



Data Bank Overview

Data Bank Agent & Composite Board Education Forum

October 20, 2011

St. Louis, MO

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U.S. Department of Health and Human Services

Health Resources and Services Administration

Bureau of Health Professions

Division of Practitioner Data Banks



Presentation Overview



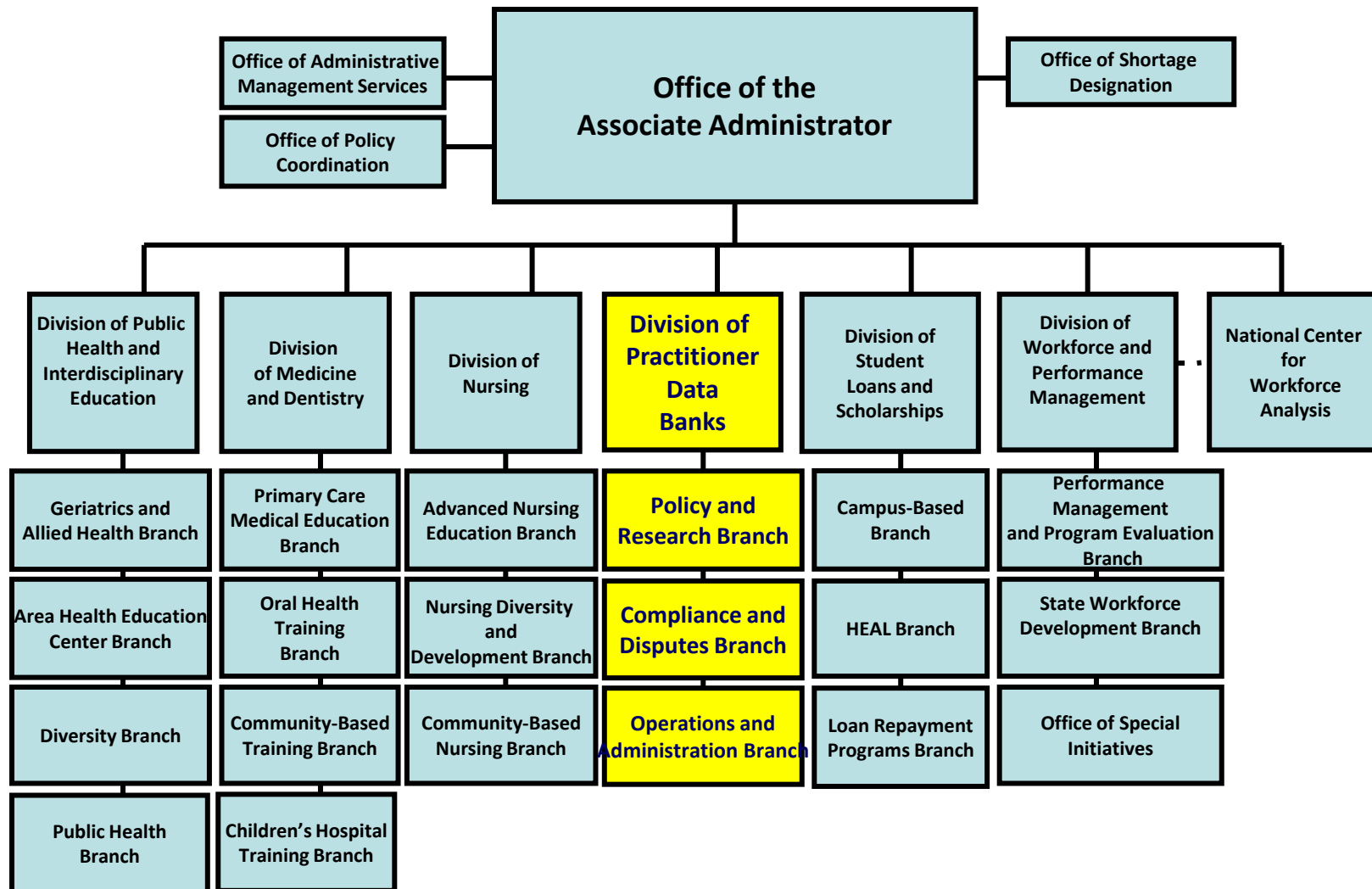
- **Bureau of Health Professions (BHP) Mission**
- **National Practitioner Data Bank**
- **Healthcare Integrity and Protection Data Bank**
- **Reporting to the Data Bank**
- **Data Bank Reports**
- **Querying the Data Bank**
- **Reporting & Querying Provisions**

HRSA's Bureau of Health Professions

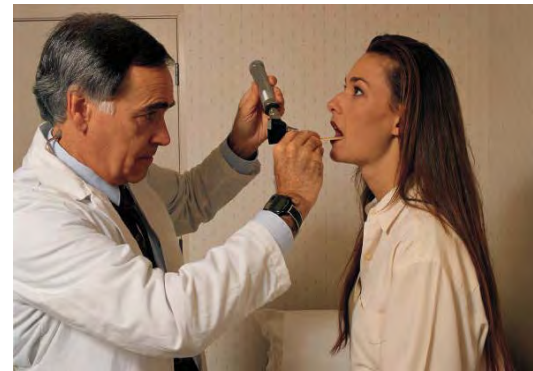




BHPr Organization Chart



Increase the population's access to health care by providing national leadership in the development, distribution and retention of a diverse, culturally competent health workforce that can adapt to the population's changing health care needs and provide the highest quality of care for all.





