



NDMA 2023 Policy Forum

October 6, 2023

Policy No. 2

Submitted By: NDMA Council

Subject: Physicians' Medical History and Credentialing

Summary:

Questions on physician applications for licensure and credentialing that seek mental health information are invasive and often irrelevant. Data from the American Psychiatric Association finds no evidence that physicians who are treated for mental illness are more likely to harm a patient than a physician who has not sought treatment.

In spite of that, many initial and renewal applications for credentialing continue to compel physicians to disclose current or past mental health conditions.

That potential for punitive actions creates additional stigma around physician mental health and, potentially, causes physicians to forgo necessary treatment in an era where physician burnout, depression and suicide are all reaching alarming rates.

Relevant Information:

Specialty boards, hospitals and other organizations involved in credentialing or privileging should only require disclosure of physical or mental health conditions when a physician is suffering from any condition that currently impairs their judgment or that would otherwise adversely affect their ability to practice medicine in a competent, ethical, and professional manner, or when the physician presents a public health danger.

Those state medical boards, specialty boards, hospitals and other organizations involved in credentialing/privileging that wish to retain questions about the health of applicants on medical licensing applications should use language consistent with that recommended by the Federation of State Medical Boards, which reads, "Are you currently suffering from any condition for which you are

not being appropriately treated that impairs your judgment or that would otherwise adversely affect your ability to practice medicine in a competent, ethical and professional manner? (Yes/No).”

Proposed Action:

NDMA should work with the North Dakota Board of Medicine, the North Dakota Hospital Association, and the insurers in the state, to develop policies and strategies to ensure that all new and renewal medical licensure and associated applications and application reference forms, privileging, credentialing and related applications and documentation will request or disclose only information that is reasonably needed to address the applicant’s current fitness to practice medicine and respect the privacy of physician’s protected health information.

Adopted November 28, 2023

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Policy Forum Chair