

REPORT OF THE PHYSICIAN WELLNESS COMMITTEE

May 17, 2025

TO: HOUSE OF DELEGATES
TENNESSEE MEDICAL ASSOCIATION

SUBMITTED BY: EDWARD CAPPARELLI, MD, CHAIR

1 The Physician Wellness Committee was formed at the 2023 Tennessee Medical Association
2 (TMA) House of Delegates meeting via Resolution 02-23. The purpose of the Committee is
3 to remove the stigma of mental illness so physicians are encouraged to seek help before they
4 reach a crisis. A secondary goal is to identify programs and processes that promote wellness
5 for both urban and rural physicians.

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7 Since its establishment, the Committee has met quarterly to evaluate opportunities to
8 improve access to mental health support statewide. Such activities include:

- 9 • compiling a list of wellness-related questions hospital systems can use on
10 employment applications in lieu of current stigmatizing questionnaires;
- 11 • promoting the Tennessee Medical Foundation's physician screening questionnaire in
12 both TMA and specialty societies;
- 13 • assessing the feasibility of establishing a statewide hotline managed by the
14 Tennessee Psychiatric Association
- 15 • assessing the feasibility of establishing state-based wellness programs that TMA may
16 offer to its members; and
- 17 • building upon the 2024 Tennessee Wellness Law

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19 Efforts to improve mental health access for physicians remain ongoing; however, progress is
20 being made on the legislative front. Physician Wellness Committee members, Drs. Reeves
21 Johnson and Michael Baron, successfully passed legislation this session that allows the state
22 physician licensing boards to issue a license subject to a private advocacy order. This would
23 occur during an informal initial application interview during an executive session that was
24 made possible by the TMA's Wellness bill passed last year. This order requires the applicant
25 to participate in a peer assistance program approved by the board. Private advocacy orders
26 are not a restriction on the license, are confidential and not public records as long as the
27 physician successfully maintains advocacy of the peer assistance program. This would not
28 be reportable to the National Practitioner Data Bank, thereby helping to reduce stigma for
29 physicians. However, failure to do so constitutes a violation of the practice act and may lead
30 to the initiation of disciplinary proceedings by the board which would become public and
31 any order would be reported to the Data Bank. This law passed the Tennessee General
32 Assembly on April 16 and will take effect immediately.

Respectfully submitted,

Edward Capparelli, MD, Chair

2024-2025 Committee Members

- Edward Capparelli, MD, Chair
- Arthur Townsend, MD
- Deborah Christiansen, MD
- Desiree Burroughs-Ray, MD
- Harry Severance, MD
- Jim Lancaster, MD
- Cynthia Rector, MD
- Mary Jane Brown, MD
- Michael Baron, MD
- Michael Kodsi, MD
- Michelle Cochran, MD
- Mukta Panda, MD
- Reeves Johnson, MD
- Sapna Kripalani, MD
- Lauren Favors, MD, Resident/Fellow Section
- Amber Shirley, Student Section
- Erika Thomas, Staff Liaison