The Division of Practitioner Data Banks (DPDB), part of the Bureau of Health Professions, is committed to the development and operation of cost-effective and efficient systems that offer accurate, reliable, and timely information on practitioners, providers, and suppliers to credentialing, privileging and government authorities.

The National Practitioner Data Bank



- **Established through Title IV of Public Law 99-660, the *Health Care Quality Improvement Act of 1986* (HCQIA), as amended**
- **Part A – Promotion of Professional Review Activities**
 - Established immunity provisions
 - Developed through case law, not Federal regulations
- **Part B – Reporting of Information**
 - Established the NPDB



NPDB



The law's intent is to restrict the ability of incompetent physicians, dentists, and other health care practitioners to move from State to State without disclosure of previous medical malpractice payment and adverse action history.



Section 1921



- **Public Law 100-93, Section 5 of the *Medicare and Medicaid Patient and Program Protection Act of 1987* (Section 1921 of the *Social Security Act*)**
- **Section 1921 amended by the *Omnibus Budget Reconciliation Act of 1990*, Public Law 101-508**
- **Final regulations codified at 45 CFR Part 60**
- **Final Rule for Section 1921 published in the Federal Register January 28, 2010**
- **Implementation of Section 1921 effective March 1, 2010**

Healthcare Integrity and Protection Data Bank (HIPDB)



- Established under Section 1128E of the *Social Security Act* as added by Section 221(a) of the *Health Insurance Portability and Accountability Act of 1996* (HIPAA)
- Final regulations governing the HIPDB are codified at 45 CFR, Part 61





The HIPDB Merger with NPDB



Affordable Care Act

- Signed into law on March 23, 2010.
- Section 6403 calls for the elimination of duplication between the HIPDB and the NPDB; targeted for 2012.
- Requires the Secretary to implement a transition period to cease operating the HIPDB and to transfer HIPDB data to the NPDB.
- Reporting and querying requirements will remain the same as HIPDB operations are transitioned to the NPDB.

Reporting to the Data Bank





Composite Board Responsibilities



A Composite Board has the responsibility for reporting licensing, monitoring, and disciplinary actions taken against physicians, dentists, or other health care practitioners whose individual boards fall under the Composite Board's authority.

The Composite Board's authority may be through State legislation, regulation, or other formal agreement.



Agent Responsibilities



Agent relationships may vary considerably depending upon the role of the agent with their represented organizations.

An agent enters into a formal agreement with State Boards or other health care organizations to carry out the required reporting and querying responsibilities of the State Board or health care organization.

Agents must strictly adhere to Data Bank requirements regarding confidentiality and prohibition of sharing information across represented organizations.



NPDB: Overview of Who Reports



- Hospitals, managed care organizations, other health care organizations with formal professional review process
- State licensing boards for all health care practitioners and organizations
- Malpractice insurers and self-insured organizations
- Professional societies and memberships with formal professional review process
- Peer review organizations
 - * *Excludes Quality Improvement Organizations*
- Private accreditation organizations
- Drug Enforcement Administration and HHS Office of Inspector General
 - * *Based on Memorandum of Understanding with HHS*



NPDB: Overview of What is Reported



- **Medical malpractice payments**
- **Adverse clinical privilege actions taken in the course of professional review activity**
- **State licensure actions taken against all health care practitioners and organizations**
- **Negative actions or findings by peer review organizations and private accreditation organizations**
- **Medicare/Medicaid exclusions**
- **Adverse registration actions to prescribe controlled substances taken against health care practitioners**



NPDB: What is Reported?



Adverse Actions: What is Reportable?

- All professional review actions taken which:
 - Concern physicians or dentists*
 - Are based on professional competence or conduct that adversely affects, or could adversely affect, the health or welfare of a patient
 - Adversely affect clinical privileges or professional society membership for a period longer than 30 days
 - Voluntary surrender or restriction of clinical privileges or professional society membership while under, or to avoid, investigation
 - Summary or emergency suspensions resulting from a professional review action

* *Other practitioners MAY be reported*



NPDB: What is Reported?



Adverse Actions: What is Non-Reportable?

- Adverse Actions taken without a formal professional review
- Actions that do not last longer than 30 days
- Actions that do not affect or could adversely affect the health or welfare of a patient



NPDB: What is Reported?



State Licensure: What is Reportable?

- License revocations, restrictions, suspensions, surrenders, censures, reprimands, and probations
- Any dismissal or closure of formal proceedings by reason of the practitioner or entity surrendering the license or leaving the State or jurisdiction
- Voluntary surrenders or withdrawal of an application for license renewal or a denial of an application for license renewal, and licensure non-renewals (excluding those due to nonpayment of licensure renewal fees, retirement, or change to inactive status)
- Summary or emergency suspensions



NPDB: What is Reported?



State Licensure: What is Reportable? (Continued)

- Any negative action or finding that under the State's law is publicly available information and is rendered by a licensing or certification authority, including, but not limited to, limitations on the scope of practice, liquidations, injunctions and forfeitures (*This definition excludes administrative fines or citations, and corrective action plans, unless they are: connected to the delivery of health care services, or taken in conjunction with other licensure or certification actions such as revocation, suspension, censure, reprimand, probation, or surrender.*)
- Revisions to previously reported adverse licensure actions, such as reinstatement of a license

State Licensure Actions: What is Non-Reportable?

