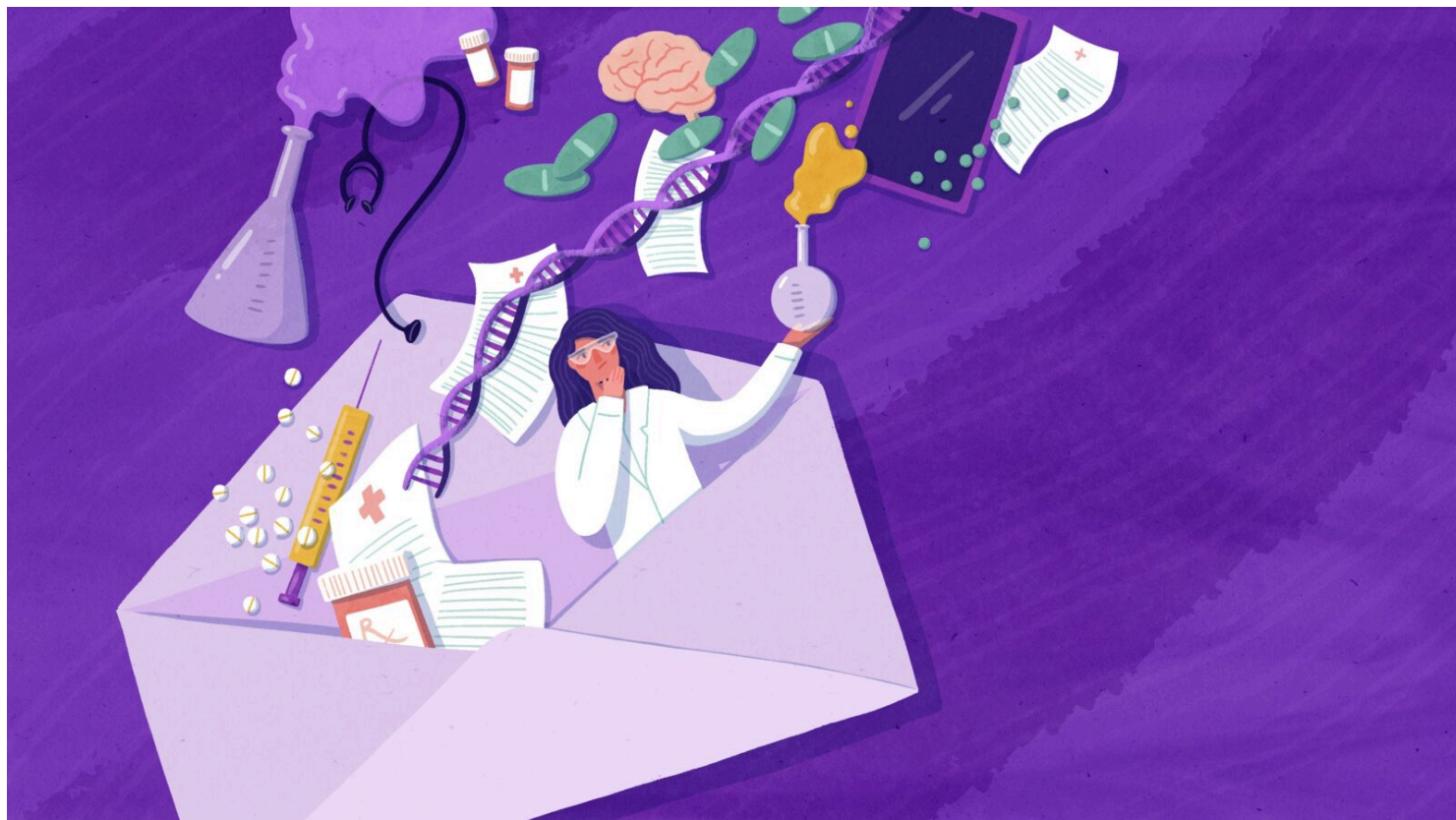


FIRST OPINION

In defense of state physician health programs' work with medical students

Keep those letters coming!



Molly Ferguson for STAT



By Torie Bosch Dec. 21, 2024

Editor, First Opinion

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The story

“Medical schools need to offer students alternatives to state physician health programs,” by J. Wesley Boyd

The response

The Dec. 11 article by J. Wesley Boyd is disappointing because it relies on anecdotal and misleading evidence, and dangerous because the tone will drive medical students away from a lifesaving resource, namely Physician Health Programs (PHPs). Contrary to claims that programs like PHPs are overused, they remain underutilized by medical students who could greatly benefit from increased referrals and financial support to access these vital resources. As a board-certified psychiatrist, addiction medicine specialist, current medical director of a PHP, president of the Federation of State Physician Health Programs, and past participant, I’ve seen the transformative impact of PHPs firsthand. PHPs have one of the highest long-term success rates for treating substance use disorders and mental health conditions. Currently, over 5,000 physicians, trainees, and students nationwide rely on PHPs to regain their health and continue their careers, ultimately benefiting millions of patients through competent, compassionate care. Misinformation about PHPs discourages those in need. Anecdotal accounts, such as those highlighted in this article, often lack critical context. Stories influenced by personal grievances or incomplete understanding distort the role PHPs play in helping struggling health professionals. PHPs work under diverse legal and structural frameworks, and their procedures — like those of Tennessee Medical Foundation-PHP (TMF) — prioritize individualized care and fairness.

TMF, for instance, conducts triage assessments and refers individuals for independent evaluations, often covered by TMF’s grants for students to minimize financial barriers. The Washington Physicians Health Program even partners with institutions to fully cover evaluation costs. Contrary to claims, PHPs do not receive kickbacks for referrals. They operate transparently, adhering to strict guidelines that eliminate conflicts of interest. The

scarcity of programs equipped to manage safety-sensitive professionals often necessitates out-of-state referrals. These programs that evaluate a participants' fitness to practice are necessarily resource-intensive. Studies show PHP participants achieve exceptional outcomes, with lower malpractice risk and relapse rates than peers. In a follow-up survey, 85% of participants deemed the cost "well worth it." Yet stigmatizing narratives like this article deter physicians and students from seeking help, exacerbating burnout, addiction, and suicide risk, while jeopardizing patient safety. PHPs have saved more lives and careers than any other physician health model. Instead of stigmatizing PHPs, we should celebrate their lifesaving work and focus on addressing the systemic barriers physicians and students face when seeking help. The medical profession must address inaccuracies about PHPs to safeguard public health and support our most vulnerable members.

— *Michael Baron, M.D., M.P.H., Federation of State Physician Health Programs, Tennessee Medical Foundation, Vanderbilt University, School of Medicine*