NPDB 101

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Vision: Healthy Communities, Healthy People

Welcome – Housekeeping

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Introduction Poll

How Many Years Have You Used the NPDB?

A. 0 – 1 year
B. 2 – 5 years
C. 6 – 10 years
D. 11+

Agenda

1 ●— **General Overview**

2 ●— **Querying**

3 ●— **Reporting**

4 ●— **NPDB Account Administration**

5 ●— **Resources & Popular Questions**

HRSA
Health Resources & Services Administration

General Overview

History

Created by Congress in 1986 to assist organizations in making well-informed credentialing, privileging, and licensing decisions

Mission

Protect the public

Improve Health Care Quality
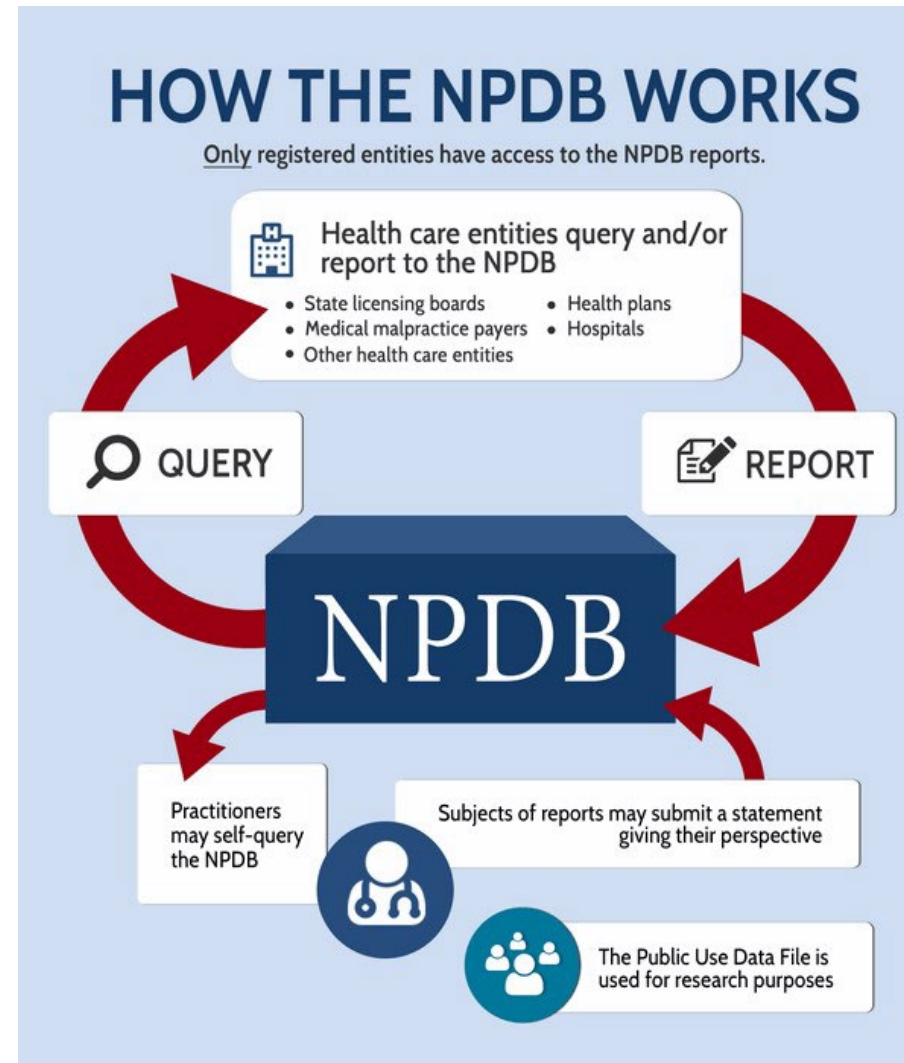
Deter Health Care Fraud and Abuse

General Overview – What is the NPDB?

