



## Nov. 15, 2024: State Advocacy Update

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### Removing stigma part of Northwest Permanente strategy to improving physicians' health

Northwest Permanente in Oregon removed invasive and stigmatizing language regarding mental health and substance use disorders on its credentialing and recredentialing applications as part of its institutional strategy to “create meaningful changes that make us the best place not only to work but to give and receive care.”

The changes, which also included the system’s peer reference forms, followed the Oregon Medical Board removing intrusive mental health questions from their licensing application as well as updates to the statewide credentialing application—efforts spearheaded by the Oregon Medical Association, American Medical Association and Dr. Lorna Breen Heroes’ Foundation.

“Addressing and mitigating burnout is a top priority for us at Northwest Permanente, and we greatly appreciate the guidance of both the AMA and the Dr. Lorna Breen Heroes’ Foundation in helping us achieve this goal,” said Laura Ryan, MD, an emergency medicine physician and Wellness Director for Northwest Permanente. “Removing intrusive mental health questions from credentialing and recredentialing applications is crucial to supporting the well-being of our physicians as it is proven to support autonomy and self-care. Invasive and stigmatizing language around mental health creates fear of recrimination and reprisal, and the research shows that it leads to the opposite of its intended goal.”

Dr. Ryan also explained how Northwest Permanente’s collaboration with their Permanente regional partners to achieve these credentialing changes “creates important momentum that helps all health care professionals.”

“We value Northwest Permanente leaning into the work being done in Oregon to ensure we support our frontline clinicians,” added Heidi Beery, MD, OMA President. “I am thankful for being part of an organization like the OMA that fully supported the Medical Board’s effort to change its licensure questions and contributed to the work of the Oregon Health Authority when it changed the state’s uniform credentialing forms used by all hospitals and health plans in the state.”



"Fear from clinicians that seeking mental health care may have a detrimental effect on their state medical license or lose of hospital privileges via the credentialing process is a primary driver of suicide among the healthcare workforce," said Corey Feist, co-founder and CEO of the Dr. Lorna Breen Heroes' Foundation, which leads the ALL IN: Wellbeing First for Healthcare coalition. "Northwest Permanente's leadership in updating their credentialing applications is a testament to their commitment to making it safer for credentialed medical staff to access mental health care and preventing suicide."

Learn more about how health systems can join Northwest Permanente and more than 400 other hospitals and health systems who have made changes to no longer mandate disclosure of past or current treatment of a mental, behavioral or other health condition when there is no current impairment.

## **Seven states pass ballot initiatives to protect abortion care**

On Nov. 5, voters in seven states—Arizona, Colorado, Maryland, Missouri, Montana, Nevada and New York— approved ballot measures to protect access to abortion care. The measures in Arizona and Missouri will override the states' existing abortion bans and protect abortion access until fetal viability, though additional legal processes are required in both states before the current laws are officially overturned. The measures in Colorado, Maryland, Montana, Nevada and New York further enshrine existing abortion and reproductive health rights and will prevent lawmakers from imposing restrictions on reproductive health care services in the future.

Similar measures in Florida, Nebraska and South Dakota failed to pass. Abortion is currently banned after 6 weeks in Florida, after 12 weeks in Nebraska and at any point after conception in South Dakota. In Nebraska, voters approved a measure to prohibit abortion in the second and third trimesters while rejecting a competing ballot measure that would have established a fundamental right to abortion until fetal viability.

The AMA supports broad and equitable access to abortion, as well as other reproductive health care services, and opposes criminalization of the practice of medicine and other restrictions on evidence-based abortion care. For more information on state abortion laws, contact the AMA Advocacy Resource Center.

## **California voters pass ballot initiative to dedicate funding to Medi-Cal**



On Nov. 5, voters in California overwhelmingly approved Proposition 35, a historic investment in Medi-Cal, the state's Medicaid program. Passage of Proposition 35 ensures dedicated and ongoing funding for the program through the state's existing tax on managed care organizations. About a third of the state's population receives health care through Medi-Cal, including half of all children, low-income families, seniors and people with disabilities, and California's Medi-Cal reimbursement rates are among the lowest in the nation. The dedicated funding will improve access to care for Medi-Cal patients and provide stability for the health care workforce in California.

The California Medical Association championed Proposition 35 and co-chaired the coalition of health care organizations that put Proposition 35 on the ballot.

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