

## What Did the Data Bank User Survey Discover?



In early 2014, the U.S. Department of Health and Human Services' Health Resources and Services Administration conducted a survey of entities and individuals eligible to use the National Practitioner Data Bank (NPDB). Respondents included Data Bank users and non-users who were eligible to report to the Data Bank, query the Data Bank, or both. Unlike earlier Data Bank surveys, for the first time practitioners who self-query were included in the survey.

The response rate for registered entities was 68 percent, which is higher than average for an organizational survey. A total of 1,650 practitioners, 60 percent of whom were physicians, answered the self-query portion.

The questionnaire assessed the satisfaction Data Bank users have with reporting and querying, the effectiveness of the Data Bank as an information source, and the usefulness of Data Bank information when hiring, licensing, credentialing, and monitoring health care practitioners.

Users' overall satisfaction with the Data Bank was greater than 90 percent. More than 95 percent of the responding entities found information from the Data Bank accurate, timely, and appropriate. User satisfaction with the registration process was around 65 percent. With the exception of state licensing boards (40 percent), between 86 and 99 percent of entities (depending upon the type of entity) selected the Data Bank as a primary source of information. Approximately 46 percent of entities said their decisions regarding a practitioner would have been different if they had not received a Data Bank response. Nearly one-third responded that the Data Bank provided information – in most cases, Medical Malpractice Payment Reports – that they did not receive from other sources.

Results for self-querier practitioners were similar, with 88 percent stating they were satisfied or very satisfied with the process. More than 90 percent said there were no difficulties in receiving the self-query results. Most self-queriers, no matter their profession, said the primary purpose for the self-query was to provide a copy to a state licensing board.

The survey found a disparity between practitioners' and entities' perceptions of a practitioner having a report in the Data Bank: 70 percent of practitioners rated having an

adverse action report in the Data Bank as “negative” or “very negative”; 16 percent of entities gave those ratings.

The Data Bank thanks all respondents who took the time to complete the survey. The complete survey report will be available on the Data Bank website in coming months.

## **DPDB 2015: Spring Education Forum and New Video Instruction on Submitting Reports**

The 2015 Spring Education Forum, to be held in the DC metropolitan area in April 2015, will be an exciting event for users of the National Practitioner Data Bank (NPDB). During this meeting, participants will have the opportunity to learn about Data Bank topics of most interest and value to them in a dynamic, interactive environment. Additionally, participants will be able to pose questions directly to Data Bank staff members and learn about the latest changes and updates developed to make their work easier.



There are five areas of focus for attendees: reporting to the Data Bank; interpreting a query response; the new NPDB Guidebook; leveraging the Data Bank’s online research applications; and system updates. To facilitate knowledge exchange, there will be an open forum as well as kiosks for real-time technical assistance staffed by Division of Practitioner Data Bank personnel. We look forward to seeing many of you in the DC metropolitan area in April 2015.

As part of the effort to make the Data Bank easier to use, we are in the process of creating a series of four instructional videos. The first, called “[Research Web Applications](#)”, was posted in December and explains to users how to access the NPDB statistical pages and the NPDB Data Analysis Tool. The second video will cover the reporting of adverse licensure actions to the Data Bank and will appear on the [Webcasts](#) page on the website. An emphasis is placed on ensuring accurate information is submitted, as well as submitting sufficient information to make the adverse licensure action report useful and compliant with Federal law.

During all videos, viewers are taken through the process of logging into the NPDB and are shown each field into which data must be entered.

Two other videos, which address submitting clinical privileges actions and medical malpractice payments, are in production and will be posted when available. These videos will serve as companion pieces to the in-person sessions during the 2015 Spring Education Forum.

## Credentials Verification Organizations and the Data Bank



Credentials Verification Organizations (CVOs) are one of the Data Bank's many user groups and have special responsibilities to the Data Bank.

CVOs are centralized offices that gather data and verify the credentials of doctors and other health care practitioners on behalf of another organization or throughout their own organizations. A CVO uses accreditation organization-approved sources to verify practitioner education and training, licensure, Drug Enforcement Administration or Controlled Dangerous Substance certification, work history, malpractice claims history, licensing board actions, and Medicare/Medicaid sanctions, and it provides ongoing monitoring of practitioner sanctions between re-credentialing cycles. CVOs perform Data Bank queries as part of the credentialing process.

A CVO may be registered with the Data Bank either as an authorized agent or as an entity, depending on how the organization functions:

- **The CVO should register as an entity if** the organization conducts its credentialing centrally, has a centralized peer review process, has one decisionmaking body that oversees facilities, and if a practitioner being granted privileges at one facility receives privileges at all facilities. An example is a health system composed of multiple health care entities that has practitioners providing health care services at more than one of the health care entities. Such a CVO may query the NPDB once on each practitioner during the professional review process. However, if practitioners do not automatically receive privileges at all of the CVO's facilities, and if each facility has a separate decisionmaking body, the CVO would query separately for each facility where the practitioner is going to be privileged. The CVO may be registered as a single entity, but it must query separately for each facility.
- **The CVO should register as an agent if** the health care entity for which it is performing primary source verification conducts its own credentialing and the health care entity grants privileges to provide health care services only in its facility. Each health care facility the CVO works for should be registered separately as a health care entity. In these instances, sharing query responses is prohibited between entities. The entity would designate the CVO to query and report as an agent on the entity's behalf.

It is the responsibility of the CVO to determine how its organization functions. If you have any questions, contact the NPDB Customer Service Center by email at [help@npdb.hrsa.gov](mailto:help@npdb.hrsa.gov) or by phone at 1-800-767-6732.

Data Bank  
***Fast Fact***

**Must subjects of reports enter a report into Dispute Status to add a Subject Statement to the report?**

**Answer: No. Subjects of reports may add a Subject Statement (<http://www.npdb.hrsa.gov/pract/howToSubmitAStatement.jsp>) to a report independently of the dispute process.**