

NPDB

National Practitioner Data Bank

NPDB Spring 2015 Education Forum Guidebook Session

April 7, 2015

U.S. Department of Health and Human Services

Health Resources and Services Administration

Bureau of Health Workforce

Division of Practitioner Data Bank



Agenda

- ▶ Overview of the New NPDB Guidebook
- ▶ Key Changes
- ▶ Q&A Game
- ▶ Next Steps
- ▶ Open Discussion

- ▶ Revision process
 - Announced publication of draft NPDB Guidebook in Federal Register on December 27, 2013. Comment period ended January 10, 2014.
 - Received 360 comments.
- ▶ Format
 - <http://www.npdb.hrsa.gov/resources/aboutGuidebooks.jsp>

Guidebook Cover Page

Chapter A: Introduction and General Information

Chapter B: Eligible Entities

Chapter C: Subjects of Reports

Chapter D: Queries

Chapter E: Reports

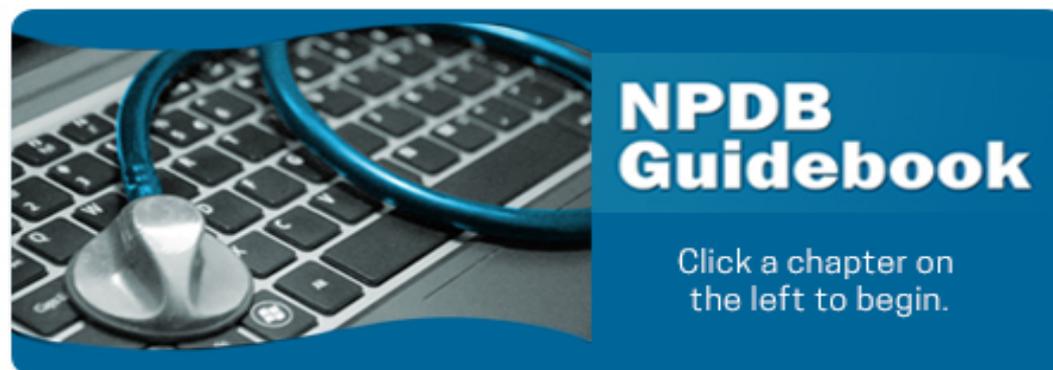
Chapter F: Subject Statements and the Dispute Process

Chapter G: Fees

Chapter H: Information Sources

Appendix A: Glossary

Appendix B: Acronym Guide



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 [Download the Guidebook \(PDF - 1.6 MB\)](#)



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Chapter B: Eligible Entities

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Registering with the NPDB

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Eligible entities are responsible for certifying their eligibility to report to and/or query the NPDB by registering with the Data Bank. The online registration and certification process determines and sets an entity's requirements and restrictions regarding querying and reporting to the NPDB.

Eligible entities not currently registered with the NPDB should complete an [Entity Registration form](#). The information requested on the Entity Registration form provides the NPDB with essential information concerning the entity, such as the organization's name, address, point of contact for reports, Federal Taxpayer Identification Number, type of ownership, the organization's authority to participate in the NPDB under each of the statutes governing the NPDB, and the organization's primary function or service.

Eligible entities are responsible for certifying their eligibility to report to and/or query the NPDB by registering with the Data Bank.

Each entity that initiates the entity registration process is given a [Data Bank Identification Number \(DBID\)](#) and must create a user ID and a password for its account. Once an entity completes the entity registration documents, the entity's

certifying official must sign the documents before returning them to the Data Bank for processing. An entity is not successfully registered until the Data Bank receives all registration and verification documents and the registration forms are confirmed by the NPDB. The registration process must be completed before an entity is able to submit reports and queries.

Key Changes

What the new Guidebook does:

- ▶ Blends Healthcare Integrity and Protection Data Bank and NPDB to reflect new combined regulations
- ▶ Adds Section 1921
- ▶ Provides policy clarification



What the new Guidebook does NOT do:

- ▶ Make revisions that require legislative or regulatory changes
- ▶ Accept or address every recommendation made by commenters.