- **Monitoring, continuing education, completion of other obligations (unless it constitutes a restriction, a reprimand, etc.)**
- **Stayed actions**
- **Voluntary relinquishment of license for personal reasons (e.g., retirement or change to inactive status)**





Federal and State Agencies

- **Licensing and certification agencies**
- **Department of Justice, law enforcement agencies, Medicaid Fraud Control Units (MFCUs)**
- **Department of Health and Human Services**
(e.g., Centers for Medicare & Medicaid Services (CMS), U.S. Food and Drug Administration (FDA), Office of Inspector General)
- **Agencies that administer or pay for the delivery of health care services** (e.g., Dept. of Veterans Affairs)

Health Plans

- **Any plan, program, or organization that provides health care benefits, whether directly or through insurance, reimbursement, or otherwise that take a reportable panel membership action.**



- **Health care-related criminal convictions**
- **Health care-related civil judgments**
- **Exclusions from Federal or State health care programs**
- **Federal and State licensure and certification actions**
- **Other adjudicated actions or decisions**



HIPDB: What is Reported?



Federal and State Licensure and Certification Actions Include:

- Final adverse licensure actions taken against health care practitioners, providers, or suppliers
- Formal or official actions
 - Revocation or suspension of a license or certification agreement or contract and the length of any such suspension, reprimand, censure, or probation
 - Any loss of license, certification agreement, contract, or the right to apply for or renew a license or certification agreement or contract, whether by operation of law, voluntary surrender, non-renewal (excluding non-renewals due to nonpayment of fees, retirement, or change to inactive status)



HIPDB: What is Reported?



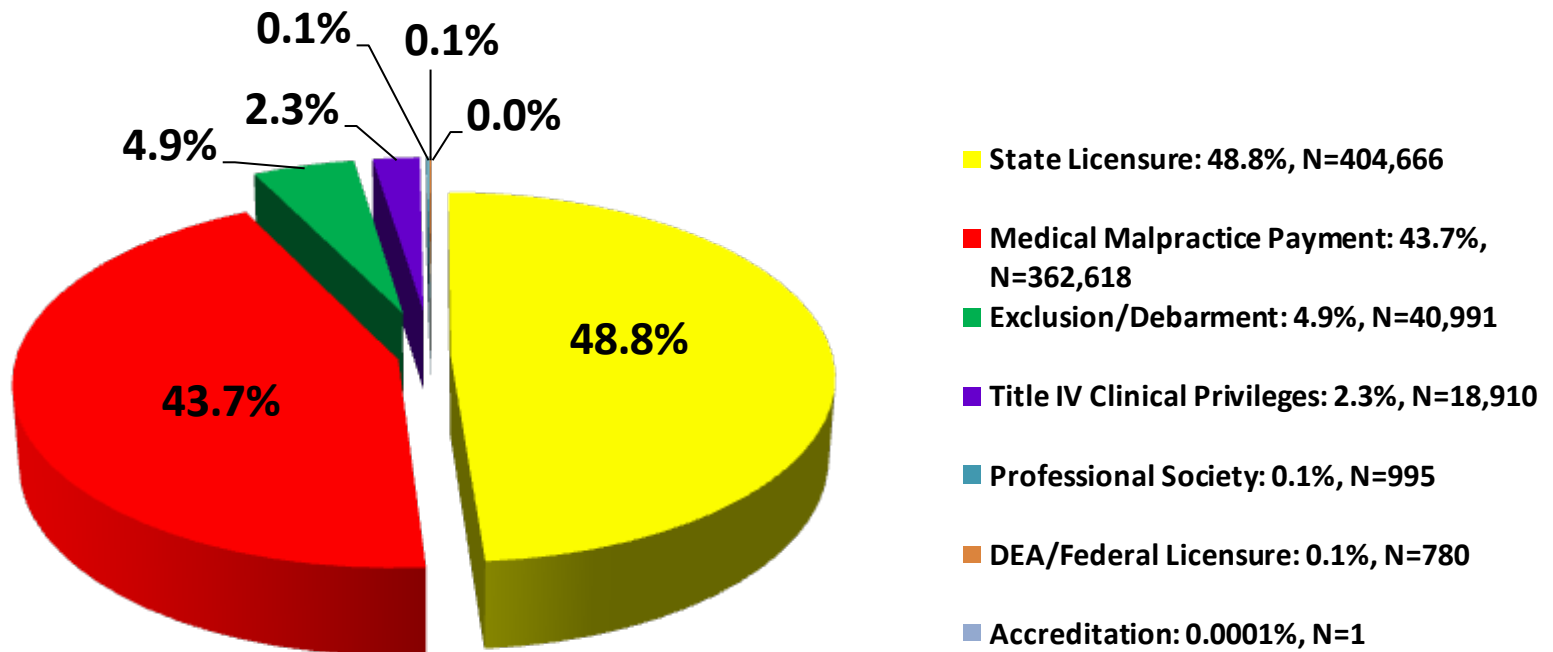
Federal and State Licensure and Certification Actions Include:

- Any negative action or finding by Federal or State agency that is publicly available information and is rendered by a licensing or certification authority;
 - Need not be specifically related to professional competence or conduct

