Remove Intrusive Mental Health Questions from Licensure and Credentialing Applications

A Toolkit to Audit, Change, and Communicate

All In
WellBeing First for Healthcare

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This toolkit was developed in collaboration with **Participant** and the American Medical Student Association as part of the impact campaign for the film *The First Wave*.

Barriers To Mental Health Access

6 Known Barriers for Doctors & Nurses

1. **Licensure (state & specialty boards)**

2. **Hospital Credentialing**

3. Commercial Insurance

4. Malpractice Insurance

5. Legal Discovery in Malpractice*

6. Health Plan Design

*Consider Safe Haven programs like Virginia's, virginia.safehavenhealth.org

How to Help Doctors Get Mental Health Care: Change the System, US News & World Report, Jennifer Feist, Corey Feist Sept. 9, 2021. https://www.usnews.com/news/health-news/articles/2021-09-09/change-the-system-to-help-doctors-get-mental-health-care

The Effect of Invasive Questions

THE PROBLEM:

Clinicians aren't seeking mental health care despite high rates of burnout and stress.

Why?

They fear losing their license and credentials because of overly broad and invasive mental health questions on applications that are stigmatizing, discriminatory, and violate privacy in the workplace— and may even violate the Americans with Disabilities Act (ADA).

> My sister-in-law Dr. Lorna Breen, who died by suicide in April 2020, was convinced that if she received mental health care, she would lose her medical license or face ostracism from colleagues. Sadly, we have heard from a number of families who lost physicians to suicide and their loved ones who expressed nearly identical concerns to Lorna.

J. Corey Feist, House Energy and Commerce Subcommittee on Health, 10-26-21

The Data:

Nearly four in 10 physicians

were either afraid or knew another physician fearful of seeking mental health care because of questions asked in licensure, credentialing, or insurance applications.

The Physicians Foundation 2023 Survey of America's Current and Future Physicians

This must change.

Are These Questions Protecting the Public?

In short, no.

- In many cases, while these invasive questions were originally developed with good intent, it is a misconception that these questions actually protect the public, and in many cases, it has the opposite effect.

- Our goal here should be for everyone to take care of their physical and mental health so they can provide the best care to patients.

- While there is no data demonstrating that these questions protect the public, it is well documented that they often lead to clinicians not seeking care. Ensuring that clinicians can access necessary mental health care not only benefits their well-being, but it also improves the health of our entire country. Patient outcomes will improve when we prioritize clinician well-being, because to care for others, clinicians must also be cared for.

See: Burnout Among Health Care Professionals: A Call to Explore and Address This Underrecognized Threat to Safe, High-Quality Care, National Academy of Medicine
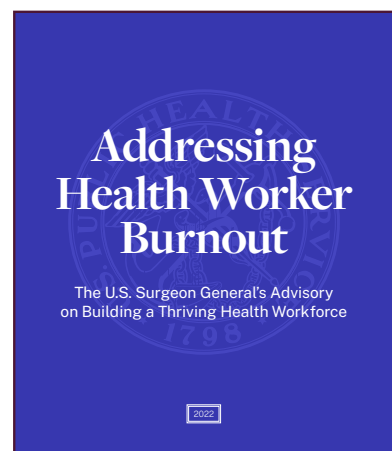
And Our National Leaders Agree

The Joint Commission

Joint Commission Statement on Removing Barriers to Mental Health Care for Clinicians and Health Care Staff

The Joint Commission does not require organizations to ask about a clinician's history of mental health conditions or treatment. We strongly encourage organizations to not ask about past history of mental health conditions or treatment.

View the Statement ➔

Addressing Health Worker Burnout

The U.S. Surgeon General's Advisory on Building a Thriving Health Workforce

2022

Read the Full Advisory ➔

3 Steps

Boards and Hospitals/Health Systems Can Take:

1. AUDIT
all licensure and credentialing applications, addendums, and peer review forms.

2. CHANGE
any invasive or stigmatizing language around mental health.

3. COMMUNICATE
these changes to your workforce and assure clinicians that it is safe for them to seek care.

STEP 1: Audit

Audit all licensure and credentialing applications, addendums, and peer review forms.