Key Changes

- ▶ Eligible entities
 - Definition of “Other Health Care Entity”
 - Registration requirements (use of DBIDs, User IDs)
- ▶ Subjects of Reports



Key Changes

▶ Queries

- Centralized credentialing
- Delegated credentialing
- Clinical vs. non-clinical privileges

▶ Reports

- Submitting reports
 - Corrections vs. revisions
 - Appeals



Key Changes

- Reporting Medical Malpractice Payments
 - Oral vs. written claims
 - Identifying practitioners
- Reporting Adverse Clinical Privileges Actions
 - Summary Suspensions
 - Proctors

Key Changes

- Investigations

Definition of term is not controlled by entity's bylaws.

Routine review of a practitioner is *not* an investigation.

Focus on a particular practitioner.

Precursor to professional review action.

Ongoing until decisionmaking authority takes final action.

Key Changes

- Reporting Adverse Professional Society Membership Actions
 - Expert witness testimony
- Other adjudicated actions
 - Taken in conjunction with clinical privileges actions

Key Changes

- Reporting Licensure and Certification Actions
 - Administrative fines
 - Summary/Emergency suspensions
 - Stayed actions
 - Denials
 - Withdrawals, and failure to renew while under investigation
 - Voluntary surrenders

Q & A Game

Eligible Entities

Data Bank Identification Number (DBID)

Question 1:

- ▶ **A hospital's human resources department and medical staff services staff will both need to query the NPDB. Can one organization have more than one DBID?**

Eligible Entities

Data Bank Identification Number (DBID)

Answer 1 (Part 1 of 2):

An organization can have more than one DBID. However, rather than registering for multiple DBIDs, an entity is encouraged to simply create multiple user accounts (i.e., user IDs) under the organization's single DBID. An entity can establish as many user accounts as necessary and can deactivate those accounts when needed without deactivating its DBID.

Eligible Entities

Data Bank Identification Number (DBID)

Answer 1 (Part 2 of 2):

If the hospital chooses to register its human resources department and medical staff services staff separately with the NPDB, each department may obtain separate DBIDs. However, departments with different DBIDs cannot download a response from a query entered by another department with a different DBID. Also, special care must be taken to be sure that the same report is not submitted twice.

Eligible Entities

User ID

Question 2:

- ▶ **If an eligible entity replaces an employee, does the entity keep and re-use the former employee's user ID?**

Eligible Entities

User ID

Answer 2:

No. Each authorized user is required to have a unique user account with a unique user ID. Entities must deactivate any authorized user accounts when the authorized user is no longer affiliated with the entity or if the user account has been compromised.

Subjects of Reports

Affordable Care Act Navigators

Question 3:

- ▶ **Can eligible entities submit reports on Navigators, who are trained to provide assistance to individuals and companies looking for health care coverage through marketplaces created by the Patient Protection and Affordable Care Act of 2010?**

Subjects of Reports

Affordable Care Act Navigators

Answer 3:

It depends on the reporting entity. For example, several States regulate Navigators as suppliers of health care, and those boards would report licensing and certification actions taken against Navigators. In general, the following types of entities may file reports with the NPDB against health care suppliers: health plans, private accreditation organizations, State licensing and certification authorities, State law enforcement agencies, State Medicaid fraud control units, State agencies administering or supervising the administration of State health care programs, State prosecutors, Federal agencies, and Federal prosecutors.

Subjects of Reports

Unlicensed Practitioners

Question 4:

- ▶ **If a State board that regulates dietitians issues a cease and desist order against a person who is not a registered dietitian but who is practicing as one, is the issuance of the cease and desist order reportable to the NPDB?**

Subjects of Reports

Unlicensed Practitioners

Answer 4:

Yes. In this example, the State regulates the practice of dietetics and prohibits individuals from practicing as dietitians – even if they do not refer to themselves as dietitians, licensed dietitians, or registered dietitians – without being licensed by the board. NPDB regulations require the reporting not only of individuals who are licensed, but also those who hold themselves out to be so licensed. Therefore, the cease and desist order issued by the board would be reportable.

Credentials Verification Organization (CVO)

Question 5:

- ▶ **To query the NPDB, should a CVO register as a single entity or agent?**

Credentials Verification Organization (CVO)

Answer 5:

It depends.