Data Bank Reports



NPDB Reports by Type (N = 828,961)





NPDB: Reports By Practitioner



Practitioner Type	# of Reports
Physicians	385,682
Para-Professional Nurses	134,052
Professional Nurses	125,663
Dentists	68,825
Pharmacists and Assistants	31,210
Chiropractors	16,196
Podiatrists/Assistants	10,209
Counselors/Marriage/Family Therapists	7,830
Physical Therapists and Assistants	5,664
Social Workers	5,276
Psychologists/Assistants/Associates	4,916
Emergency Medical Technicians (EMT)	4,625
Physician Assistants	4,585
Respiratory Therapists/Technologists	4,199



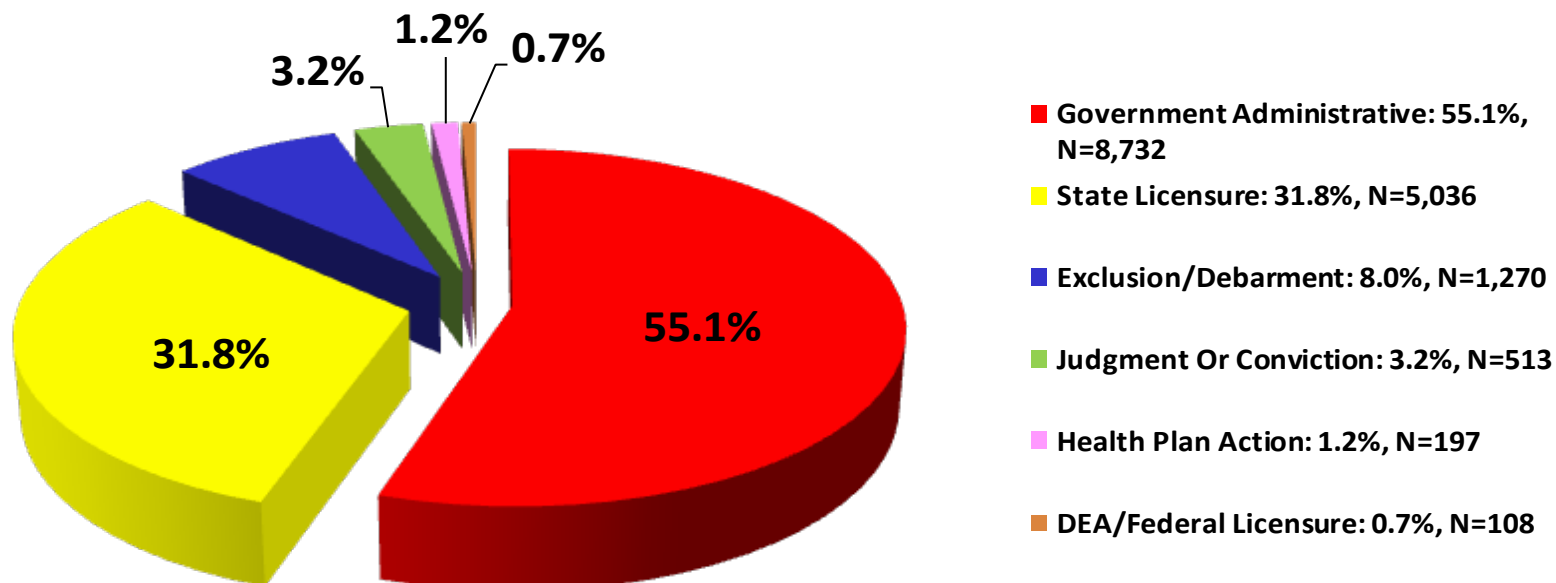
NPDB: Reports By Practitioner (Continued)



Practitioner Type	# of Reports
Dental Assistants/Hygienists	2,713
Other Health Care Practitioners	2,639
Optometrists	2,465
Other Technologists/Techs	2,448
Occupational Therapists/Assistants	1,459
Speech/Language Pathologists/Audiologists	1,094
Organizations	1,081
Complementary Medicine Practitioners	811
Unspecified or Unknown Individuals*	800
Assistive Devices Service Practitioners	724
Other Health Care Occupations	709
Dietiticians/Nutritionists	167
Medical Assistants	68
Non-Health Care Occupations	1