What is the National Practitioner Data Bank and how does it work?

Key Terms:
- **Reporting**
- **Querying**

General Overview – Information in the NPDB

Types of Information Collected

- Medical malpractice judgments and settlements
- Adverse licensing and certification actions
- Clinical privileges actions
- Health plan contract terminations
- Professional society membership actions
- Negative actions/findings from private accreditation organizations and peer review organizations
- Government administrative actions
- Exclusions and Debarments
- Civil and criminal health care-related judgments

General Overview – NPDB Statistics

Aggregate Data

1.6+ million REPORTS

24 thousand ENTITIES

833 thousand PRACTITIONERS

2021 Data

66+ thousand REPORTS

10.6+ million QUERIES

2 million DISCLOSURES

General Overview

Confidentiality

►Information reported to the NPDB is confidential, not available to the general public, and may not be disclosed except as provided by law.

►Penalty up to $23,607 per confidentiality violation. Changes with inflation.

Querying

Querying

Recovering Costs

► By law, the NPDB must recover the full cost of operations. It does so by collecting fees for each query.

► Fees are examined periodically; last modified in October 2021.

Types of Transactions

► Reporting (no charge)

► Querying (by hospitals and health care organizations):
- **$2.50** for a one-year continuous query subscription
- **$2.50** for a one-time query

► Self-Query: **$3** per digital copy and **$3** per paper copy

Querying

Types of Queries

► **One-Time:** Receive a query response for a practitioner or organization. If a new report is submitted on the practitioner after the query is processed, the organization is not notified.

► **Continuous:** Receive a query response and all new or updated report notifications during the year-long enrollment for each practitioner. Provides ongoing monitoring and alerts you to updates and new reports.

► **Self-Query:** Search the NPDB for reports on individual health care professionals or practitioners. Only the subject of a Self-Query may complete a Self-Query order.

Poll Question

Is there a requirement to query the NPDB before employing an advanced practice nurse (NP) at a health care organization?

A. Yes
B. No
C. It depends

Poll Question - Response

Is there a requirement to query the NPDB before employing a advanced practice nurse (NP) at a health care organization?

C. It depends

Hospitals must query whenever anyone, no matter the discipline, applies for **medical staff appointment** or **clinical privileges**, and every 2 years on anyone on its medical staff or who holds clinical privileges. Hospitals may query whenever they are considering hiring a health care professional.   Continue to Next Slide

Poll Question - Response

Continued response from previous slide

Other health care entities are **not** required by [federal law](#) to query, but they have the ability to do so in certain circumstances. For example, here are a few examples for why an entity may query:

- When determining the fitness of individuals to provide health care services.
- When they are forming an affiliation relationship with a health care practitioner (medical staffing, employment, etc.).
- When protecting the fiscal integrity of programs they administer.

Querying: Continuous Queries

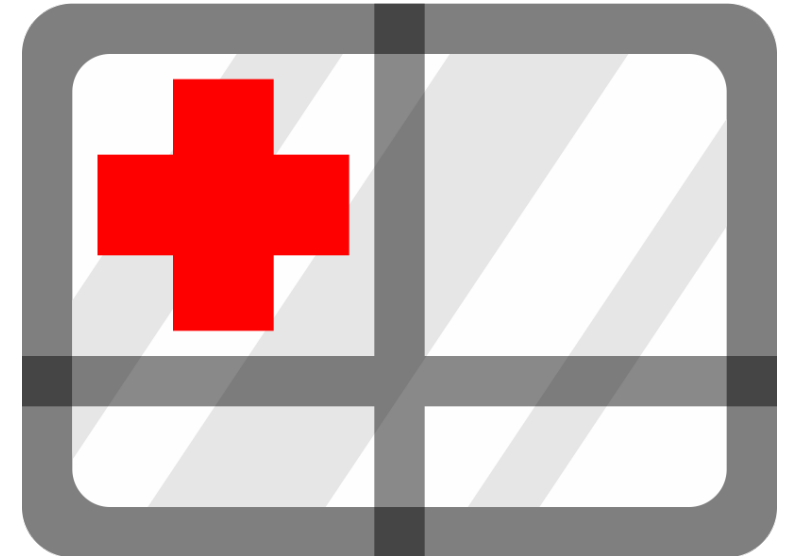## Using Continuous Query

► No separate query fee - $2.50 per enrollee per year

► Requires the same practitioner information

► Upon enrollment, receive the same report information as a one-time query response