- A CVO operating in an environment with a centralized peer review process and decisionmaking body should register with the NPDB as a single entity.
- A CVO should register with the NPDB as an agent if each health care entity for which it works conducts its own credentialing and grants privileges at its own facility. When a CVO is registered as an agent, each facility for which it works must register separately with the NPDB as a health care entity.

Hospital's Querying Requirement

Question 6:

- ▶ **Under what conditions are hospitals required to query every 2 years on courtesy staff who are afforded only non-clinical professional privileges?**

Queries

Hospital's Querying Requirement

Answer 6:

Hospitals are required to query on courtesy staff considered part of the medical staff, even if afforded only non-clinical professional courtesies such as use of the medical library and continuing education facilities. If a hospital extends non-clinical practice courtesies without first appointing practitioners to a medical staff category, querying is not required on those practitioners.

Hospital's Querying Requirement

Question 7:

- ▶ **An advanced practice nurse (APRN) is applying for a position at a hospital. Does the hospital have to query the NPDB on the nurse?**

Queries

Hospital's Querying Requirement

Answer 7:

It depends. If the hospital considers the position the APRN is applying for to be on the hospital's medical staff, or if the APRN will hold clinical privileges at the hospital, the hospital must query on the APRN when the APRN applies and biennially thereafter while the APRN is on staff or holds privileges. If the hospital does not consider the position to be on the medical staff or if the APRN will not hold clinical privileges, the hospital is not required to query on the APRN. It may do so if it desires, however.

Submitting Reports: Correction vs. Revision

Question 8:

- ▶ **If an entity changes the penalty it imposes or reconsiders the grounds upon which it took an action, should a correction or revision be filed?**

Submitting Reports: Correction vs. Revision

Answer 8:

If an entity subsequently changed the penalty it imposed, or if it reconsidered the grounds on which it took an action, but the original report correctly described the penalty or grounds at the time the original report was filed, then a Revision-to-Action Report, not a Correction Report, should be filed.

Submitting Reports: Appeals

Question 9:

- ▶ **How should a previously reported action that is overturned on appeal be reported to the NPDB?**

Submitting Reports: Appeals

Answer 9:

When a previously reported action is overturned on appeal, the reporter should void the previously submitted report.

Submitting Reports: Appeals

Question 10:

- ▶ **If a hospital's decision to terminate a physician is based on a licensure action, must the hospital file a Notice of Appeal if the physician appeals either the licensure or termination?**

Reports

Submitting Reports: Appeals

Answer 10:

No. The regulations do not require the hospital to file a Notice of Appeal if a physician, who was terminated from the hospital based on a licensure action, appeals the decision the hospital made to terminate him or her. As well, the hospital would not be required to file a Notice of Appeal if the physician appealed the licensure action that was the basis of the hospital's termination; when a Notice of Appeal must be filed, only the entity taking the adverse action needs to file the Notice of Appeal. Only the licensing board, in this case, would be required to file a Notice of Appeal if the physician appealed a licensure action that had been reported to the NPDB.

Reports

Medical Malpractice Payments

Question 11:

- ▶ **Following an unsuccessful course of treatment, a patient and a practitioner enter into a State-sponsored voluntary series of discussions in an attempt to settle their disagreement before resorting to litigation. The discussions lead to the practitioner's insurance company making a money payment to the patient to settle the dispute. Should this money payment be reported to the NPDB?**

Reports

Medical Malpractice Payments

Answer 11:

It depends. If, during the course of discussions, the patient made a written complaint or written claim demanding a monetary payment for damages, the payment must be reported. If the complaint or claim for damages was never put in writing, the payment is not reportable.

Medical Malpractice Payments

Question 12:

- ▶ **If an individual practitioner is not named, identified, or described in a medical malpractice claim or complaint, but the facility or practitioner group is named, should the payment be reported?**

Medical Malpractice Payments

Answer 12:

No, with one exception. If the named defendant is a sole practitioner identified as a “professional corporation,” a payment made for the professional corporation must be reported for the practitioner.

