP staff participated in the Alpert Medical School's Mental Health Awareness Fair and the National Physician Suicide Awareness Day conference. In addition, the program director and the incoming program director, Steven Carreras, PhD, LCSW, presented a workshop at the annual conference of the Federation of State Physician Health Programs on the challenges faced by smaller physician health programs.

We continue to serve as advisors to the Brown's Alpert Medical School's Student Health Council (SHC) which is modeled after the RIPHP. This group of medical students meets once per month to discuss referrals to its peer counseling program and to plan and implement supportive wellness opportunities for medical students.

AREAS OF FOCUS FOR 2024

- Transition to new program director
- Complete update of the RIPHP Operations Manual
- Increase community awareness of RIPHP through targeted outreach efforts
- Explore options for developing separate physician wellness resources for RIMS (i.e., Safe Harbor, LifeBridge, Interactive Mental Health Screening, Peer-to-Peer Support)

What follows is a personal reflection from a participant in the Physician Health Program. We are grateful for their willingness to share their story with others.

~820 Days~

I spent a lot of time counting. The math was easy, at first. A 30-day Adderall prescription would last me 30 days. One pill each day – Simple. But as my addiction progressed, the arithmetic grew more challenging. One pill just didn't yield the same energetic focus as before. "Stupid tolerance," I'd think to myself. I began taking one and a half pills each day, which meant that my 30-day supply would only last 20 days. I lied and told myself I could go without for the other 10 days. I couldn't. Fast forward two years and I'm sitting in a parking lot in Massachusetts waiting to spend nearly \$1000 on a bulk supply of Adderall. I wasn't counting on the police arresting me in that parking lot. I wasn't counting on them informing me that the pills I was buying were counterfeit and contained methamphetamine. I wasn't counting on felony drug charges. Suddenly, I was.

Time seemed to simultaneously stand still and move at light speed in the weeks after that. I felt a visceral sense of shame, isolation, and hopelessness so profound that it still makes me feel physically ill when I reflect on it years later. I had meetings with my residency program director and leadership team, human resources, and risk management. I voluntarily surrendered my medical license and took a medical leave of absence from residency. I spent all the money I had on two separate lawyers, one for my medical license and another for the criminal charges. I didn't know who to trust, and nobody trusted me. I deserved it, I thought. I was desperate and alone with no foreseeable path forward. Then I met the folks at the Physician Health Program (PHP) of Rhode Island.

I still remember my first interaction with the PHP. Kind voices over the phone asked me how I was holding up and if I felt safe. They were honest and sincere. We met the next day, and they explained their role, how they can help and offered a path forward without unrealistic promises. They worked tirelessly to help me undergo a comprehensive evaluation in Chicago to establish a diagnosis of substance use disorder (SUD). They advocated to help me get treatment at a 6-week inpatient rehab for healthcare professionals, and to get follow up treatment in an intensive outpatient program when I returned home. They notified the medical board of their endorsement when I completed my treatment. They worked with my lawyers to provide proof of the substance use disorder diagnosis and treatment, which resulted in my criminal charges being dismissed entirely. It is not hyperbole to say that the PHP helped to save my sanity, my career, and my life.

Things are a bit less exciting nowadays – I'm grateful for that. I have a 5-year agreement with the PHP which requires me to meet with a therapist, attend meetings and perform weekly random drug screens. I'm thankful for the companionship and ability to document a trail of my continued sobriety. I am truly humbled to say that I have been able to return to work and will complete my residency this year. The deep sense of shame I once felt has abated, and I even gave a presentation to colleagues detailing my story of addiction and recovery. The PHP's support, advocacy, encouragement, and understanding were paramount in getting me through the most difficult time of my life. I'm forever grateful to the people there. The only number that matters to me now is my sobriety period – 820 days and counting.

~Resident~

"It is not hyperbole to say that the PHP helped to save my sanity, my career, and my life." --RIPHP Participant

~Thanks & Gratitude to our 2023 Contributors~
Supported 100% by donations contributed to the RIMS Foundation (501c3)

Professional Associations

RI Academy of Family Physicians
RI Academy of Physician Assistants
RI Chapter, American College of Emergency Physicians
RI Chapter, American College of Surgeons
RI Orthopaedic Society
RI Podiatric Medical Association
RI Psychiatric Society
RI Society of Addiction Medicine
RI Society of Anesthesiologists
RI Society of Eye Physicians & Surgeons

Other Physician Groups

Brown Emergency Medicine
Brown Medicine
Coastal Medical Group

Medical Staff Associations

Butler Hospital Medical Staff
Kent Hospital Medical Staff
Roger Williams Medical Center Staff
South County Hospital Medical Staff
St. Joseph Medical Center Staff
Women & Infants Hospital Medical Staff



Hospitals/Health Care Systems

Care New England Health Systems

Butler Hospital
Kent Hospital
Women & Infants Hospital

Charter Care Health Partners

Roger Williams Medical Center
St. Joseph Medical Center

Landmark Medical Center

Lifespan Health Systems

Bradley Hospital
Miriam Hospital
Newport Hospital
Rhode Island Hospital
Hasbro Children's Hospital

Health Insurers

Blue Cross Blue Shield of Rhode Island
Neighborhood Health Plan of Rhode Island
United Healthcare of New England

Liability Insurers

Coverys Community HealthCare Foundation
Lifespan Risk Services, Inc.
MMJUA - RI

Other

HUB International
Johnson & Wales University

Individual Donors

Yul Ejnes, MD
Rabin Chandran, MD
Herbert Rakatansky, MD & Barbara Sokoloff
Dominick Tammaro, MD &
 Cay Tammaro, MD
Meena Theva, MD
Barry Wall, MD
Bernard Zimmerman, MD

RIPHP also extends our thanks to the many dedicated treatment professionals who work with our program participants every year.