Reporting of Participants in Physician Health Programs (PHPs)

		Programs required to report names	
SMB	Programs required to report names	Programs required to report names of program participants to the	Program required to report names of licensees failing to satisfactorily complete program/
	of participants leaving the state	board	treatment to the board
AL	_	_	X
AK	_	_	X
AZ-M		X	X
AZ-O AR	_	X —	X X
CA-M	_	_	X
CA-O	X	X	X
СО	<u> </u>	_	X
СТ	_	_	X
DE	X	_	_
DC	X	_	X
FL-M FL-O	_	_	X
GA	X	X	X X
GU	X	X	X
HI	X	_	X
ID	X	X	X
IL	_	_	X (Only if licensee has been mandated by Department to participate)
IN		_	X
IA	_	_	X (Participants identified by name after second violation of program contract)
KS	_	_	X
KY	_	_	X
LA	_	_	Х
МЕ-М	Х	X (Only if the program participant is mandated into the program. Voluntary participants remain confidential.)	х
ME-O	X	X	X
MD	X	_	X
MA	_	_	X
MI-M	_	_	X
MI-O	_	_	X
MN	_	X (there is an anonymous tract with	X
MS	X	report of relapse)	X
МО	-	_	X (If indicated, reporting to the appropriate licensing bureau of the State will be done in accordance with Section 60.9 of 45 CFR Part 60-National Practitioner Data Bank for Adverse Information on Physicians and Other Health Care Practitioners)
MP	X	X	X
MT NE		_	X X
NV-M	_	_	X
NV-O	_	_	X
NH	_	_	X
NJ	X	X	X
NM NY	X	X	X (DMC)
NC		_	X (PMC) X
ND	_	_	X
ОН	_	_	X
OK-M			X
OK-O	_	_	Х
OR	_	_	X
PA-M	X		X
PA-O PR	X	X	X X
RI	=	_	X
SC	Х	X	X
SD	_	X (Medical Board Monitoring Program (MBMP) is administered by the Board staff and 1 board member on each case. The full board is unaware.)	X (If failing the confidential MBMP, licensee may be mandated by the full board or may lose the license if cannot participate satisfactorily)
TN-M			X
TN-O	_	_	X
TX	-	_	X
UT	_	_	X
VT-M	-	-	X (VPHP does not disclose the identity of self-referred participants to the Board except where there has been injury or the risk of injury to a patient, a criminal act, relapse to the use of alcohol or drugs, or repeated failures by the participant to abide by their monitoring contract with VPHP. In instances where the participant is referred by the Board, the participant may be asked to consent to share more information with the Board. Documentation of participation in and compliance with our monitoring program can be essential in helping to restore and/or maintain licensure.)
VT-O	_	_	
VI	_	_	
VA WA-M		_	X
WA-M WA-O	_	_	X X
WV-M	_	_	X
WV-O		_	X
WI	_	X	X
WY	_	_	Х