Clinical Privileges Actions

Question 13:

- ▶ **Based on assessment of professional competence, a proctor is assigned to watch a physician's or dentist's procedures for a period of more than 30 days, and the proctor needs to be present or grant approval before medical care is provided by the practitioner. Is this reportable to the NPDB?**

Reports

Clinical Privileges Actions

Answer 13:

Yes. If, for a period lasting more than 30 days, the physician or dentist cannot perform certain procedures without proctor approval or without the proctor being present and watching the physician or dentist, the action constitutes a restriction of clinical privileges and must be reported to the NPDB. However, if the proctor is not required to be present for or approve the procedures (for example, the proctoring consists of the proctor reviewing the physician's or dentist's records or procedures after they occur), the action is not considered a restriction of clinical privileges and should not be reported to the NPDB.

Clinical Privileges Actions

Question 14:

- ▶ **A physician or dentist surrenders clinical privileges for personal reasons but is under investigation for professional competence or conduct. Is this reportable to the NPDB?**

Clinical Privileges Actions

Answer 14:

Yes. A surrender of clinical privileges while under investigation must be reported, regardless of whether the surrender was for personal reasons.

Clinical Privileges Actions

Question 15:

- ▶ **A physician who applied for clinical privileges does not meet a health plan's threshold criteria for the privileges and withdraws the application. Is this reportable to the NPDB?**

Clinical Privileges Actions

Answer 15:

No. A health plan should not report the withdrawal of a physician's application for clinical privileges when the physician fails to meet the health plan's threshold requirements.

Clinical Privileges Actions

Question 16:

- ▶ **A physician applied for a medical staff appointment at a hospital but then withdrew the application before a final decision was made by the hospital's governing body. The physician was not being specifically investigated by the hospital. Should the withdrawal of the application be reported to the NPDB?**

Clinical Privileges Actions

Answer 16:

No. Absent a particular investigation, the voluntary withdrawal of an application for medical staff appointment or clinical privileges should not be reported to the NPDB.

Reports

Clinical Privileges Actions

Question 17:

- ▶ **A physician applied to a hospital for clinical privileges to perform cardiac procedures. The hospital requires that such applications be granted only if the applying physician has performed 50 cardiac procedures in the previous year. The applying physician has performed only 40 such procedures. The hospital denies the application based solely on the physician not having met its 50-procedure requirement. Should this denial be reported to the NPDB?**

Clinical Privileges Actions

Answer 17:

No. A denial of clinical privileges that occurs solely because a practitioner does not meet a health care institution's established threshold criteria for that particular privilege should not be reported to the NPDB. Such denials are not considered to be the result of a professional review action relating to the practitioner's professional competence or professional conduct but, rather, are considered to be decisions based on eligibility that are not reportable.

Reports

Clinical Privileges Actions

Question 18:

- ▶ **When a physician surrenders medical staff privileges due to personal reasons, infirmity, or retirement, and such a surrender did not occur in order to avoid an investigation or during an investigation, should it be reported to the NPDB?**

Reports

Clinical Privileges Actions

Answer 18:

No. The surrender not should not be reported to the NPDB because the physician did not surrender his clinical privileges while under investigation by a health care entity relating to possible professional incompetence or improper professional conduct, or in return for not conducting such an investigation. However, if an investigation was under way when the physician surrendered his privileges, even if the physician was not aware of the investigation, the surrender would have to be reported even if the physician claimed he surrendered the privileges for unrelated personal reasons.

Reports

Clinical Privileges Actions

Question 19:

- ▶ **A health care entity terminated a physician's contract for causes relating to poor patient care, which in turn resulted in the loss of the practitioner's network participation. Should this be reported to the NPDB using one or two reports?**

Reports

Clinical Privileges Actions

Answer 19:

Depending on the circumstances, the health care entity may be required to submit two different reports. The loss of the practitioner's network participation that resulted from the termination of the contract for reasons relating to professional competence or professional conduct must be reported as a clinical privileges action only if it is considered to be a professional review action by the health care entity.

