

National Practitioner Data Bank (NPDB): Risk Management Insights



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National Practitioner Data Bank (NPDB)

- **What is the NPDB?**

- An information clearinghouse that collects and releases information related to professional competence and conduct

- **Who gets reported to the NPDB?**

- Physicians, dentists, other health care practitioners

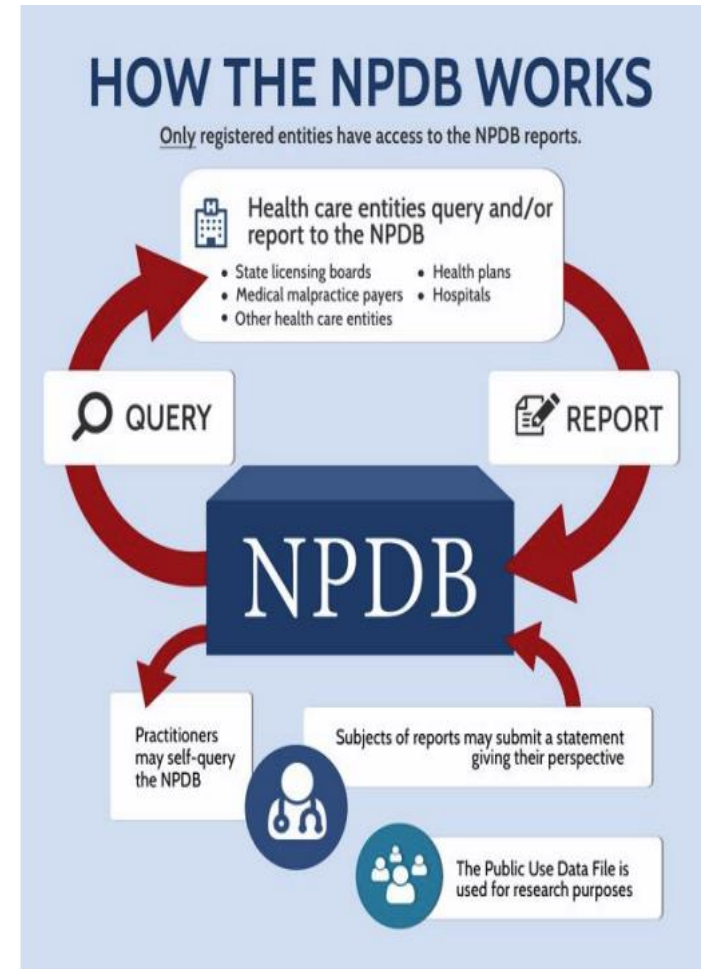


- **What type of information is collected in the NPDB?**

- Medical malpractice payments
- Adverse licensing/certification and credentialing/privileging actions
- Civil and criminal health care related judgments

NPDB Queries

- **Who can or must query the NPDB and Why?**
 - Confidential
 - Hospitals must query – staff appointments, privileges, once every 2 years
 - Other healthcare entities may query
 - Practitioners



WHAT'S IN THE NPDB?

1.2 million+



Adverse Action Reports

Certain adverse licensure, certification, and clinical privileges actions taken by state and federal licensing and certification authorities, hospitals, and other health care organizations.

494,000+



Medical Malpractice Payment Reports

Payments made for the benefit of a health care practitioner relating to a written claim or judgment for medical malpractice.

41,000+



Judgment or Conviction Reports

Health care-related civil judgments or criminal convictions taken in a federal or state court.

Cumulative data as of Dec. 2022

Last year
the NPDB

provided
11.6 million+
query responses

and received
65,000+
new reports

Data for Jan.–Dec. 2022

NPDB Query Question

- **Question**

- Must a hospital query the NPDB before employing an APRN?

- **Answer**

- It depends
- Will the APRN be applying for clinical privileges or just working in the clinics?



