



# NPDB

National Practitioner Data Bank

**NPDB Spring 2015 Education Forum**

**Medical Malpractice Breakout Session**

*In this session, we will review the requirements for medical malpractice payment reporting. We will discuss new and relevant topics such as alternative medical malpractice payment models and reporting requirements to the NPDB. We will also have time to discuss your questions on report fields and any other issues or concerns you identify.*

## **Agenda**

### **Brief Overview of MMPR Requirements**

- What are the elements of the elements of a reportable medical malpractice payment

### **Communication and Resolution Programs**

- Review the common elements of CRPs
- Discussion on participant's experiences with CRP payments and reporting

### **Reporting Fields and Narratives**

- Tell us your thoughts questions and ideas on reporting.

### **Open Discussion/Table Discussions**

- We'll go over several reporting scenarios in small groups and discuss in the larger group

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## NPDB Spring 2015 Education Forum Medical Malpractice Payment Breakout

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U.S. Department of Health and Human Services

Health Resources and Services Administration

Bureau of Health Workforce

Division of Practitioner Data Bank

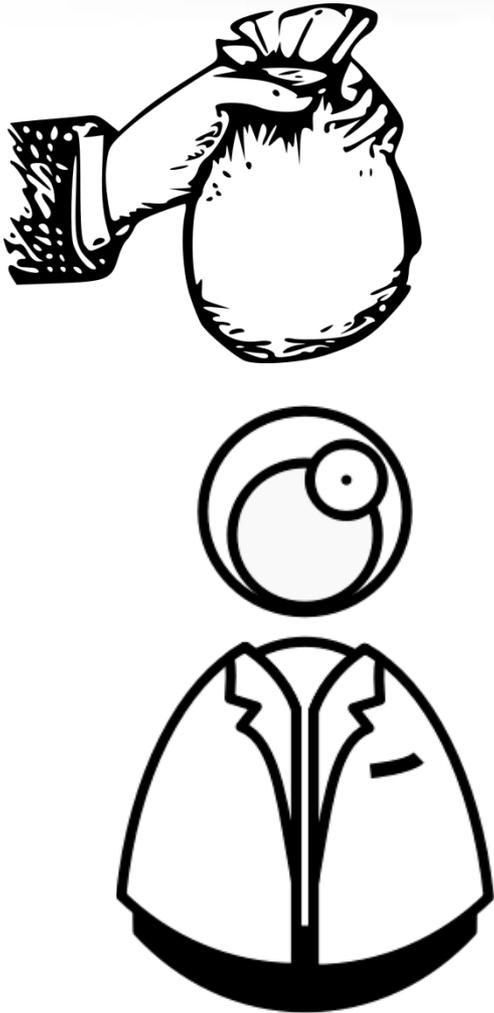


## Agenda

- ▶ Overview of Medical Malpractice Payment Report (MMPR) Requirements
- ▶ Communication and Resolution Programs
- ▶ Discussion
- ▶ Reporting Scenarios



# Overview of MMPR Requirements



For a medical malpractice payment to be reportable to the NPDB, there must be:

- A payment made;
- For the benefit of a health care practitioner;
- Against whom a medical malpractice claim or judgment was made;
- By a third party.

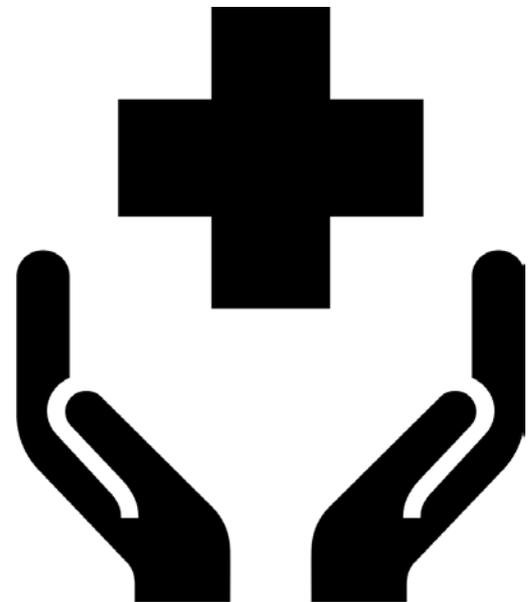
## Overview of MMPR Requirements

- **Statutory definition of medical malpractice claim:** a written claim or demand for payment based on a health care provider's furnishing (or failure to furnish) health care services, and includes the filing of a cause of action, based on the law of tort, brought in any court of any State or the United States seeking monetary damages.



## Overview of MMPR Requirements

- Claims raised in other adjudicative bodies, such as alternative dispute resolution or disclosure, apology and offer models are considered “claims” for the purposes of reporting, when they include a written demand from the patient for compensation.
- Standard of Care determinations are irrelevant for determining reporting requirements.



## Communication and Resolution Programs (CRPs)

### Other names:

Disclosure, Apology and Offer Models  
Alternative Medical Malpractice Models

### Common elements:

- ▶ Discussion, disclosure and open dialogue between patients and practitioners.
- ▶ May include monetary offers for injured patients.
- ▶ Several hospital-based plans.
- ▶ States with supporting legislature such as “waiting-periods” and state supported models and trusts.
- ▶ Claims can be initiated by hospital or practitioner.



## Discussion



- Familiarity and Experience with CRPs
- Waiting Periods
- Reporting Elements and Narratives
- Open Forum

# Reporting Scenarios

## Scenario 1

A hospital and a health care practitioner were named in a medical malpractice claim. Further review revealed that the practitioner had never treated the plaintiff who filed the claim. The practitioner was dismissed from the lawsuit without condition. A settlement on behalf of the hospital was reached and a payment was made to the plaintiff to resolve the claim. The release stated that the defendant healthcare practitioner was dismissed from the lawsuit prior to settlement and the payment was being made on behalf of the hospital. Is this payment reportable to the NPDB?

## Scenario 2

A defendant health care practitioner agreed to settle a medical malpractice claim in exchange for being dismissed from a lawsuit. All parties involved in the lawsuit agreed to the condition. Should the resulting payment be reported to the NPDB?



## Scenario 3

A hospital has a communication and resolution program (CRP) that patients may use to seek compensation for medical injuries in place of medical malpractice. Either the injured patient, patient's family, or the provider may initiate the resolution process. After communication between the physician and patient, if the injury is found to be "unavoidable," the patient may be compensated.

In this case, Patient X calls the hospital's CRP intake line to file a claim. The hospital administration staff records Patient X's claim into a database and the CRP process begins. Six months later, the dispute resolution panel awards Patient X \$100,000 dollars. Is this reportable? What do you need to know?