Clinical Privileges Actions

Question 20:

- ▶ **A preferred provider organization (PPO) investigated a member physician after receiving quality of care complaints from several plan participants. The physician was unaware of the investigation, but, during the investigation, he relinquished his panel membership for personal reasons. Is this reportable?**

Clinical Privileges Actions

Answer 20:

Yes. A health care entity must report a physician's surrender of panel membership (a form of clinical privileges) while under investigation. The reporting entity should be able to produce evidence that an investigation was initiated prior to the surrender, and the physician's awareness of the investigation is immaterial. In addition, in this situation, any termination of the physician's contract with the PPO must be reported to the NPDB separately if the action meets the definition of an "other adjudicated action or decision."

Clinical Privileges Actions

Question 21:

- ▶ **A physician holds clinical privileges at First Hospital and Second Hospital. First Hospital suspends the physician's privileges. Second Hospital's rules provide that a suspension or termination of privileges at another hospital requires suspension or termination at Second Hospital. Consequently, once it learns of First Hospital's suspension of the physician's clinical privileges, Second Hospital also suspends the physician's privileges. Should Second Hospital report its action to the NPDB?**

Reports

Clinical Privileges Actions

Answer 21:

No. Second Hospital's suspension of the physician is an administrative action that does not involve a professional review action and, therefore, should not be reported.

Reports

Clinical Privileges Actions

Question 22:

- ▶ **A physician held clinical privileges at a hospital entitling him to perform specific procedures. The head of the physician's medical department pointed out to the physician that the physician was no longer performing some of the procedures, and the department head suggested that the physician voluntarily relinquish those privileges. The physician agreed. Should this voluntary relinquishment of privileges be reported to the NPDB?**

Reports

Clinical Privileges Actions

Answer 22:

No. The physician was not under investigation when the privileges were voluntarily relinquished, and consequently no reportable action occurred.

Clinical Privileges Actions

Question 23:

- ▶ **A physician is denied panel membership because a peer review committee determined that the physician had too many malpractice settlements. Is this denial of membership reportable to the NPDB?**

Reports

Clinical Privileges Actions

Answer 23:

It depends. A reporting entity must report a physician's denial of panel membership based on too many malpractice settlements if the peer review committee determines that the malpractice settlements relate to the competence or conduct of the physician.

Reports

Clinical Privileges Actions

Question 24:

- ▶ **A physician who holds clinical privileges at a hospital tests positive for a nonprescribed drug. He enters into a treatment plan, but he continues to practice while gradually working to modify his addictive behavior. Is this reportable to the NPDB?**

Reports

Clinical Privileges Actions

Answer 24:

It depends. If there was a professional review action taken by the hospital that limits the physician's privileges while he seeks treatment, the restriction or limitation of clinical privileges must be reported to the NPDB. If there is no restriction or limitation, but the practitioner must be interviewed and screened periodically for a relapse, this would not be reportable to the NPDB.

Reports

Clinical Privileges Actions

Question 25:

- ▶ **A hospital initiated an investigation related to the professional conduct of a physician who held time-limited, nonrenewable, temporary privileges at the hospital. During the investigation, the physician's temporary privileges expired and the hospital took no further action. Should this be reported?**

Clinical Privileges Actions

Answer 25:

No. Generally, the NPDB makes no distinction between adverse actions taken with respect to temporary or permanent privileges. However, in this case, there was no resignation of privileges while under investigation because the temporary privileges expired and the physician could not renew them. This is unlike the typical situation where regular privileges that could be renewed expire during an investigation. In a situation such as that, an action to not renew permanent clinical privileges while under investigation for issues related to professional competence or conduct is considered a resignation while under investigation and should be reported.

Professional Society Membership Actions

Question 26:

- ▶ **A physician resigns a professional society membership or allows the membership to lapse while under a formal peer review investigation by the professional society, but before a final decision is rendered. Is this reportable to the NPDB?**

Reports

Professional Society Membership Actions

Answer 26:

No. Professional societies must report professional review actions based on reasons related to professional competence or professional conduct that adversely affect or may adversely affect the membership of a physician or dentist. If the professional society has not yet taken a final action, there is no requirement to report.

