

Licensing and credentialing bodies' inquiry of physician mental health



DEBUNKING THE MYTH

There is no federal regulatory agency that requires probing questions about clinicians' past mental health, addiction, or substance use history to be asked on licensure and credentialing applications such as those used by state licensing boards, physician credentialing services, and professional liability insurance carriers.¹ In fact, The Joint Commission and the Federation of State Medical Boards (FSMB), strongly discourage including these types of questions when collecting professional information from clinicians for credentialing, privileging or other purposes.^{1,2}

Despite a growing body of evidence demonstrating that asking questions about mental health, addiction, or substance use history on licensing and other applications deters physicians from seeking care when they need it, some state medical license and credentialing applications continue to ask these questions.³ In 2020, a joint statement from more than 40 medical professional associations supporting clinician health was released calling for organizations not to ask questions about previous history of mental health conditions or treatment because this practice is an unintended barrier to physicians accessing mental health services.¹

For state medical boards preferring to include questions that address physicians' mental health to elicit information intended to protect patients, the FSMB advises that they do so in ways that (1) limit inquiries to current impairments and (2) don't discourage physicians from seeking out treatment. Further, the FSMB recommends that these organizations avoid public disclosure of a physician's diagnosis and offer non-reporting options to physicians who are receiving treatment and in good standing with a recognized physician health program (PHP) or other appropriate health care professional.⁴

CASE EXAMPLE

In a study conducted in 2016, nearly 40% of physicians surveyed reported that they would be hesitant to seek treatment for a mental health condition due to fears of jeopardizing their medical license.⁵

As of May 2025, 37 medical licensure boards—in addition to five nursing and seven pharmacy licensure boards—verified that their licensing applications do not include intrusive mental health history questions.⁶

AMA Policy

- [Licensure Confidentiality H-275.970](#)
- [Access to Confidential Health Services for Medical Students and Physicians H-295.858](#)
- [Medical Licensure H-275.978](#)

TAKEAWAY

To reduce stigma and encourage physicians to seek help, individual health care organizations should not include questions about past mental health, addiction, or substance use history on their applications for physician privileges.

Resources

- 2018 Federation of State Medical Boards (FSMB) [Report and Recommendations of the Workgroup on Physician Wellness and Burnout](#). Accessed March 2025.
- The Joint Commission Worker Well-Being Resources: [Removing Barriers to Mental Health Care for Clinicians and Health Care Staff](#). Accessed August 2025.
- Dr. Lorna Breen Heroes Foundation [Wellbeing First Champions for Licensing](#). Accessed March 2025.
- 2022 Dr. Lorna Breen Heroes Foundation [Toolkit: Remove Intrusive Mental Health Questions From Licensure and Credentialing Applications](#). Accessed March 2025.
- 2021 JAMA Article: Consistency Between State Medical License Applications and Recommendations Regarding Physician Mental Health. Accessed March 2025.
- 2023 JAMA Article: Mental Health Questions on State Medical License Applications and Evaluation of Updates. Accessed March 2025.
- 2017 Mayo Clinic Proceedings Article: Medical Licensure Questions and Physician Reluctance to Seek Care for Mental Health Conditions. Accessed March 2025.

References

1. American College of Emergency Physicians. Joint Statement: Supporting Clinician Health in the Post-COVID Pandemic Era. Published online June 2, 2020. Accessed March 24, 2025. <https://www.jointcommission.org/-/media/tjc/documents/covid19/joint-statement-supporting-clinician-health.pdf>
2. The Joint Commission. Workforce Safety and Well-being: Worker Well-Being. The Joint Commission. 2025. Accessed August 13, 2025. <https://www.jointcommission.org/en-us/knowledge-library/workforce-safety-and-well-being-resource-center/worker-well-being>
3. Saddawi-Konefka D, Brown A, Eisenhart I, Hicks K. Consistency Between State Medical License Applications and Recommendations Regarding Physician Mental Health. *JAMA Network*. 2021;325(19). Accessed November 15, 2022. <https://jamanetwork.com/journals/jama/fullarticle/2780002>
4. Federation of State Medical Boards (FSMB). *Physician Wellness and Burnout: Report and Recommendations of the Workgroup on Physician Wellness and Burnout*; 2018. Accessed December 8, 2022. <https://www.fsmb.org/siteassets/advocacy/policies/policy-on-wellness-and-burnout.pdf>
5. Dyrbye LN, West CP, Sinsky CA, Goeders LE, Satele DV, Shanafelt TD. Medical Licensure Questions and Physician Reluctance to Seek Care for Mental Health Conditions. *Mayo Clinic Proceedings*. 2017;92(10):1486-1493. Accessed November 15, 2022. [https://www.mayoclinicproceedings.org/article/S0025-6196\(17\)30522-0/fulltext](https://www.mayoclinicproceedings.org/article/S0025-6196(17)30522-0/fulltext)
6. Dr. Lorna Breen Heroes Foundation. Improving Licensure & Credentialing Applications. Dr. Lorna Breen Heroes Foundation. 2025. Accessed April 8, 2025. <https://drlornabreen.org/removebarriers/>