► Continuously queries the NPDB and notifies subscribers of any new reports

► No need to re-query for reappointments or temporary privileges extensions

Querying – Requirements Recap

- **Hospitals must query on:** Health care practitioners when they apply for staff appointments (courtesy or otherwise) or clinical privileges (including temporary privileges); every two years for practitioners on staff or with clinical privileges

- **Hospitals may query on:** Health care practitioners with whom the entity has entered (or may be entering) employment or affiliation relationships

- **Other health care entities may query depending on circumstances for querying.**

Reporting

Reporting – NPDB Reports by Type

- State Licensure: 56%
- Medical Malpractice Payment: 29%
- Exclusion/Debarment Action: 8%
- Judgment or Conviction: 2%
- Government Admin: 2%
- Clinical Privileges: 2%
- Health Plan: 1%
- DEA/Federal Licensure: 0.4%
- Professional Society: 0.1%
- Accreditation: <0.01%
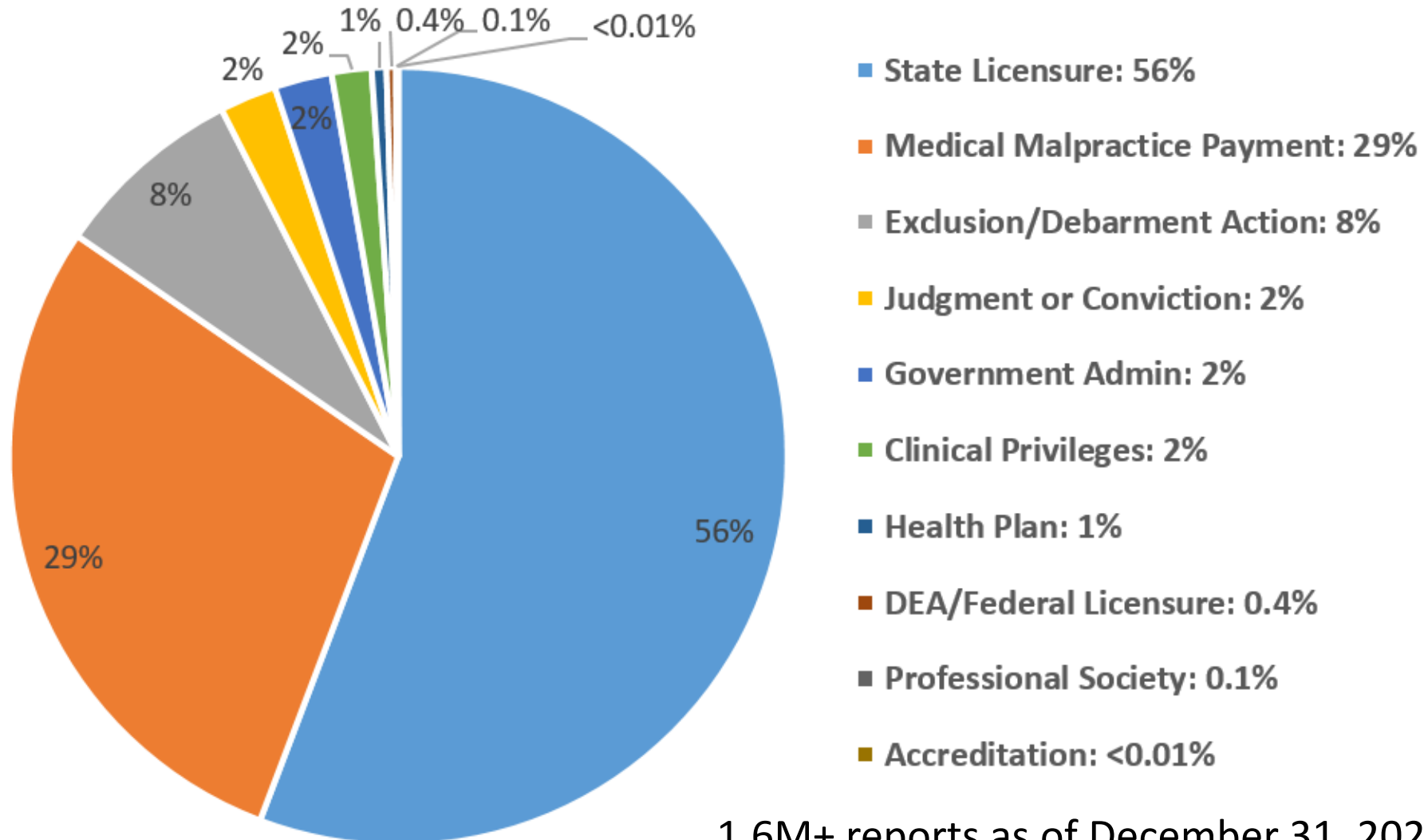
1.6M+ reports as of December 31, 2021

