



National Practitioner Data Bank

Healthcare Integrity and Protection Data Bank



FACT SHEET ON SECURITY AND CONFIDENTIALITY

Background of the National Practitioner Data Bank and the Healthcare and Integrity Protection Data Bank

The National Practitioner Data Bank (NPDB) was established by Title IV of Public Law 99-660, the *Health Care Quality Improvement Act of 1986*, as amended (Title IV). Final regulations governing the NPDB are codified at 45 CFR Part 60. Responsibility for NPDB implementation resides with the Bureau of Health Professions, Health Resources and Services Administration, U.S. Department of Health and Human Services (HHS).

Title IV is intended to improve the quality of health care by encouraging State licensing boards, hospitals, professional societies, and other health care entities to identify and discipline those who engage in unprofessional behavior; and to restrict the ability of incompetent physicians, dentists, and other health care practitioners to move from State to State without disclosure or discovery of previous medical malpractice payment and adverse action history. Adverse actions can involve licensure, clinical privileges, professional society memberships, and exclusions from Medicare and Medicaid.

The Secretary of HHS, acting through the Office of Inspector General (OIG) and the U.S. Attorney General, was directed by the *Health Insurance Portability and Accountability Act of 1996*, Section 221(a), Public Law 104-191, to create the Healthcare Integrity and Protection Data Bank (HIPDB) to combat fraud and abuse in health insurance and health care delivery. The HIPDB's authorizing statute is more commonly referred to as Section 1128E of the *Social Security Act*. Final regulations governing the HIPDB are codified at 45 CFR Part 61.

The HIPDB is a national data collection program for the reporting and disclosure of certain final adverse actions taken against health care practitioners, providers, and suppliers. The HIPDB collects information regarding licensure and certification actions, exclusions from participation in Federal and State health care programs, healthcare-related criminal convictions and civil judgments, and other adjudicated actions or decisions as specified in regulation.

The NPDB and the HIPDB are primarily alert or flagging systems intended to facilitate a comprehensive review of the professional credentials of health care practitioners, providers, and suppliers. Eligible entities should use the information contained in the NPDB and the HIPDB in conjunction with information from other sources when granting clinical privileges or in employment, affiliation, or licensure decisions.

For more information on the NPDB and the HIPDB, see the *Fact Sheet on the National Practitioner Data Bank* and the *Fact Sheet on the Healthcare Integrity and Protection Data Bank*.

Confidentiality of Data Bank Information

Information reported to the NPDB and the HIPDB is considered confidential and shall not be disclosed except as specified in the NPDB and the HIPDB regulations. The HHS OIG has the authority to impose civil money penalties on those who violate the confidentiality provisions of NPDB and/or HIPDB information. Persons or entities that receive information either directly or indirectly are subject to the confidentiality provisions specified in the NPDB regulations at 45 CFR Part 60 and the imposition of a civil money penalty of up to \$11,000 for each offense if they violate those provisions. When an authorized agent is designated to handle NPDB queries, both the entity and the agent are required to maintain confidentiality in accordance with Title IV requirements.

The confidential receipt, storage, and disclosure of information is an essential ingredient of NPDB-HIPDB operations. A comprehensive security system has been designed to prevent manipulation of and access to the data by unauthorized staff or external sources. The facility in which the NPDB-HIPDB is housed meets HHS security specifications, and each member of the NPDB-HIPDB staff has undergone an in-depth background security investigation.

The *Privacy Act*, 5 USC §552a, as amended, protects the contents of Federal systems of records, such as those contained in the NPDB and the HIPDB, from disclosure without the subject's consent, unless the disclosure is for a routine use of the system of records as published annually in the *Federal Register*. The limited access provision of the *Health Care Quality Improvement Act of 1986*, as amended, supersedes the disclosure requirements of the *Freedom of Information Act* (FOIA), 5 USC §552, as amended.

The confidentiality provisions of Title IV do not prohibit an eligible entity receiving information from the NPDB to disclose it further, as long as it is used for the purpose of carrying out a professional review activity *within the entity*. For example, a hospital may disclose the information it receives from the NPDB to hospital officials responsible for reviewing a practitioner's application for a medical staff appointment or clinical privileges. In this case, both the hospital personnel who receive the information and

the hospital officials who subsequently review it during the employment process are subject to the confidentiality provisions of Title IV.

The confidentiality provisions do not apply to the original documents or records from which the reported information is obtained. The NPDB's confidentiality provisions do not impose any new confidentiality requirements or restrictions on those documents or records. Thus, these confidentiality provisions do not bar or restrict the release of the original documents or records, or the information itself, by the entity taking the adverse action or making the payment in settlement of a written medical malpractice complaint or claim. For example, if a hospital that reported an adverse action against a physician pursuant to the provisions of Title IV receives a subpoena for the underlying records, it may not refuse to provide the requested documents on the grounds that Title IV bars the release of the records or information.

The enabling statutes for the NPDB and the HIPDB do not allow disclosure to the general public. The general public may not request information that identifies a particular health care practitioner, provider, or supplier from the NPDB or the HIPDB.

NPDB-HIPDB Assistance

For additional information, visit the NPDB-HIPDB Web site at www.npdb-hipdb.hrsa.gov. If you need assistance, contact the NPDB-HIPDB Customer Service Center by e-mail at help@npdb-hipdb.hrsa.gov or by phone at 1-800-767-6732 (TDD 703-802-9395). Information Specialists are available to speak with you weekdays from 8:30 a.m. to 6:00 p.m. (5:30 p.m. on Fridays) Eastern Time. The NPDB-HIPDB Customer Service Center is closed on all Federal holidays.