NPDB Reporting

- **Who must report to the NPDB?**

- Hospitals
- Medical malpractice payers
- State licensing boards
- Health plans
- Other health entities

- **What is reported to the NPDB**

- Medical malpractice payments (MMP)
- Adverse clinical privileges actions (ACPA)
- Adverse licensure or certification

- ❖ **Majority of reports come from state licensure entities**
- ❖ **30% of reports are for medical malpractice payments**
- ❖ **2% of reports are for clinical privileges**

Basic Reporting Requirements - MMP

- **What must be reported to the NPDB?**

- Each entity or insurance company that makes a payment for the benefit of a health care practitioner in settlement or satisfaction of a claim or judgment for medical malpractice
- Must be the result of a written complaint or claim demanding monetary payment for damages
- Must name the practitioner in the demand for monetary payment/settlement release
- Payment made on behalf of the practitioner named in claim
- No dollar threshold - \$1 sufficient to trigger reporting requirement

Basic Reporting Requirements - MMP

- **Non-Reportable Payments**

- MMPs made solely for the benefit of a corporation such as a clinic, group practice, or hospital
- A person, rather than a professional corporation or business makes a payment out of personal funds
- Defendant healthcare practitioner is dismissed from the lawsuit before settlement or judgement and not as a condition in the settlement or release
- Confidential provisions do not excuse reporting

Basic Reporting Requirements - MMP

- **MMP Reporting Questions:**

- Must a physician be reported to the NPDB if a patient requests a refund of payments in a verbal complaint made to the hospital and the hospital reimburses the funds?
- What if the patient submits a written request for reimbursement, but does not name the physician in the written complaint, and the hospital reimburses the money?
- What if the written complaint names the physician, but he decides to pay the patient out of his own pocket?

Basic Reporting Requirements: ACPA

- **What must be reported to the NPDB?**

- A professional review action that adversely affects the clinical privileges of a physician for a period longer than 30 days, or
- Accepts the surrender of clinical privileges of a physician, while under investigation related to competency or professional conduct, or
- In return for not conducting such an investigation or proceeding
- Must report physicians or dentists, may report other practitioners, e.g. APPs
- Licensed residents reportable only if outside the scope of a formal graduate program

Basic Reporting Requirements: ACPA

- **Investigations are not reportable**
- **OPPE not considered an investigation**
- **Summary suspension**
 - > 30 days is reportable,
 - based on professional competence or conduct that adversely affects or could adversely affect health or welfare of patient
 - Result of professional review action
- **FPPE may be reportable if affects privileges and extends beyond 30 days**
- **Nonrenewals and withdrawal of applications are reportable if practitioner fails to renew or later voluntarily withdraws application while under investigation for possible professional incompetence or conduct**

Basic Reporting Requirements: ACPA

- **ACPA Reporting Questions**

- Would you need to report to the NPDB a general surgeon who submits an application for medical staff membership and privileges, but withdraws his application for personal reasons?
- What if the hospital granted temporary privileges to the general surgeon, and received a number of quality of care-related complaints about the general surgeon from other facilities, and the general surgeon indicated he wants to withdraw his membership and privileges request so he hospital does not investigate these complaints?

Basic Reporting Requirements: ACPA

- **ACPA Reporting Questions**

- A physician applying for renewal of her hospital clinical privileges failed to provide information about an ongoing licensure investigation. When this was discovered, the hospital suspected that the investigations was related to the physician's professional conduct, even though there had been no harm to patients? Is this reportable to the NPDB?
- A surgeon has been experiencing post-op complications and an external professional review recommends that the surgeon be proctored for the next 10 procedures. Is this reportable?

NPDB: Final Thoughts

- Ensure you query as required by law
- MMPs are reported by insuring entities for physicians, but if self-insured for physician risk without a claims handling service, will need to follow reporting requirements for MMPs
- Hospitals must report to the NPDB adverse privileging actions >30days
- Contact IPT/IRMS with questions regarding NPDB reporting

NPDB Resources

- **NPDB Guidebook**

<https://www.npdb.hrsa.gov/resources/aboutGuidebooks.jsp>

- **NPDB Webinars**

https://www.npdb.hrsa.gov/community_n_education/webcasts.jsp

Questions