Review **every single application** your organization issues, including training, renewal, initial, educational, supplemental/addendum, peer reference, and peer review forms.

Look for the following:

- Questions about **mental health** that go beyond current impairment and/or contain **invasive** or **stigmatizing** language and disclosure request around a clinician's **health** or **well-being**.

- Questions that ask about a clinician's history of **"time off"** or **"breaks in practice."**

- Language that references **mental health explicitly** in any way that's not supportive (see next page for recommended language).

- Questions that ask about **past usage or experiences**.

- Unnecessary asterisks or fine print (i.e., "current impairment can be any time in the last 5 years").

There is no reason to separate mental and physical health unless you're encouraging clinicians to seek treatment if and as needed.

STEP 2: Change

Change any invasive or stigmatizing language around mental health.

OPTION 1: Ask one question consistent with the Federation of State Medical Board's Recommended Language that addresses all mental and physical health conditions as one, with no added explanations, asterisks, or fine print:

"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)"

OPTION 2: Refrain from asking probing questions about an applicant's health altogether.

OPTION 3: Implement an Attestation Model, like that used in North Carolina* and Mississippi. This uses supportive language around mental health from the Board and holds health workers accountable to their well-being, making it clear that their self-care is patient care. Offer "safe haven" non-reporting options to health workers who are under treatment and in good standing with a recognized physician health program (PHP) or other appropriate care provider.

*__Important:__ The Board recognizes that licensees encounter health conditions, including those involving mental health and substance use disorders, just as their patients and other health care providers do. The Board expects its licensees to address their health concerns and ensure patient safety. Options include seeking medical care, self-limiting the licensee's medical practice, and anonymously self-referring to the NC Physicians Health Program a physician advocacy organization dedicated to improving the health and wellness of medical professionals in a confidential manner. The failure to adequately address a health condition, where the licensee is unable to practice medicine within reasonable skill and safety to patients, can result in the Board taking action against the license to practice medicine.

STEP 3: Communicate

Communicate these changes and assure clinicians that it is safe for them to seek care.

- **Identify** your channel(s) of communication and your trusted messenger(s) for each key audience (licensees, health system leaders, etc.).

- **Craft** your message and ensure that in communicating these changes, clinicians are first met with supportive language so they know it is safe to seek mental health care. Sample language for reaching out is included on the following pages.

- **Be direct, specific, and transparent** in communications (via text, mail, or email) with your audiences.

- **Establish** a designated communications channel to update clinicians in real time on the new language.

- **Make applications available** and **easily accessible** to the public on your website. Applications that are behind online portals inhibit transparency; it is important to ensure that applications are fully accessible on your website.

- **For health and hospital systems:** Share your institution's and state's facts on each of the 6 structural barriers. Knowledge is power, and in this case has lifesaving potential. This action is a transparent and measurable way that every health and hospital system can support its most valuable resource—its workforce.

Suggested Communication Templates: Communicate Out

Email Template

Subject: We support and protect our workforce's mental health!

Dear [NAME],

We are proud to share that [board/committee/hospital/health system] recently updated our [licensure/credentialing] applications to remove all intrusive and stigmatizing language around mental health care and treatment. We made these changes to better support our workforce—our most valuable resource—and make you feel safe and encouraged to seek the mental health care you may need without fear of losing your license or job.

Supporting and protecting our clinicians' mental health is paramount to their well-being and for the health of our entire community. While there is much more work to be done, this is a significant step to remove barriers to support and protect our workforce's mental health and well-being.

We encourage you to share this information with your colleagues, so they know that it's safe to seek mental health care and that we are here to support and protect you.

Sincerely,

[NAME]

Digital Newsletter Template

It's safe for our healthcare workers to seek mental health care!