Professional Society Membership Actions

Question 27:

- ▶ **A professional society takes a professional review action against a member physician to revoke the physician's membership based on a finding that the physician provided expert witness testimony without meeting or conducting an evaluation of the individual, and that the physician-provided a medical opinion that departed from the widely held standard of care. Should the membership revocation be reported to the NPDB?**

Professional Society Membership Actions

Answer 27:

It depends. The professional society took an adverse action against the membership of a physician in the course of a professional review action that was related to the member's professional competence or conduct. If the professional society determines that the member's professional competence or conduct adversely affects, or could adversely affect, the health or welfare of a patient, the action must be reported to the NPDB.

Professional Society Membership Actions

Question 28:

- ▶ **A professional society's ethics committee takes a professional review action to place a physician on probation for 60 days for falsifying a résumé. Should this action be reported to the NPDB?**

Professional Society Membership Actions

Answer 28:

It depends. Generally, if the professional society determines that falsifying the résumé is professional conduct that adversely affects, or could adversely affect, the health or welfare of a patient, the action must be reported to the NPDB.

Reports

Professional Society Membership Actions

Question 29:

- ▶ **A professional society suspended the membership of a physician for reasons related to professional conduct. It reported this action to the NPDB. Later, the professional society's peer review committee took a professional review action that resulted in the reinstatement of the physician's membership. Should the reinstatement be reported?**

Professional Society Membership Actions

Answer 29:

It depends. If the suspension was imposed with a fixed term and the physician was automatically reinstated at the end of the fixed term as specified in the Initial Report to the NPDB, no Revision-to-Action Report is required. Queriers can easily determine whether the suspension has been lifted by looking at the date and the term in the Initial Report. If the suspension had an indefinite term, or the physician was reinstated before the expiration of the fixed term, or if the physician was not reinstated when the fixed term expired, a Revision-to-Action Report must be filed.

State Licensure and Certification Actions

Question 30:

- ▶ **Is the withdrawal of an initial application for licensure or certification while under investigation reportable to the NPDB?**

State Licensure and Certification Actions

Answer 30:

No. An applicant's withdrawal, for any reason, of an initial application for licensure or certification is not reportable, even if the applicant is under investigation.

State Licensure and Certification Actions

Question 31:

- ▶ **Is the withdrawal, while under investigation, of an application to renew a licensure or certification reportable to the NPDB?**

State Licensure and Certification Actions

Answer 31:

Yes. Investigations should not be reported to the NPDB. However, withdrawal of a renewal application for licensure or certification, or failure to renew, while the State licensure or certification authority is investigating the applicant is reportable.

State Licensure and Certification Actions

Question 32:

- ▶ **Is the withdrawal of an initial or renewal application for State license that does not meet threshold licensing criteria reportable?**

State Licensure and Certification Actions

Answer 32:

No. State licensing or certification authorities should not report cases in which a health care practitioner, entity, provider, or supplier simply does not meet the threshold criteria for licensure or certification.

State Licensure and Certification Actions

Question 33:

- ▶ **In lieu of taking a disciplinary action, a State licensing board issues a consent order in which a practitioner agrees not to re-apply for a license in the future. Is this reportable to the NPDB?**

State Licensure and Certification Actions

Answer 33:

Yes. Any State licensure or certification action that meets NPDB reporting requirements must be reported, regardless of whether the action was imposed through board order, consent agreement, or other method.

State Licensure and Certification Actions

Question 34:

- ▶ **Should a State licensing or certification authority report a suspension when the suspension has been fully stayed prior to implementation?**

State Licensure and Certification Actions

Question 34:

No. Licensure and certification actions that are imposed with a stay should not be reported to the NPDB. However, any reportable action that accompanies a stayed action must be reported.

State Licensure and Certification Actions

Question 35:

- ▶ **A board of medical examiners initiated an investigation related to a physician's professional conduct. Two weeks later, the physician allowed his license to expire. Since the physician's license lapsed prior to any proposed agreement or board decision, must the lapse be reported to the NPDB?**

State Licensure and Certification Actions

Answer 35:

Yes. A nonrenewal of a license while under or to avoid an investigation must be reported to the NPDB.

Next Steps

- ▶ Guidebook is a living document
- ▶ Send questions/recommendations/request for changes to NPDBpolicy@hrsa.gov

Open Discussion