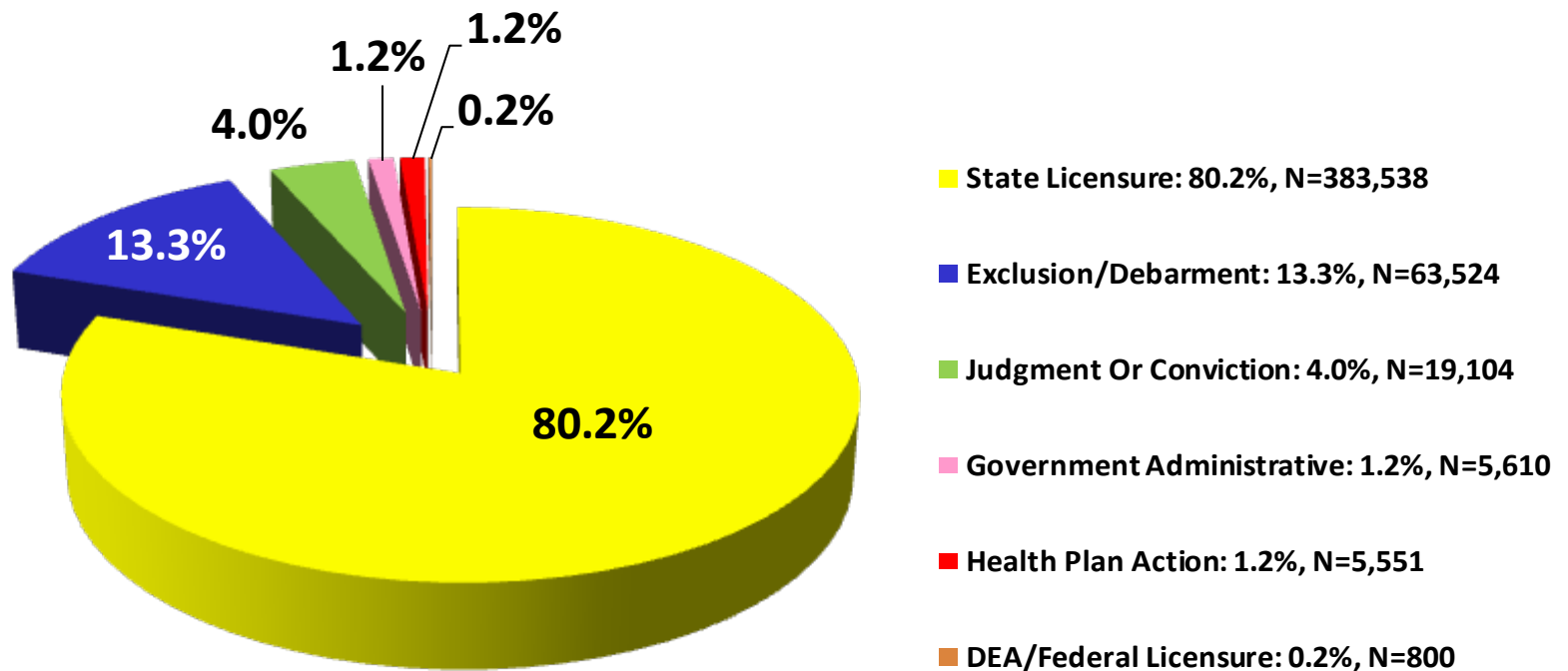
**Reporting entity did not identify Occ/Field of State Licensure Code*

HIPDB Organization Reports (N=15,856)



HIPDB Reports from August 21, 1996 through July 31, 2011

HIPDB Practitioner Reports (N=478,119)



HIPDB Reports from August 21, 1996 through July 31, 2011



HIPDB: Reports By Practitioner



Practitioner Type	# of Reports
Para-Professional Nurses	144,400
Professional Nurses	123,658
Physicians (MDs/DOs)	69,704
Pharmacists and Assistants	29,998
Non-Health Care Occupations	22,182
Dentists	19,692
Organizations	15,856
Chiropractors	11,629
Counselors/Marriage/Family Therapists	7,717
Social Workers	5,271
Emergency Medical Technicians (EMT)	4,898
Physical Therapists and Assistants	4,618
Respiratory Therapists/Technologists	4,158
Psychologists/Assistants/Associates	3,930
Other Rehab/Restorative Service Practitioners	2,884

Data from August 21, 1996 through July 31, 2011



HIPDB: Reports By Practitioner (Continued)



Practitioner Type	# of Reports
Podiatrists/Assistants	2,821
Other Health Care Practitioners	2,717
Dental Assistants/Hygienists	2,662
Health Care Facility Administrators	2,660
Other Technologists/Techs	2,226
Optometrists	1,900
Occupational Therapists/Assistants	1,403
Speech/Language Pathologists/Audiologists	1,104
Assistive Devices Service Practitioners	797
Complementary Medicine Practitioners	767
Other Health Care Occupation	684
Researcher, Clinical	319
Unspecified or Unknown Individuals*	231
Dietitians/Nutritionists	162
Medical Assistants	77

Data from August 21, 1996 through July 31, 2011

Querying the Data Bank





NPDB: Querying



Hospitals **MUST** query by law:

- When physicians, dentists, and other health care practitioners apply for staff appointments (courtesy or otherwise) or for clinical privileges; and
- Every 2 years on all physicians, dentists, and other health care practitioners who hold clinical privileges at the hospital

The following **MAY** query the NPDB:

- State Licensing Boards
- Other health care entities with a formal peer review process
- Professional societies with a formal peer review process
- Health Care Providers (self-query only)
- Researchers (non-identifying data only)



NPDB: Querying (Continued)



The following MAY query the NPDB under Section 1921:

- **Agencies administering Federal Health Care Programs and their contractors**
- **State agencies administering State Health Care Programs**
- **State agencies that license health care organizations**
- **Quality Improvement Organizations (QIOs)**
- **Medicaid Fraud Control Units**
- **U.S. Attorney General and other law enforcement**
- **U.S. Comptroller General**



NPDB Querying: (Continued)



Access to Section 1921 Data ONLY

- Entities given access to the NPDB through Section 1921 are allowed to query **ONLY** Section 1921 information

** These entities also have access to Medicare/Medicaid exclusions*

- Entities that are currently allowed to query the NPDB have access to *all* Section 1921 reports (e.g. hospitals, health care organizations, State boards)