Reporting – Reports on Individuals by Profession
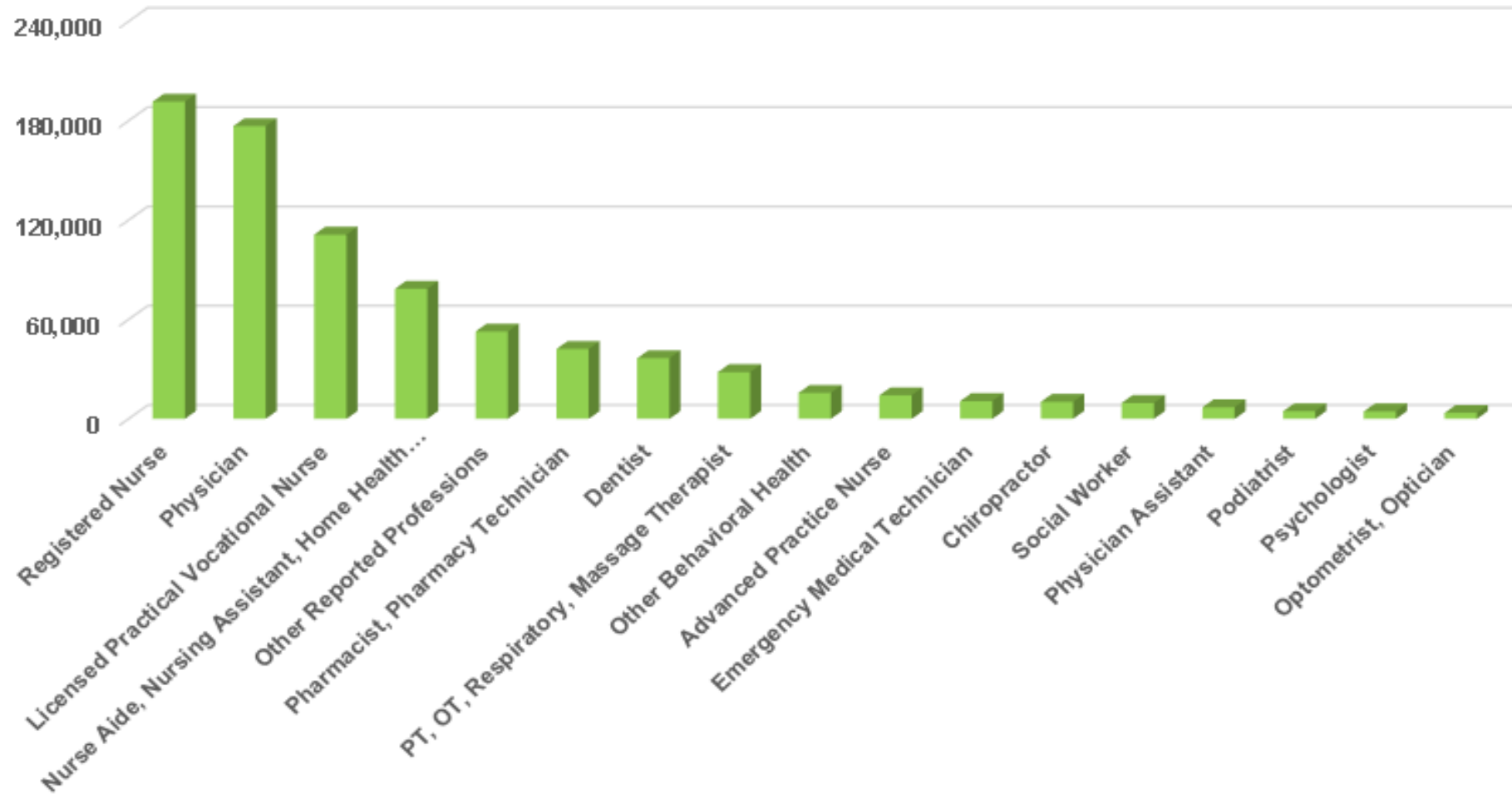
Years 2012 – 2021 (N = 827,497)