As your [I board/committee/hospital/health system], we are proud to share that all our [licensure/credentialing] applications are free from intrusive and stigmatizing language around mental health care and treatment. This means that you can seek the care you need without fear of losing your license or job.

Supporting and protecting our clinicians' mental health is paramount to their well-being and for the health of our entire community. And while there is much more work to be done, this is a significant step to remove barriers to support and protect our workforce's mental health and well-being.

Visit [include link to your mental health and well-being programs] for resources that can support your mental health and well-being.

Suggested Social Messaging: Communicate Out

Communicate **about the changes you've made and assure clinicians that it is safe for them to seek care.**

FACEBOOK/LINKEDIN COPY OPTION 1:

It's SAFE for clinicians to seek mental health support! We're proud to share that we are **#ALLINforHealthcare** by removing invasive and stigmatizing language in our [licensing/ credentialing] applications around mental health care and treatment. We urge all of our clinicians to seek the care they need, without fear of losing their license or job. We want to assure you that we support and encourage you to take care of your physical and mental well-being. Let's **#StopTheStigma** and normalize mental health support for all.

FACEBOOK/LINKEDIN COPY OPTION 2:

We are **#ALLINforHealthcare**! We successfully audited and updated our [licensing/ credentialing] applications to remove any invasive and stigmatizing language around mental health, and we want our clinicians to know that seeking mental health support is both safe and encouraged. Supporting and protecting our clinicians' mental health is paramount to their own well-being and for the health of our entire community. While there is more work to be done, this is a significant step to **#StopTheStigma** and protect healthcare workers' mental health and well-being.

INSTAGRAM COPY OPTION 1:

We are **#ALLINforHealthcare!** We have successfully audited and updated our [licensing/ credentialing] applications to remove invasive and stigmatizing language around **#mentalhealth** care and treatment. It's SAFE for you to seek mental health support.

We encourage our **#clinicians** to take the necessary steps to take care of their physical & mental well-being.

INSTAGRAM COPY OPTION 2:

It's SAFE for our **#clinicians** to seek #mentalhealth support. We're proud to be **#ALLINforHealthcare** by removing invasive and stigmatizing mental health questions from our [licensing/credentialing] applications. Supporting and protecting mental health is paramount to the well-being of **#healthcare** workers, and the health of the entire community. Let's **#StoptheStigma** and normalize mental health support for all.

Suggested Social Messaging: Communicate Out

Communicate about the changes you've made and assure clinicians that it is safe for them to seek care.

TWEET OPTION 1:

It's SAFE to seek **#mentalhealth** care! We're proud to be **#ALLINforHealthcare** by updating our [licensure/credentialing] applications to ensure our **#clinicians** privacy & safety around accessing mental health care is protected. Let's **#StopTheStigma** and provide mental health support for all!

TWEET OPTION 2:

It's SAFE to seek **#mentalhealth** care! We urge all our **#healthcare** workers to seek the care they need, without fear of losing your license or job. Learn more: [include link to your mental health and well-being programs] **#ALLINforHealthcare**

TWEET OPTION 3:

We are **#ALLINforHealthcare**! We successfully updated our [licensing/credentialing] applications to remove invasive & stigmatizing language around **#mentalhealth** to ensure that our **#healthcare** workers can safely seek the mental health support they need.

TWEET OPTION 4:

#Clinicians — we removed invasive & stigmatizing language around mental health in our [licensing/credentialing] applications to support you in seeking the **#mentalhealth** care you need without fear of losing your license or job. We are **#ALLINforHealthcare**: [include link to your mental health and well-being programs].

Creative Assets for Social Media

Downloadable Asset Files:

Sized for Instagram ➜

Sized for Facebook ➜

Sized for Twitter ➜

Suggested Social Messaging: Encourage Others to Audit & Change

Invite other licensure boards, credentialing committees, and hospitals to **audit** all licensure and credentialing applications and **change** any invasive or stigmatizing language around mental health. Remember to tag the boards, committees, and hospitals that are on social media in your post so they see it.