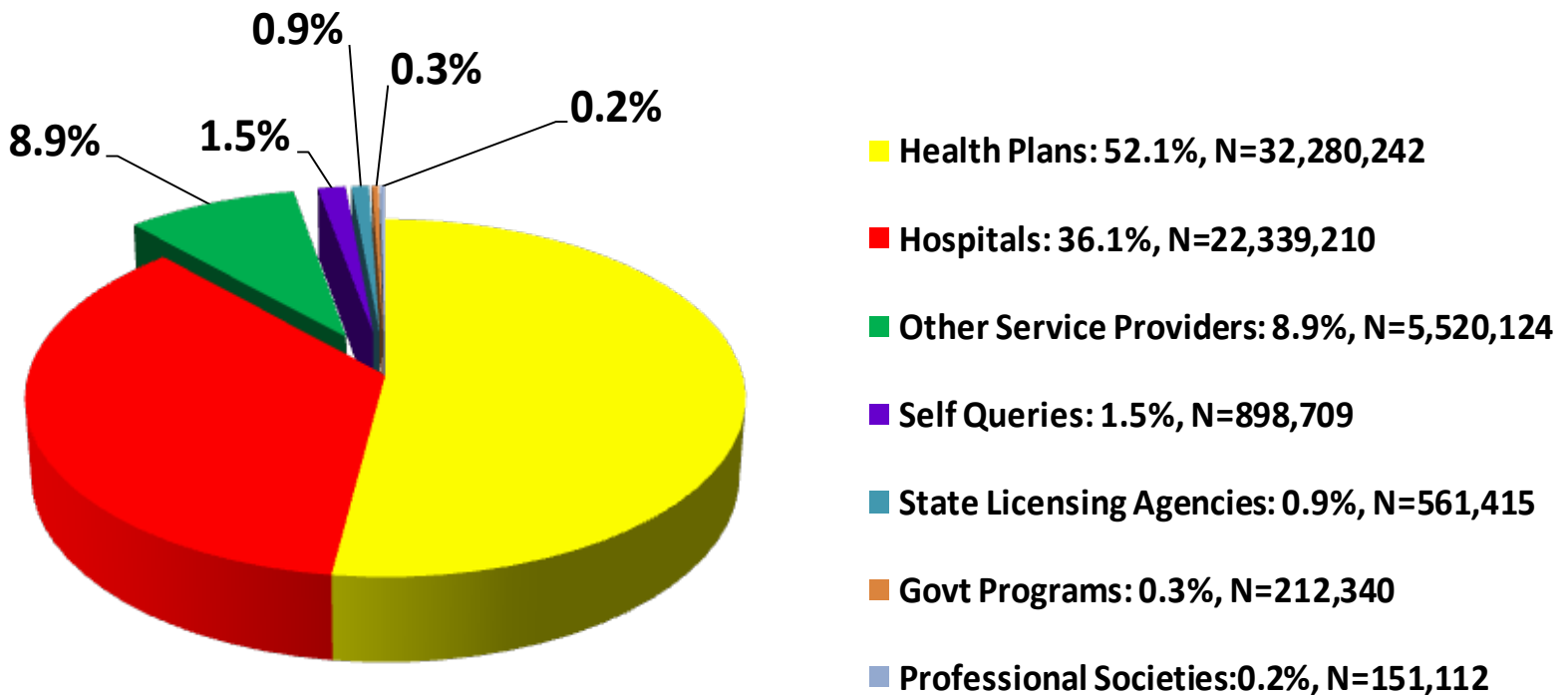
HIPDB: Querying



The following MAY query the HIPDB:

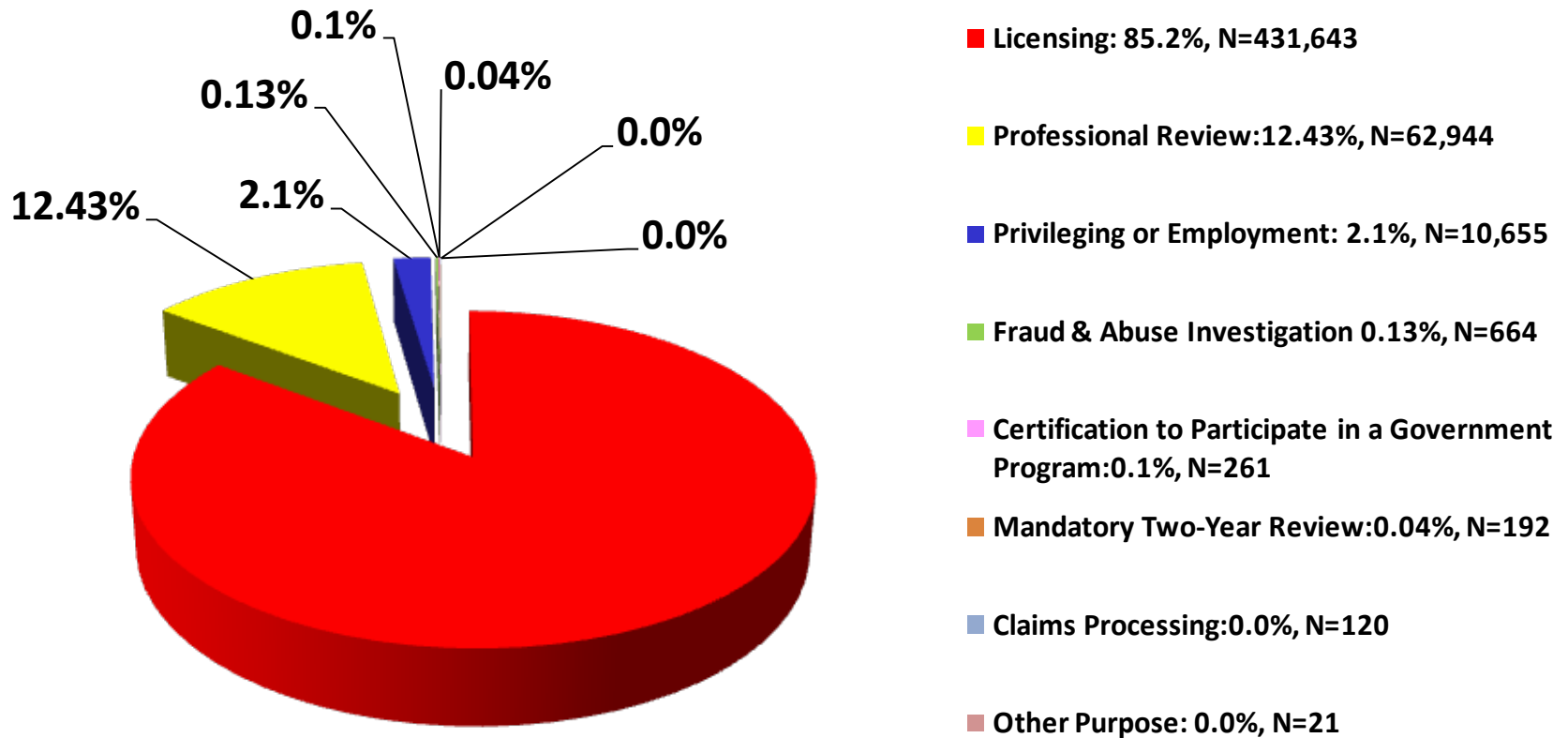
- **Federal and State Agencies**
- **Health Plans**
- **Health Care Providers (self-query only)**
- **Researchers (non-identifying data only)**

NPDB Queries by Entity Type (N=61,963,152)



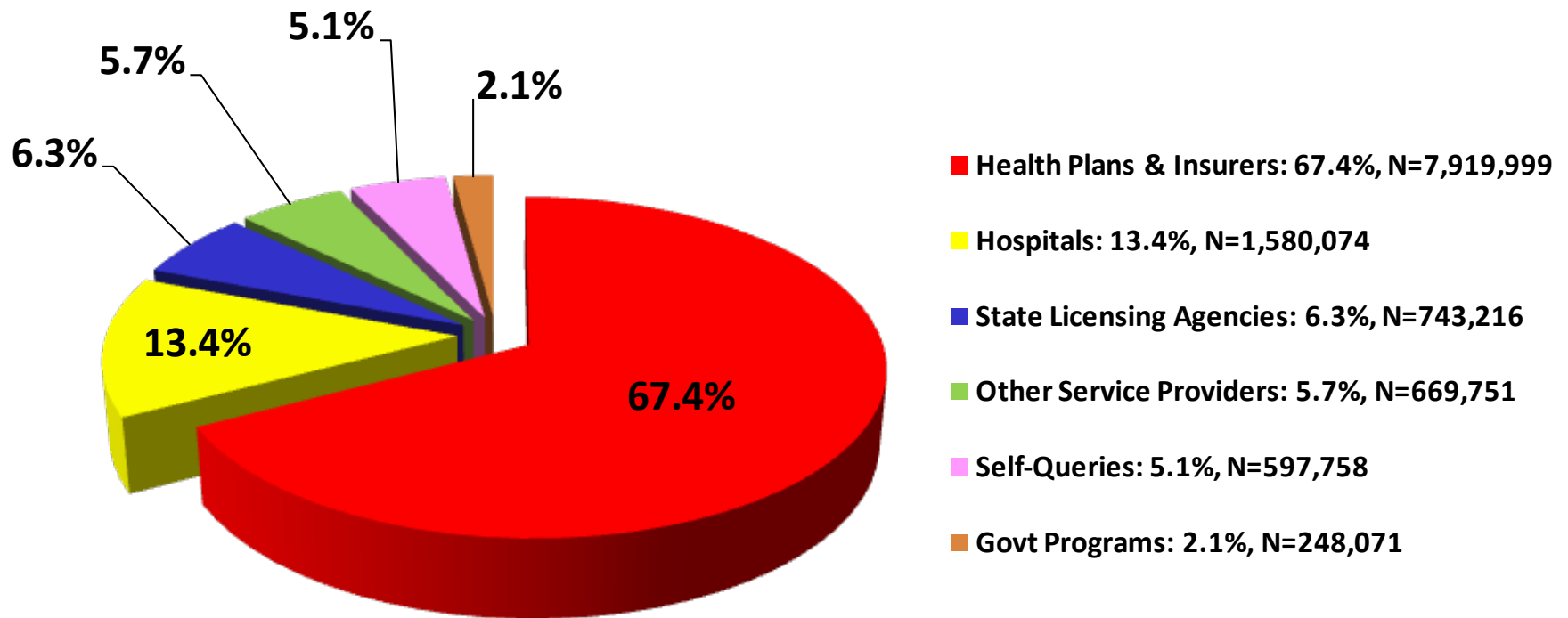
NPDB queries from September 1, 1990 through July 31, 2011.

