On March 18, 2022, President Biden signed the Dr. Lorna Breen Health Care Provider Protection Act (Act) into law. The Act is named for Dr. Lorna Breen, who
served as the Medical Director of New York-Presbyterian Allen Hospital. Dr. Breen died by suicide in April 2020, as the COVID-19 pandemic was taking hold of the nation and, in particular, New York City. Since Dr. Breen’s passing, her family has established the Dr. Lorna Breen Heroes’ Foundation (Heroes’ Foundation). The Heroes’ Foundation’s mission is to reduce burnout, safeguard the well-being of health care providers (HCPs), and reduce the stigma surrounding HCPs seeking help or treatment. The Act is a crucial step in achieving this mission.

The Act requires the Department of Health and Human Services (HHS) to collaborate with stakeholders, such as medical professional associations, to establish a mental health education and awareness initiative. This initiative must encourage HCPs to seek care and support when experiencing mental health or substance abuse issues, help HCPs learn to identify risk factors for these conditions, and teach them how to respond to such risks. This initiative must also seek to reduce stigma associated with pursuing help for mental health and substance use disorders. No later than two years after enactment, HHS must provide to the Senate’s Committee on Health, Education, Labor, and Pensions and the House of Representatives’ Committee on Energy and Commerce an update on the initiative’s impact and outcomes.

The Act also adds Section 764, Programs to Promote Mental Health Among the Health Professional Workforce, to the Public Health Service Act. Under Section 764, HHS will award three-year grants and contracts to health care entities to establish or enhance evidence-based or evidence-informed programs dedicated to improving mental health and resilience in the profession. Hospitals, community health centers, rural health clinics, and medical professional associations, among other health care entities, are eligible to receive these grants and contracts. In awarding these grants and contracts, HHS must give priority to entities that are in health professional shortage areas or in rural areas.

As mentioned, recipients can use the funds to implement a new program or enhance an existing mental health promotion program. This may include, under the Act:

- Improving awareness among HCPs about risk factors and signs of suicide, mental health, or substance use disorders;
- Establishing or enhancing programs for suicide prevention and the improvement of mental health and resilience amongst HCPs;
- Providing mental health care, follow up, or referrals to such services and care to HCPs; or
- Creating or improving peer-support programs for HCPs.

HHS may also establish a program to award grants to health professions schools, academic health centers, state or local governments, tribal organizations, or other appropriate public or private nonprofit entities, that support the training of health care students, residents, or HCPs in strategies for addressing mental and substance use disorders and improving mental health and resilience.

The Act also provides benchmarks that HHS must meet in reporting to Congress. No later than two years after enactment, HHS must identify and disseminate evidence-
based or evidence-informed best practices for improving HCP mental health, preventing suicide, and strengthening mental resilience. No later than three years from enactment, HHS must review the programs authorized under the Act and submit a report detailing:

- The prevalence and severity of mental health conditions amongst HCPs and the factors that contribute to these conditions;
- Barriers that HCPs experience in seeking and accessing mental health care, which may include considering stigma, licensing concerns, and actions taken by State licensing boards, schools for health professionals, HCP training associations, hospital associations, or other organizations;
- The impact of COVID-19 on the mental health of HCPs and lessons learned for future public health emergencies;
- Factors that promote mental health and resilience among HCPs; and
- The efficacy of health professional training programs that promote resilience and improve mental health.

Finally, no later than four years after enactment, the Comptroller General of the United States must submit to Congress a report discussing the extent that federal substance use disorder and mental health grant programs address the prevalence and severity of mental health conditions and substance use disorders amongst HCPs.

According to the Heroes’ Foundation, more than 400 physicians die each year by suicide and rates of physician suicide differ by specialty. As March is Women’s History Month, Mintz feels it imperative to note that female physicians die by suicide at a higher rate than their male counterparts. It is the hope of the Heroes’ Foundation and Congress that the Act will promote mental wellness in the health care profession and honor the life of Dr. Breen.

*If you or someone you know is having thoughts of suicide, call the National Suicide Prevention Lifeline at 1-800-273-8255 (TALK).*

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