

## **Physicians Wellness Initiative**

### **Vetting a Counseling Contractor**

- What experience do you have with managing physicians and the particular occupational hazards in their lives, such as grief related to losing a patient, medical education and enculturation, EMRs, Industry Change - System Pressures, malpractice litigation, etc. ?
- Talk through the scheduling and intake process to be sure it does not raise barriers. What is the time line to getting an appointment for one of our member physicians? Can you offer any priority scheduling? How can you sensitize your staff to treating physicians with a concierge service attitude?
- Does the location or layout of the building (waiting room) appear that it might pose an obstacle to physicians who seek maximum confidentiality? How might this be mitigated (separate entrance? text provider when ready to come in?)
- How can records be kept in a way that doesn't present any problems for physicians (e.g., no diagnosis code, no psychotherapy notes)?
- \$XXXX per hour for appointments; \$XXX for any no shows.
- Describe your providers': breadth, experience, male/female - can a physician request a certain one?
- Will you allow for NAME/ABBREVIATION OF PROGRAM to be listed as additional insured on your policy?
- Since we will not receive names of physicians, we require the option of independent audit to verify records if we deem appropriate. Will this create problems?
- Talk about tele-health.

Demographics to be attached with monthly billing (unless only a single utilizer in one month, in which case demographics may be rolled forward to combine with another month.)

- Total number of NAME/ABBREVIATION OF PROGRAM physician members accessing the Services by **age**;
- Total number of NAME/ABBREVIATION OF PROGRAM physician members accessing the Services by **gender**;
- Total number of NAME/ABBREVIATION OF PROGRAM physician members accessing the Services by **primary medical specialty** (need to use as generic a list as possible to keep from any identification)
- Total number of NAME/ABBREVIATION OF PROGRAM physician members accessing the Services by **employment status**: hospital system, independent large group (greater than or equal to 8 providers), or independent small group (less than 8 providers).
- A list of **presenting problems** to the extent feasible without inclusion of individually identifiable health information (e.g., depression, marital, financial, litigation, etc.)
- A list of the **types of referrals** made, if any, provided that no listed type of referral shall identify the name or location of the professional, or organization, or facility, to which the referral was made.