Our respective associations, which collectively represent tens of thousands of physicians across the State of New York providing care to hundreds of thousands of patients each year, are writing to you to **strongly oppose** the proposal in Part L of the Executive Health & Mental Hygiene Budget that would completely repeal MSSNY’s highly successful Committee for Physicians’ Health (CPH) Program.

Eliminating this program would be a devastating blow because of the important work CPH is doing to assist physicians, medical students and physician assistants in confronting addiction, burnout and mental illness, and most importantly, helping them return safely to delivering patient care when they are healthy. To be frank, we were totally blindsided by this proposal given the regular communication that the CPH maintains with the NYS Department of Health, and the positive comments provided by the DOH in reports to the NYS Legislature.

The program has been extended by the Legislature in 5-year increments, including an extension of the program until 2028 approved by the State Legislature in the final 2023-24 State Budget. In fact, the FY 2024 Executive Budget proposed a 10-year extension of the program, to continue until 2033!!

CPH is established by state statute (Public Health Law Section 230(11)(g)), and works with New York’s Office of Professional Medical Conduct to provide the services required by law. It is important to note that the program is NOT funded from General Appropriations but by a $30 surcharge paid by physicians themselves in their license and biennial registration fee, which is specifically dedicated under Education Law Section 6524 (9) for this purpose.

Since the inception of this program over 40 years ago, CPH has assisted over 7,300 physicians, routinely monitors the recovery of 400 physicians, and annually reaches out to 125 physicians thought to be suffering from alcoholism, drug abuse or mental illness. We believe that the work of the CPH program is valuable to all physicians and indeed to the state generally.
Many of these conditions treated through the CPH program have been exacerbated by the pandemic, making CPH more essential than ever. CPH provides important confidential peer to peer services to physicians in need of support for their health and well-being. Studies that review the long-term model effect of physician health programs show that physician recovery rates are markedly higher than the general population—even when extended into five years or more.

We further note that repealing this program would not only harm patient access to care, but actually impose additional costs to the State, due to the additional costs on hospitals to find replacement treatment programs for the services currently provided by the CPH, and/or on recruitment costs for finding physicians to replace those physicians who will no longer be assisted if this program were to be terminated. These new costs to be borne by hospitals would need to come from one of the various pools contained in the State Budget to subsidize hospital costs.

In short, we find the proposed repeal of the CPH particularly alarming given the extraordinary focus on mental health and mechanisms to sustain and enhance access to care.

We urge you to restore the legal authorization for this program in the HMH Article 7 bill and restore the $990,000 appropriation it has historically received through the Aid to Localities Budget Bill (identified as “medical society contract pursuant to Chapter 582 of the Laws of 1984”) to continue this essential program to address physician wellness.