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1	HOUSE JOINT RESOLUTION NO. 38	
2	INTRODUCED BY J. CARLSON	
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4	A JOINT RESOLUTION OF THE SENATE AND THE HOUSE OF REPRESENTATIVES OF THE STATE OF	
5	MONTANA REQUESTING AN INTERIM STUDY OF PROFESSIONAL ASSISTANCE PROGRAMS AND THE	
6	PROVISION OF CONFIDENTIAL CARE TO SUPPORT HEALTH CARE PROFESSIONALS' HEALTH AND	
7	WELLNESS IN MONTANA; AND REQUIRING THAT THE FINAL RESULTS OF THE STUDY BE REPORTE	
8	TO THE 69TH LEGISLATURE.	
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10	WHEREAS, professional burnout is more prevalent among health care professionals and is affecting	
11	individual Montanans working in this field, including physicians, nurses, pharmacists, dentists, and other health	
12	care professionals; and	
13	WHEREAS, a national study shows 51% of nurses ages 25 through 34 reported their mental state as	
14	not or not at all emotionally healthy, and 66% of acute and critical care nurses have thought about quitting	
15	nursing entirely because of burnout; and	
16	WHEREAS, recent studies show a national burnout rate of 43.9% among physicians in practice and	
17	that more than 40% do not seek help for burnout or depression for fear of disclosure to a state licensing board;	
18	and	
19	WHEREAS, stress, burnout, and other personal and professional factors lead some Montana health	
20	care professionals to substance use and abuse; and	
21	WHEREAS, Montana health care professionals suffering from drug or alcohol addiction or substance	
22	abuse or are otherwise impaired places patients and other providers at risk and further exacerbates the	
23	shortage of health care providers in the state; and	
24	WHEREAS, the stigma associated with illness and impairment, particularly impairment resulting from	
25	mental illness, including substance use disorders, can be a powerful obstacle to seeking treatment, especially	
26	in the medical community; and	
27	WHEREAS, professional assistance programs are long-standing, nationally recognized means of	
28	providing assistance to health care professionals suffering from drug or alcohol abuse or other impairment and	



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provide a meaningful way in which health care professionals may seek care, treatment, and ultimately
rehabilitation; and

WHEREAS, Montana has codified the need for certain health care professional boards, including the Board of Medical Examiners, the Board of Nursing, the Board of Pharmacists, and the Board of Dentists, to establish and provide professional assistance programs to Montana's licensed professionals; and

WHEREAS, given the importance of reducing the stigma associated with professional impairment and increasing participation in professional assistance programs, Montana law provides for both confidential voluntary participation as well as board-required disciplinary participation in these programs; and

WHEREAS, the Department of Labor and Industry, after initially deciding to provide the services internal to the department, has now contracted with an out-of-state, for-profit entity to administer the statutorily required provider assistance board on behalf of all four of the aforementioned health care professional boards for a provider assistance program; and

WHEREAS, health care professionals have recently expressed a fear of professional setback or experiencing punitive measures being taken when seeking or participating in behavioral health treatment and services through the state provider assistance program.

NOW, THEREFORE, BE IT RESOLVED BY THE SENATE AND THE HOUSE OF REPRESENTATIVES OF THE STATE OF MONTANA:

That the Legislative Council be requested to designate an appropriate interim committee or statutory committee, pursuant to section 5-5-217, MCA to:

- identify the factors that contribute to behavioral health conditions among health care professionals;
- (2) identify the barriers to seeking and accessing mental and behavioral health treatment for health care professionals, including stigma and concerns about licensing, credentialing, and confidentiality of existing provider assistance programs;
- (3) identify avenues to ensure health care professionals can freely seek behavioral health treatment and services without fear of professional setback;
- 28 (4) evaluate the efficacy, impact, and current participation levels of Montana's statutorily required



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1	provider assistance p	rograms;
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(5) evaluate Montana's current provider assistance programs against nationally recognized best practices for operating an effective professional assistance program with strong confidentiality provisions;

- (6) evaluate whether the provider assistance program should be expanded to other Montana professions beyond those health care professional boards statutorily mandated to provide for the programs;
- (7) engage subject matter expertise in the area of health care professional assistance programs, including state and national professional associations, Montana's professional licensing boards, and other subject matter experts to assist in this study; and
 - (8) make recommendations for state legislation to:
- (a) ensure the state's provider assistance programs follow nationally recognized guidelines for recovery-based programs;
 - (b) provide safe-haven reporting systems and wellness programs for health care professionals seeking care for behavioral health issues, including burnout;
 - (c) remove barriers to behavioral health care for health care professionals;
- (d) allow for a parallel, confidential, self-referral-based program to promote voluntary and confidential participation of professionals in need of assistance; and
- (e) expand the provider assistance program to other Montana health professions, beyond those health care professional boards statutorily mandated to provide for these programs.
- BE IT FURTHER RESOLVED, that all aspects of the study, including presentation and review requirements, be concluded prior to September 15, 2024.
- BE IT FURTHER RESOLVED, that the final results of the study, including any findings, conclusions, comments, or recommendations of the appropriate committee, be reported to the 69th Legislature.

23 - END -

