

SENATE
STATE OF MINNESOTA
NINETY-THIRD SESSION

S.F. No. 3531

(SENATE AUTHORS: MORRISON, Boldon, Klein, Mann and Abeler)		
DATE	D-PG	OFFICIAL STATUS
02/12/2024	11553	Introduction and first reading Referred to Health and Human Services
02/15/2024	11619	Authors added Klein; Mann; Abeler

1.1

A bill for an act

1.2

relating to health; prohibiting questions related to provider health conditions on

1.3

credentialing applications; establishing the joy in medicine recognition grant

1.4

program; establishing the physician wellness program; requiring an awareness

1.5

campaign on well-being of health care workers; appropriating money; amending

1.6

Minnesota Statutes 2022, section 62Q.097, by adding a subdivision; proposing

1.7

coding for new law in Minnesota Statutes, chapters 144; 214.

1.8

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.9

Section 1. Minnesota Statutes 2022, section 62Q.097, is amended by adding a subdivision

1.10

to read:

1.11

Subd. 3. Prohibited application questions. An application for provider credentialing

1.12

must not:

1.13

(1) require the provider to disclose past health conditions;

1.14

(2) require the provider to disclose current health conditions, if they are being treated

1.15

so that the condition does not affect the provider's ability to practice medicine; or

1.16

(3) require the disclosure of any health conditions which would not affect the provider's

1.17

ability to practice medicine in a competent, safe, and ethical manner.

1.18

EFFECTIVE DATE. This section applies to applications for provider credentialing

1.19

submitted to a health plan company on or after January 1, 2024.

2.1 Sec. 2. [144.0765] JOY IN MEDICINE RECOGNITION GRANT PROGRAM.

2.2 (a) The commissioner of health must award a grant to a nonprofit medical association
2.3 to establish and operate the Minnesota joy in medicine recognition program. The grant
2.4 recipient must establish a program to:

2.5 (1) recognize hospitals, clinics, and health care systems that identify clinician well-being
2.6 as a foundational priority and inspire collective action to prioritize institutionalized health
2.7 care professional well-being as a core value;

2.8 (2) facilitate cross-organization opportunities to share and promote adoption of effective
2.9 approaches for evidence-informed best practices in health professional well-being;

2.10 (3) leverage increased transparency to increase accountability for organizations to address
2.11 system solutions and implement optimal well-being practices; and

2.12 (4) publicly recognize Minnesota health care institutions that have committed to creating
2.13 and sustaining positive work environments and culture to prevent and reduce burnout, foster
2.14 professional well-being, and support quality care.

2.15 (b) The grant recipient must convene a steering committee that includes representatives
2.16 from medicine, nursing, and other health care professionals to develop recognition criteria,
2.17 eligibility guidelines, and program timelines. The steering committee must develop well-being
2.18 centered materials intended to help health systems leaders interested in implementing
2.19 programs and practices that promote joy in medicine.

2.20 (c) For a health care institution to receive recognition through the joy in medicine
2.21 recognition program, the institution must demonstrate organizational achievement and effort
2.22 in the following competency areas evaluated through self-assessment and supporting
2.23 documentation:

2.24 (1) assessment; demonstrating organizational commitment to monitoring health care
2.25 professional burnout using an assessment tool;

2.26 (2) commitment; demonstrating organizational investment in establishing an active
2.27 well-being committee or well-being office;

2.28 (3) efficiency of practice environment; demonstrating organizational commitment to
2.29 measuring and reducing time spent in after-hours work related to electronic health records;

2.30 (4) leadership; demonstrating organizational investment in promoting leadership
2.31 development;

3.1 (5) teamwork; demonstrating organizational commitment to promoting and measuring
3.2 teamwork and team-based care; and

3.3 (6) support; demonstrating establishment of peer support programs.

3.4 Sec. 3. **[214.41] PHYSICIAN WELLNESS PROGRAM.**

3.5 Subdivision 1. **Definition.** For the purposes of this section, "physician wellness program"
3.6 means a program of evaluation, counseling, or other modality to address an issue related to
3.7 career fatigue or wellness related to work stress for physicians licensed under chapter 147
3.8 that is administered by a statewide association that is exempt from taxation under United
3.9 States Code, title 26, section 501(c)(6), and that primarily represents physicians and
3.10 osteopaths of multiple specialties. The term does not include the provision of services
3.11 intended to monitor for impairment under the authority of section 214.31.

3.12 Subd. 2. **Confidentiality.** Any record of a person's participation in a physician wellness
3.13 program is confidential and not subject to discovery, subpoena, or a reporting requirement
3.14 to the applicable board, unless the person voluntarily provides for written release of the
3.15 information, or the disclosure is required to meet the licensee's obligation to report according
3.16 to section 147.111.

3.17 Subd. 3. **Civil liability.** Any person, agency, institution, facility, or organization employed
3.18 by, contracting with, or operating a physician wellness program, when acting in good faith,
3.19 is immune from civil liability for any action related to their duties in connection with a
3.20 physician wellness program.

3.21 Sec. 4. **APPROPRIATION; STIGMA AND BARRIERS RELATED TO CARE FOR**
3.22 **CLINICIANS GRANT.**

3.23 \$500,000 in fiscal year 2025 is appropriated from the general fund to the commissioner
3.24 of health to provide a grant to the Minnesota Medical Association to create and conduct an
3.25 awareness and education campaign focused on burnout and well-being of health care workers,
3.26 designed to reduce the stigma of receiving mental health services, to encourage health care
3.27 workers who are experiencing workplace-related fatigue to receive the care they need, and
3.28 to normalize the process for seeking help. The campaign must be targeted to health care
3.29 professionals, including physicians, nurses, and other members of the health care team. The
3.30 campaign must include resources for health care professionals seeking help to address
3.31 burnout and well-being. This is a onetime appropriation.

4.1 Sec. 5. **APPROPRIATION; JOY IN MEDICINE RECOGNITION PROGRAM.**

4.2 \$500,000 in fiscal year 2025 and \$500,000 in fiscal year 2026 are appropriated from the
4.3 general fund to the commissioner of health to provide a grant to the Minnesota Medical
4.4 Association for the joy in medicine recognition program under Minnesota Statutes, section
4.5 144.0765.