

## The National Practitioner Data Bank and Healthcare Integrity and Protection Data Bank (NPDB-HIPDB) Will Merge

Effective May 6, 2013 the NPDB-HIPDB will merge. Look for merger information on the Data Bank [homepage](#) on April 5, 2013.

## The Data Bank Offers U.S. Map of Data and Compliance Statistics by State

The [U.S. Map of Statistical Data and Compliance Statistics](#) is an interactive tool developed by the Data Bank that displays report statistics and compliance information by state. The tool enables anyone to click on and view each state's National Practitioner Data Bank (NPDB) report and compliance statistics, analyze the report data, or create their own customized data tables using report level data.

Click any state to access the following (In this article, we use Tennessee as an example.):



- **Statistical Data:** Two [trend plots](#) show the number of NPDB reports by type (for physicians licensed in the selected state) for the past 10 years. The trend plots show *Trends in Adverse Action Reports and Medical Malpractice Payment Reports for Physicians*, as well as *Trends in Adverse Action Reports by Report Type*. “Physicians” include physicians (MDs), osteopathic physicians (DOs), and related interns and residents. Users may view the data in a table format by clicking the [Tabular Statistical Data](#) tab.
- **Compliance Data:** Since February 2010, the Health Resources and Services Administration has been actively engaged in compliance activities that are enhancing the completeness of data reported to the Data Bank. Under the [Compliance Data](#) area, users may learn more about the Data Bank’s compliance effort by selecting the [Background](#) tab. Under the [Reporting Compliance Status](#) tab, users may view a state’s overall reported [compliance status](#) for all reviewed professions for the state (either “Compliant,” “Non-Compliant,” “Working Toward Compliance,” “Under Review,” or “Not Reviewed”).

Related to the map tool, the *NPDB Report Statistics for Physicians by State* [table](#) displays the total number of NPDB Medical Malpractice Payment Reports and Adverse Action Reports for physicians by state, in addition to state populations, numbers of physicians, and number of physicians with NPDB reports.

The U.S. map tool is one of several research and statistical features the Data Bank has developed for use by the public. As with all publicly available Data Bank research and statistical data, no personally identifying information is provided.

In future newsletter issues, the Data Bank will highlight other statistical data resources available to assist users in analyzing Data Bank report information.

## Helpful Hints from the Data Bank

### Determining If an Action is Related to Professional Competence and Conduct

Hospitals and other health care entities are responsible for reporting to the Data Bank clinical privileges actions that are based on a physician's or dentist's professional competence or professional conduct that adversely affects, or could adversely affect, the health or welfare of a patient. Yet hospitals or other health care entities may sometimes wonder how to determine whether the basis for an adverse action relates to a practitioner's professional competence or conduct. To make this determination, you should **examine your hospital's medical staff bylaws, rules, and regulations** with regard to the provisions that define:



- Who is empowered to take a professional review action.
- What constitutes a professional review action that adversely affects the clinical privileges of a practitioner.
- How that action relates to professional competence or professional conduct.

As a reminder, a hospital or other health care entity must report:

- Professional review actions that adversely affect a physician's or dentist's clinical privileges for a period of more than 30 days.
- Acceptance of a physician or dentist's surrender or restriction of clinical privileges while under investigation for possible professional incompetence or improper professional conduct, or in return for not conducting such an investigation or reportable professional review action. The criterion for determining whether or not an investigation took place is further detailed below under the sub-heading **Investigations**.

**Note:** Health care entities may report actions taken against the clinical privileges of health care practitioners other than physicians and dentists, but they are not required to do so.

## Investigations

An investigation in and of itself is **not** reportable to the Data Bank; only the surrender, restriction, or failure to renew clinical privileges, while under (or to avoid) investigation for issues related to the practitioner’s professional competence or conduct, must be reported. To be reported, the investigation must concern the practitioner’s professional competence or conduct **and** be one that could result in a professional review action taken against the practitioner’s privileges.

For example: A practitioner surrenders his clinical privileges. At the time of the surrender, the practitioner was under investigation by the health care entity for possible competence or conduct issues relating to patient care. The practitioner was not aware of the investigation. The surrender of privileges is reportable to the Data Bank. Whether or not the practitioner was aware of the investigation is immaterial. It is the action of surrender while under or to avoid investigation that is reportable to the Data Bank.

The following list can help you define what constitutes an investigation. For an investigation to be reportable, **all** of these criteria must be true.

<b>Investigation Guidelines</b>
<ul style="list-style-type: none"> <li>• <b>The investigation must be authorized by the health care entity.</b></li> </ul>
<ul style="list-style-type: none"> <li>• <b>The investigation must be focused on the practitioner in question.</b></li> </ul>
<ul style="list-style-type: none"> <li>• <b>The investigation must concern the professional competence and/or professional conduct of the practitioner.</b></li> </ul>
<ul style="list-style-type: none"> <li>• <b>A routine or general review of cases is NOT an investigation.</b></li> </ul>
<ul style="list-style-type: none"> <li>• <b>The investigation should be the precursor to a professional review action.</b></li> </ul>
<ul style="list-style-type: none"> <li>• <b>The investigation is considered ongoing until the health care entity’s decision making authority takes a final action or formally closes the investigation.</b></li> </ul>

If you have additional questions, please call the Customer Service Center at 1-800-767-6732. Information specialists are available to speak with you weekdays from 8:30 a.m. to 6:00 p.m. (5:30 p.m. on Fridays) Eastern Time. The Customer Service Center is closed on all Federal holidays.

## Is It Reportable?

Have you ever wondered if an action is reportable to the Data Bank? Keep reading Data Bank News for periodic reporting scenarios that may answer one of your questions.

**A State Licensing Board submitted a report to the Data Bank six months ago after the board placed a practitioner's license on probation. Three months ago, the board reinstated the license in full. The report in the Data Bank still indicates that the license is on probation. Since the status of the licensure action has changed, should the board update the information in the Data Bank?**



Reporting entities that submit an initial action to the Data Bank must also report any subsequent revision to that action by submitting a Revision-to-Action Report. Examples of when a Revision-to-Action Report should be submitted include:

- Additional sanctions have been taken against the subject of the report based on a previously reported incident.
- The length of action has been extended or reduced.
- A license, clinical privileges, professional society membership, accreditation or program participation has been reinstated.

The State Licensing Board, therefore, is required to file a Revision-to-Action Report after taking the action to reinstate the license. If, however, the initial action to place the license on probation included an automatic reinstatement of the license, which was indicated on the Initial Report, the board is not required to submit a Revision-to-Action Report.

If you have a difficult reporting scenario that you would like to share, please email your scenario to the Data Bank at [help@npdb-hipdb.hrsa.gov](mailto:help@npdb-hipdb.hrsa.gov). Giving the Data Bank an opportunity to respond to and share your scenario may help others with similar reporting scenarios.