FACEBOOK/LINKEDIN COPY OPTION 1:

It's up to us to be **#ALLINforHealthcare** and support the mental health and well-being of healthcare workers. In our efforts to ensure that our clinicians have access to the mental health support they need, we reviewed and updated our [licensure/credentialing] applications to remove invasive and stigmatizing language around mental health. We encourage EVERY state medical and nursing board, specialty board, credentialing committee, hospital, and health system to also audit their licensure or credentialing applications, remove unnecessary questions about mental health, and communicate these changes to their healthcare workers so they know it's safe and encouraged to seek mental health support when needed.

FACEBOOK/LINKEDIN COPY OPTION 2:

[Share your hospital or health system's story and experiences of how you changed your questions and set an example for others to do the same!] #ALLINforHealthcare

INSTAGRAM COPY OPTION 1:

We are **#ALLINforHealthcare** and support the mental health of our **#clinicians**! We audited and updated our [licensing/credentialing] applications to remove invasive & stigmatizing language around **#mentalhealth** so our **#healthcare** workers know that seeking support is safe, acceptable, & encouraged. Learn how your licensure & specialty boards, credentialing committee, hospital, and health system can do the same: **drlornabreen.com/removebarriers**

INSTAGRAM COPY OPTION 2:

We took a critical step to support **#healthcare** workers' well-being by removing invasive & stigmatizing language around **#mentalhealth** in our [licensing/credentialing] applications. It's time for other licensure & specialty boards, credentialing committees, hospitals, and health systems to follow suit and be **#ALLINforHealthcare**.

TWITTER COPY OPTION 1:

We are **#ALLINforHealthcare** & support the mental health of our **#clinicians**! We audited & updated our [licensing/credentialing] applications so our **#healthcare** workers know that seeking **#mentalhealth** support is safe & encouraged. Learn how you can do the same: **drlornabreen.com/removebarriers**

TWITTER COPY OPTION 2:

We took a critical step to support **#healthcare** workers' well-being by removing invasive & stigmatizing language around **#mentalhealth** in our [licensure/credentialing] applications. It's time for other boards, committees, hospitals, & health systems to follow suit and be **#ALLINforHealthcare**.

Creative Assets for Social Media

Downloadable Asset Files:

[Instagram icon] [Sized for Instagram](→)

[Facebook icon] [Sized for Facebook](→)

[Twitter icon] [Sized for Twitter](→)

We are #ALLINforHealthcare ARE YOU?

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3 Steps

Medical Boards and Hospitals/Health Systems Can Take:

1. AUDIT
2. CHANGE
3. COMMUNICATE

Remove stigmatizing questions from your applications.

Be #ALLINforHealthcare

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Handout: Removing Structural Barriers to Mental Health Care

Removing stigmatizing and intrusive questions on licensure and credentialing applications is a critical step to supporting clinician well-being, but not the only one. As a hospital leader, let your staff know that you're committed to addressing other structural barriers to mental health care by customizing and sharing this handout as you make progress against each one.

Supporting Clinician Well-Being by Removing Structural Barriers to Mental Health Care

Supporting and protecting our clinicians' mental health is paramount to their well-being and for the health of our entire community. [Insert hospital/health system] is proud to support and protect our clinician's mental health.

We are committed not only to updating our own [insert licensure/credentialing] applications, but also to ensuring updates are made to other structural barriers to ensure that you can seek the mental health care you need—and without fear of losing your license or job.

We understand that all the following structural barriers need to be removed to make sure you feel safe and encouraged to seek mental health care. We are committed to tracking the status of these barriers and will communicate with you as each one is removed. See below for the a definition and status of each barrier related to [Insert hospital/health system].

