

APA Official Actions

Position Statement on Inquiries about Diagnosis and Treatment of Mental Disorders in Connection with Professional Credentialing and Licensing

Approved by the Board of Trustees, July 2024

Approved by the Assembly, May 2024

© Copyright [YEAR], American Psychiatric Association. All rights, including for text and data mining (TDM), Artificial Intelligence (AI) training, and similar technologies, are reserved.

“Policy documents are approved by the APA Assembly and Board of Trustees. . . These are . . . position statements that define APA official policy on specific subjects. . .” – *APA Operations Manual*

Issue:

The APA recognizes the important role served by licensing boards, institutional privileging committees, insurance credentialing panels, and other entities charged with protecting the public from impaired physicians, attorneys, and other licensees. In discharging their responsibilities, these entities legitimately may inquire about current functional impairment in professional conduct and, when relevant, current general medical, mental, or substance use disorders that may be associated with such impairment. However, many boards continue to require that applicants respond to broad questions regarding past mental diagnoses and treatment history that can lead to discriminatory treatment and may not be at all relevant to current impairment. The APA believes that diagnosis and treatment of a mental or substance use disorder are, per se, not relevant to the question of current impairment, and that oversight entities should not include questions about past diagnoses and treatment as a component of a general screening inquiry.

APA Position:

1. **It is discriminatory for licensing boards, training programs, regulatory bodies, [and employers] to make general screening inquiries about diagnosis and treatment of mental disorders. Only inquiries about current medical conditions that impair the applicant’s capacity to function in a manner relevant to the position are acceptable.**
2. **If an applicant acknowledges or other sources document a relevant impairment of functioning, inquiries about mental disorders or treatment may be appropriate for the sole purpose of understanding current functioning and performance.**
3. **When relevant, applicants must be informed of the potential for public disclosure of any information they provide on applications.**
4. **If the applicant raises a mental health diagnosis or treatment as an explanation for conduct or behavior that may otherwise warrant denial of credentials or licensure, inquiry into such diagnosis or treatment, may be warranted provided that the inquiry is narrowly, reasonably, and individually tailored. Inquiries and requests for medical or hospital records should be**

narrowly tailored to provide access only to the minimum necessary information that is reasonably needed to assess the applicant's current fitness to practice.

- 5. Personal health information obtained for licensing and credentialing should be kept confidential and destroyed after a reasonable period of time.**

Authors: Paul S. Appelbaum, MD; Carl Fisher, MD; Tanuja Gandhi, MD; Danielle B. Kushner, MD; Council of Psychiatry and Law