



HR0042

LRB103 29601 MST 55996 r

1

HOUSE RESOLUTION

2           WHEREAS, There is an increasing number of physicians  
3           experiencing burnout, a potential factor in the increased  
4           rates of physicians having depression and committing suicide;  
5           and

6           WHEREAS, Physicians who have or have had mental health  
7           concerns may be reluctant to seek treatment as it may cause  
8           difficulty in obtaining and/or renewing a medical license as  
9           well as obtaining institutional privileges; and

10           WHEREAS, Physicians not receiving treatment for mental  
11           health issues may pose harm to patients, and a lack of  
12           treatment for mental health issues can contribute to untreated  
13           burnout, depression, and increased rates of suicide; and

14           WHEREAS, Physicians have the right to obtain the same care  
15           as patients without retribution and with respect for the  
16           privacy of physicians' protected health information; and

17           WHEREAS, The American Psychiatric Association has found no  
18           evidence that a physician who has been treated for a mental  
19           illness is any more likely to harm a patient than a physician  
20           with no mental health issues; and

1           WHEREAS, The Americans with Disabilities Act of 1990  
2 states that employers cannot discriminate against employees  
3 based on mental or physical health; and

4           WHEREAS, The 2018 American Psychiatric Association  
5 Position Statement on Inquiries About Diagnosis and Treatment  
6 of Mental Disorders in Connection with Professional  
7 Credentialing and Licensing recommends that medical licensing  
8 bodies not ask applicants about prior diagnosis and treatment  
9 of mental health disorders; and

10           WHEREAS, Per the 2018 American Psychiatric Association  
11 Position Statement on Inquiries About Diagnosis and Treatment  
12 of Mental Disorders in Connection with Professional  
13 Credentialing and Licensing "Medical or hospital records  
14 requested shall be by way of narrowly tailored requests and  
15 releases that provide access only to information that is  
16 reasonably needed to assess the applicant's fitness to  
17 practice. All personal or health-related information shall be  
18 kept strictly confidential and shall be accessed only by  
19 individuals with a legitimate need for such access...Personal  
20 health information collected by the board should be kept  
21 confidential and should be destroyed after a reasonable period  
22 of time"; and

23           WHEREAS, Many initial and renewal applications for medical

1 licenses and associated applications and application reference  
2 forms, medical specialty boards, and institutional privilege  
3 and credential applications continue to include questions  
4 about physicians' mental health, and physicians who disclose a  
5 current or past mental health condition may be investigated or  
6 sanctioned; and

7 WHEREAS, Those applications that continue to make  
8 inquiries about a physician's mental health should use  
9 language consistent with the Americans with Disabilities Act,  
10 which limits questions to whether the individual has a medical  
11 condition that currently impacts his or her ability to  
12 practice medicine; and

13 WHEREAS, American Medical Association Policy H-275.970  
14 addresses issues of potential discrimination and  
15 confidentiality violations in the licensing, privileging and  
16 credentialing processes; therefore, be it

17 RESOLVED, BY THE HOUSE OF REPRESENTATIVES OF THE ONE  
18 HUNDRED THIRD GENERAL ASSEMBLY OF THE STATE OF ILLINOIS, that  
19 we urge the Illinois State Medical Society delegation to the  
20 American Medical Association to submit a resolution to the  
21 American Medical Association requesting that Policy H-275.970,  
22 Licensure Confidentiality, be amended as follows:

23 "1. The AMA (a) encourages specialty boards, hospitals,

1 and other organizations involved in credentialing and/or  
2 privileging, as well as state licensing boards, to take all  
3 necessary steps to assure the confidentiality of information  
4 contained on application forms for credentials; (b) encourages  
5 ~~boards~~ these entities to include in application forms only  
6 requests for information that can reasonably be related to  
7 medical practice; (c) encourages state licensing boards,  
8 specialty boards, hospitals and other organizations involved  
9 in credentialing and/or privileging to exclude from license  
10 application forms information that refers to psychoanalysis,  
11 counseling, or psychotherapy required or undertaken as part of  
12 medical training; (d) encourages state medical societies and  
13 specialty societies to join with the AMA in efforts to change  
14 statutes and regulations to provide needed confidentiality for  
15 information collected by licensing boards and related  
16 organizations; and (e) encourages state licensing boards,  
17 specialty boards, hospitals and other organizations involved  
18 in credentialing and/or privileging to require disclosure of  
19 physical or mental health conditions only when a physician is  
20 suffering from a condition that currently impairs his/her  
21 judgment or that would otherwise adversely affect his/her  
22 ability to practice medicine in a competent, ethical, and  
23 professional manner, or when the physician presents a public  
24 health danger.

25 2. Our AMA will have all those state medical boards,  
26 specialty boards, hospitals, and other organizations involved

1 in credentialing/privileging that wish to retain questions  
2 about the health of applicants on medical licensing  
3 applications confirm the use of or will change by 2024 all  
4 inquiries of the health of applicants to the language  
5 recommended by the Federation of State Medical Boards that  
6 reads, "Are you currently suffering from any condition for  
7 which you are not being appropriately treated that impairs  
8 your judgment or that would otherwise adversely affect your  
9 ability to practice medicine in a competent, ethical and  
10 professional manner? (Yes/No)."

11 3. Our AMA will work with the Federation of State Medical  
12 Boards, the American Hospital Association, the American Board  
13 of Medical Specialties, and state medical societies to develop  
14 policies and strategies to ensure that by 2024 all new and  
15 renewal medical licensure and associated applications and  
16 application reference forms, privileging, credentialing and  
17 related applications and documentation will request or  
18 disclose only information that is reasonably needed to address  
19 the applicant's current fitness to practice medicine and  
20 respect the privacy of physician's protected health  
21 information."; and be it further

22 RESOLVED, That a suitable copy of this resolution be  
23 delivered to the Illinois State Medical Society and the  
24 American Medical Association.