Structural Barriers to Clinician Mental Health Care	Status
Licensure Applications State medical, state nursing, and specialty license and renewal applications often ask broad questions about mental health history or its hypothetical effect on competency, influencing clinicians' decisions not to seek help.	[Add Status]
Hospital and Health System Privileging and Credentialing Applications Like licensure applications, hospital and health system privileging and credentialing applications ask intrusive mental health questions that influence clinicians' decisions not to seek help.	[Add Status]
Commercial Insurance Credentialing A HIPAA waiver, granting an institution access to a clinician's health records, has become a standard part of commercial insurance credentialing packages. Such required disclosures can prompt a demand to appear before a state medical board, a petition for medical records or even a psychiatric evaluation. In the worst of scenarios, medical boards can restrict clinicians from practicing medicine or even cause them to lose their licenses.	[Add Status]
Malpractice Insurance Applications All clinicians are required to maintain malpractice insurance, but many insurance applications ask similar intrusive questions about the history of mental health conditions or treatment. This discourages clinicians from seeking the mental health care they need because it creates the fear of losing their right to practice.	[Add Status]
Legal Discovery Process During Lawsuits Clinicians are often deterred from seeking mental health care out of fear that their own mental health records might be shared in the discovery process in malpractice lawsuits in which they are defendants. States should adopt a "Safe Haven" model like Virginia, which ensures clinicians can "seek support for burnout, career fatigue, and mental health without the fear of undue repercussions."	[Add Status]
Mental Health Insurance Requiring Treatment Where the Clinician Works Currently, clinicians seeking mental health care are required to seek treatment in the same health or hospital system where they work. This creates unnecessary stress and stigma for clinicians and can be a deterrent to seek help.	[Add Status]

If you have any questions or concerns about these structural barriers or about how we support your mental health and well-being, please contact [insert name, email, and/or phone number].
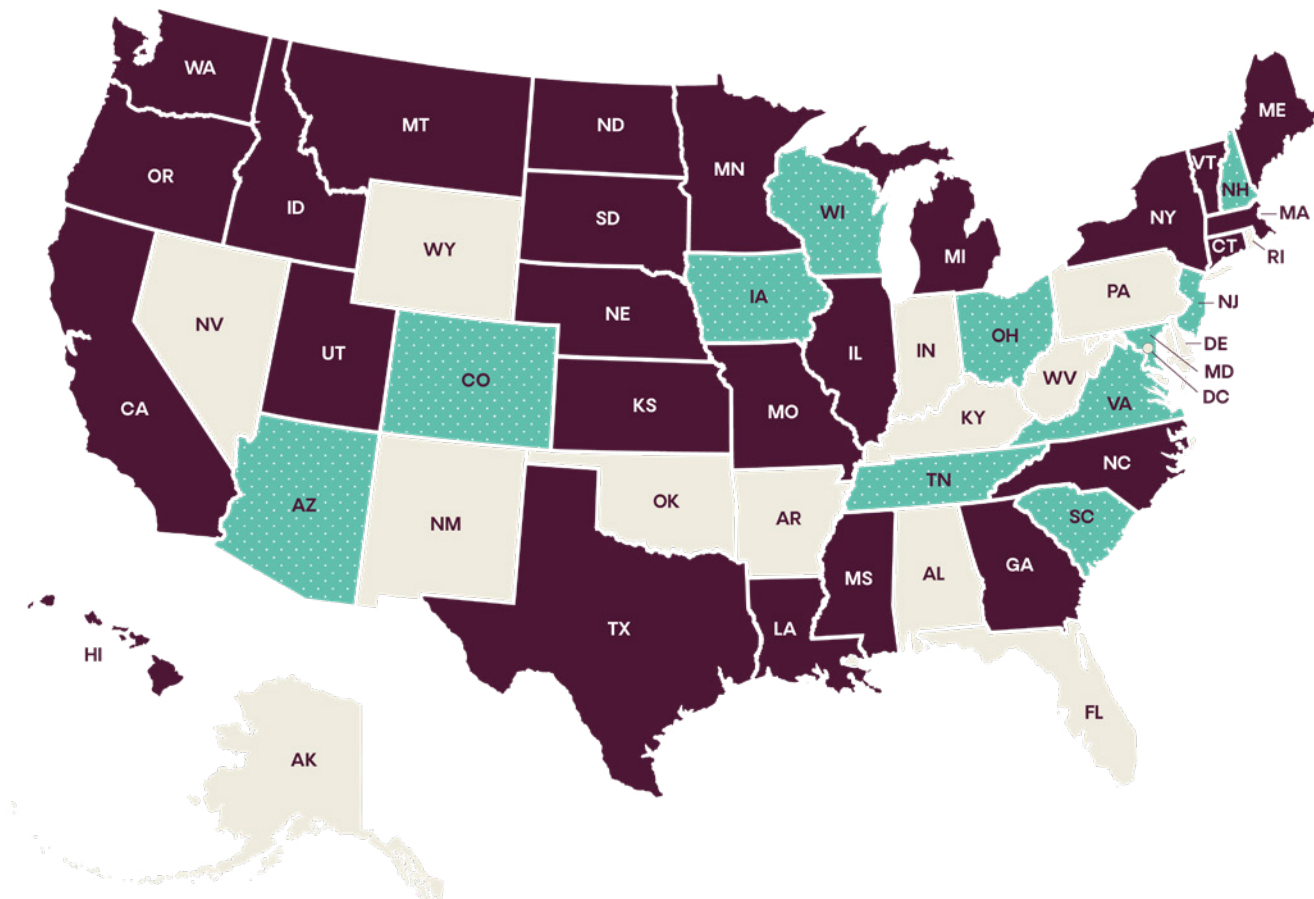
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Download the Handout ➜