NPDB Licensure Action Queries (N=506,500)



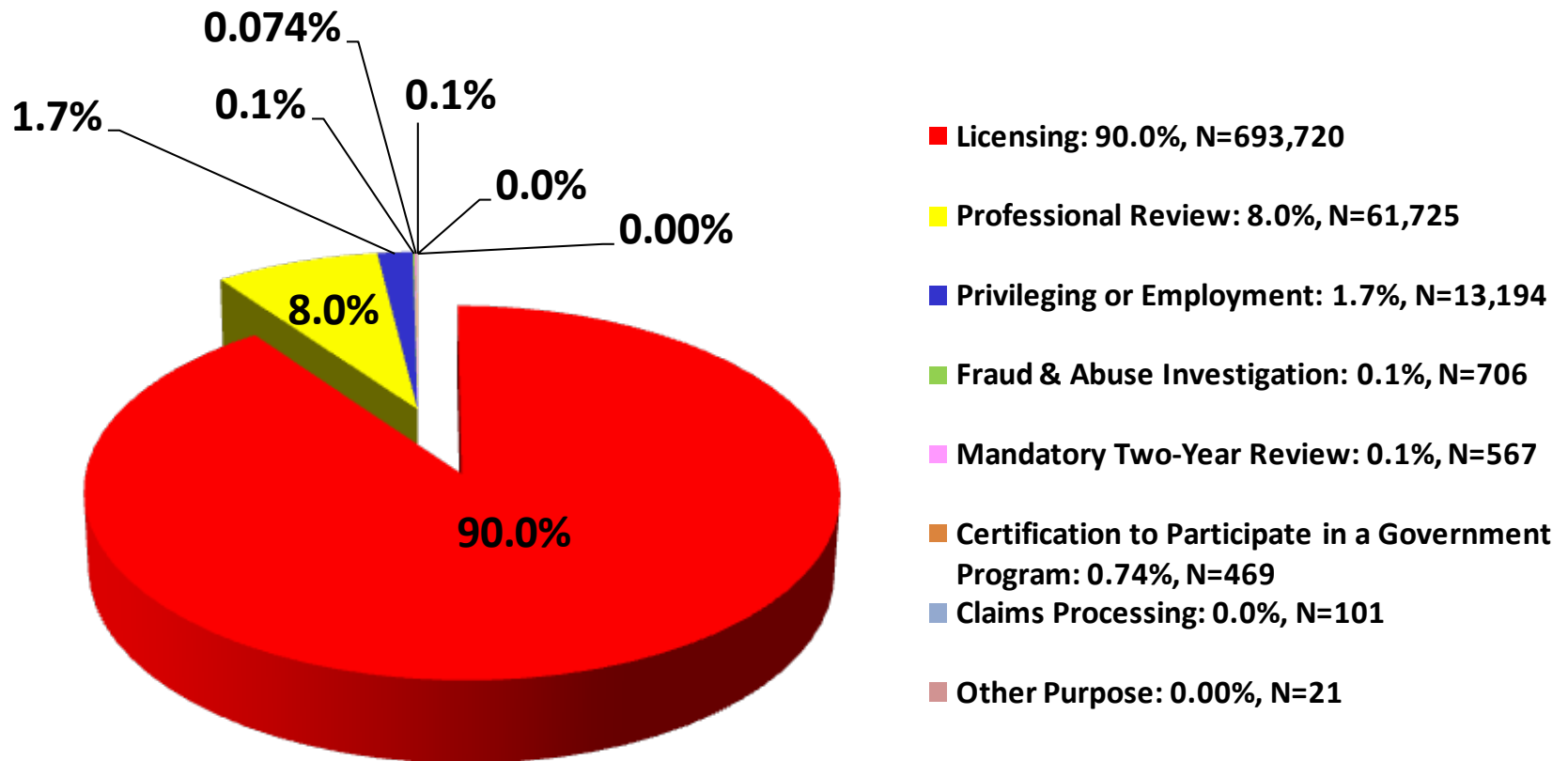
*Total queries from January 1, 2000 through July 31, 2011.

HIPDB Queries (N=11,758,869)



HIPDB queries from August 21, 1996 through July 31, 2011.

HIPDB Licensure Action Queries (N=770,503)



*Total queries from January 1, 2000 through July 31, 2011.

Reporting & Querying Provisions





NPDB: Summary of Provisions



- **Health care organizations can be sanctioned for failure to report or query (mandatory hospital queries only)**
- **NPDB information is confidential (\$11,000 civil monetary penalty per violation)**
- **Medical malpractice payers can be sanctioned for failure to report a payment (\$11,000 civil monetary penalty per violation)**
- **By law, the NPDB must recover full cost of operations (the current fee is \$4.75 per query)**



HIPDB: Summary of Provisions



- **Timeframe for reporting is generally within 30 days**
- **Civil liability protection is available for all reporters**
- **In accordance with Section 1128E, Government agencies that fail to report will have their name publicly published**
- **Health plans that fail to report are subject to a civil money penalty of \$25,000 for each action not reported**
- **The HIPDB must recover the full cost of operations (the current fee is \$4.75 per query)**



Contact Information



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