Reporting

Types of Reports

► **Initial:** The first report of a medical malpractice payment, adverse action, or judgment or conviction submitted to and processed by the NPDB.

► **Correction:** A Correction Report corrects an error or omission in a previously submitted report by replacing it.

Reporting

Types of Reports

▶ **Revision-to-Action:** A Revision-to-Action Report is a report of an action that modifies an adverse action previously reported to the NPDB.
- ▶ When additional sanctions have been taken against the subject of a report based on a previously reported incident
- ▶ When the length of action has been extended or reduced
- ▶ When the original suspension or probationary period has ended

▶ **Void:** A Void Report, also referred to as a Void, is the withdrawal of a report in its entirety.
- ▶ The report was submitted in error
- ▶ The action was not reportable because it did not meet NPDB reporting requirements
- ▶ The action was overturned on appeal

Poll Questions

1. A hospital reports a clinical privileges action to the NPDB, generating an Initial Report. Upon receiving the copy of the report, the hospital identifies an error in the practitioner's address. Should the hospital submit a Correction or Revision-to-Action?

A. Correction

B. Revision-to-Action

2. A hospital submits an initial report after it suspends a physician's privileges due to competency concerns for 90 days. The hospital later reduced the suspension to 45 days. Should the hospital submit a Correction or Revision-to-Action?

A. Correction

B. Revision-to-Action

Poll Questions – Response 1

1. A hospital reports a clinical privileges action to the NPDB, generating an Initial Report. Upon receiving the copy of the report, the hospital identifies an error in the practitioner's address. Should the hospital submit a Correction or Revision-to-Action?

A. Correction

Poll Questions – Response 2

2. A hospital submits an initial report after it suspends a physician's privileges due to competency concerns for 90 days. The hospital later reduced the suspension to 45 days. Should the hospital submit a Correction or Revision-to-Action?

B. Revision-to-Action

Reporting

What a Practitioner May or May Not Do When Reported to the NPDB:

►**Practitioners May:**
- ►Write a Subject Statement
- ►Dispute a report
- ►Elevate the dispute to the NPDB Dispute Resolution Process

► **Practitioners May Not:**
- ►Correct or change information in a report; they must request the entity to make any changes

NPDB Account Administration

Account Administration

Different Roles: Certifying official, Data Bank Administrator, User Roles (Querying and Reporting), Billing Lookup.