WellBeing First Champions

As of September 12, 2023, **25 state medical boards** audited and changed the intrusive language from their licensure applications—benefiting more than **638,250 physicians.** Additionally, **11 states** are in the process of making these changes.

States where medical licensure applications were consistent with our recommendations.

States where medical licensure applications are in progress of being audited and changed.

States where medical licensure applications were inconsistent with our recommendations or where applications could not be accessed for review.

As of September 12, 2023, 12 health systems audited and changed the intrusive language from their credentialing applications—benefiting more than 127,000 health workers.

- Augusta Health
- Bon Secours Mercy Health
- Centra Health
- Children's Hospital of the Kings Daughters
- Henry Ford
- Inova Health System

- Mary Washington Health Care
- Northwell
- GoHealth Urgent Care
- Sentara Health System
- University of Virginia Health System
- Valley Health System

Additionally, 21 health systems are in the process of making these changes.

- Avera Health
- Ballad Health
- BayHealth
- Chesapeake Regional Healthcare
- Children's National Hospital
- Hartford Healthcare
- HCA Healthcare
- Iowa Statewide Credentialing
- Indian Health System
- Johns Hopkins Health System
- LCMC Health

- Mass General Brigham
- MedStar Health
- My Michigan Health
- NYC Health + Hospitals
- Oklahoma State University Health
- Sanford Health
- Sovah
- University of New Mexico, SOM
- UCHealth
- Virginia Commonwealth University Health

Protect the mental health of our health workforce

Learn more →

Want to be ALL IN for prioritizing clinician well-being?

As a WellBeing First Champion, licensure boards, hospitals, and health systems verify to ALL IN that licensure and credentialing applications have been changed to not include intrusive mental health questions.

The WellBeing First Champion Badge serves as a visual recognition that licensure boards, hospitals, and health systems are ALL IN for prioritizing health worker well-being. When health workers are deciding in which state or organization to work, the WellBeing First Champion Badge can be used to show that a location will not require health workers to answer intrusive mental health questions.

For medical boards, nursing boards, and hospitals and health systems who are ALL IN for protecting the healthcare workforce, join our Challenge to be recognized as a WellBeing First Champion.

Verify Now →

All In
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HEROES' Dr. Lorna Breen Foundation

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