THE NATIONAL PRACTITIONER DATA BANK

The National Practitioner Data Bank (NPDB) was established as part of the Health Care Quality Improvement Act of 1986 as an information clearinghouse to collect and release certain information related to the professional competence and conduct of physicians, dentists, and, in some cases, other healthcare practitioners. There was concern on the part of Congress that incompetent healthcare providers could move from state to state without anyone ever knowing of a previous damaging or incompetent performance, and that this undermined the quality of healthcare in the United States. The NPDB is intended to remedy this problem.

The National Practitioner Data Bank defines itself as a flagging system, intended to alert those who review professional credentials that there may be something to look into on the basis of information that it has on file. The NPDB makes it clear in its literature that the information it has is not intended to be used as the sole basis for making decisions about credentialling, but is meant to indicate that there may be cause to undertake an in-depth look into a practitioner's past work. Access to the data bank is limited, and all information obtained from it is defined as confidential, with considerable fines levied should this confidentiality be breached.

WHAT IS REPORTED TO THE NPDB

Medical Malpractice Payments

As it stands now, all malpractice payers (be they insurers or facilities) are required to report to the NPDB about any payments they make. Reports of payments must be submitted regardless of how the matter was settled. This means that if your insurer chooses to settle a case because it will cost them less to settle than to fight-- even though you were not really at fault-- the malpractice payment is registered against your name in the NPDB.

Adverse Licensure Actions

State medical boards must report certain disciplinary actions related to professional competence or conduct taken against the licenses of physicians and dentists. Specified licensure actions include: revocation, suspension, censure, reprimand, probation, and surrender.

Adverse Clinical Privileges Actions

Hospitals and other eligible healthcare entities are required to report to the data bank any actions they take against physicians or dentists that adversely affect privileges for more than thirty days. They must also report incidents of the surrender or restriction of clinical privileges that occur when a physician or dentist is under investigation for possible professional incompetence or improper professional conduct or if those privileges were surrendered in return for the healthcare entity agreeing not to conduct an investigation or professional review action. Revisions to such actions must also be reported. The reporting of actions against other healthcare professionals is optional.

Managed care companies are also required to report adjudicated actions taken against a provider.

Adverse Professional Membership Actions

Professional societies must report specific information to the data bank when any professional review action, based on professional competence or conduct, adversely affects the membership of a physician or dentist. Revisions to such actions must also be reported.

QUERYING THE NPDB

Mandatory Querying

Hospitals are required to query the data bank when a practitioner applies for privileges and to check the data bank every two years on practitioners who are on the medical staff or hold privileges.

Voluntary Querying

- Healthcare entities that have a formal peer review process may query the data bank when a physician or other healthcare worker applies for employment for affiliation or in conjunction with professional review activities.
- State licensing boards may query at any time.
- Healthcare practitioners may <u>self-query</u> at any time to find out what information about them is contained in the data bank. They also may dispute the factual accuracy of a report or whether a report was submitted according to the NPDB's reporting requirements. Note: Any disputes about an adverse action or how an insurer settled a claim need to be resolved with the entity that did the reporting, and then changes to the NPDB may be submitted only by the reporting entity.
- **Plaintiff's attorneys** may query under certain circumstances (i.e., when a hospital has failed to conduct its mandatory query).

Note: Fees are charged for all queries.

NPDB ASSISTANCE

The NPDB maintains a content rich website, http://www.npdb.hrsa.gov/ where you can learn more about how it works. They also have a phone line (800) 767-6732 if you prefer to get your information that way.