Certifying Official: An individual selected and empowered by an entity to certify the legitimacy of registration for participation in the NPDB. The certifying official is responsible for:

- Completing the Entity Registration Form
- Notifying the NPDB of any change in eligibility: If the entity relinquishes eligibility to participate in the NPDB, the certifying official must notify the NPDB to deactivate the entity's DBID

User Roles: Individuals who query and report to the NPDB on behalf of an entity. May be the same person as the Certifying Official or the Data Bank Administrator

Account Administration - Data Bank Administrator(s)

Who Is the Data Bank Administrator?

"Data Bank Administrator is responsible for an organization's NPDB users accounts, NPDB registration, authorized agent relationship(s), and keeping other important information up-to-date."

Best Practice: An organization should have more than one Data Bank Administrator.

Account Administration – Data Bank Administrator(s)

Key Functions of the Data Bank Administrator(s)

- Maintain User Accounts (creating, deleting, and maintaining passwords)
- Maintain and Renew Organization's Registration
- Complete attestation
- Maintain Electronic Funds Transfer (EFT) Authorization and Credit Cards
- Work with entity's financial office to assist in billing reconciliation
- Designate Agents on behalf of the entity
- Designate a backup Data Bank Administrator and train on key functions

Best Practice: Ensure the backup Data Bank Administrator(s) knows how to perform the key functions

HRSA
Health Resources & Services Administration

Account Administration – Data Bank Administrator(s)

Administrator's Roles and Responsibilities for NPDB Registration Renewal

- Every two years the administrator is required to renew their organization's registration.
- Ensures that all user accounts have access to the NPDB and can continue to query and report.
- Ensure that your organization information is up-to-date:
  1. Review the information listed which may include the following: Organization's Identification Information
  2. Eligibility/Statutory Authority
  3. Primary/Additional Functions
  4. CMS Certification Number
  5. Certifying Official and Point of Contact for Reports
  6. User Accounts

Best Practice: Stay up-to-date on user accounts, including removing access.

Poll Question

Can an entity have more than one Data Bank Administrator?

A. Yes
B. No

Poll Question - Response

Can an Entity have more than one Data Bank Administrator?

A. Yes. The NPDB recommends that an entity designates more than one Data Bank Administrator and provides training on the key functions of this role.

Additionally, a Data Bank Administrator can be anyone at the organization who interacts with the NPDB, it does not need to be a director or someone at management level.

Account Administration – Data Bank Administrator(s)

Helpful Hints for New Data Bank Administrators

- The Data Bank Administrator and the Certifying Official can be the same person.
- If the Certifying Official is different from the Data Bank Administrator, the Certifying Official will not automatically have a user account, unless given one by the Data Bank Administrator.
- A Data Bank Administrator can be anyone at the organization who interacts with the NPDB, it does not need to be a director or someone at management level.

Resources
&
Popular Questions

Resources

Help When You Need It

- Website: www.npdb.hrsa.gov
- Infographics
- NPDB Guidebook
- Recorded webinars
- Regulations
- Statistical data & Research tools
- Codes for reporting and querying
- *NPDB Insights*

NPDB Customer Service Center
800.767.6732
help@npdb.hrsa.gov

Popular Questions

1. What information do I need to include when querying a practitioner?

2. How long does it take for a report to be listed in the NPDB once it has been submitted?

3. We realized we did not submit a report, what should we do?

4. We queried the NPDB but did not receive a report that we thought we should have. What should we do?

Popular Questions

5. Can a hospital require practitioners to submit a Self-Query instead of querying on the practitioners itself?

6. Can a new report be generated on demand when a practitioner is enrolled in continuous query or do you need to resubmit the provider for an instant search?

7. How many authorized users can be registered for each entity?

8. Is it necessary to do a query on non-licensed staff?

Questions

Tell Us What You Think

Take a Survey About This Webcast

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- The survey will close on Wednesday, May 10, 2022

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