Overview

The NPDB is a resource to assist State licensing boards, hospitals, and other health care entities in investigating the qualifications of the health care practitioners they seek to license or hire, or to whom they wish to grant membership or clinical privileges. The NPDB disseminates certain information to eligible entities on medical malpractice payments, Medicare/Medicaid exclusions, adverse licensure actions, adverse clinical privileges actions, and adverse professional society membership actions for physicians, dentists, and other health care practitioners who are licensed or otherwise authorized by a State to provide health care services.

- Hospitals must query when a practitioner applies for privileges or medical staff membership and every 2 years on practitioners on the medical staff or holding privileges.
- Other health care entities, including professional societies, may query when entering an employment or affiliation relationship with a practitioner or in conjunction with professional review activities.
- State licensing boards **may** query at any time.

- Health care practitioners may selfquery at any time.
- Plaintiff's attorneys may query under certain limited circumstances. See NPDB Regulations §60.11(a)(5) or Table D-1, *Title IV Querying Requirements*, on page D-4.
- Medical malpractice payers may not query at any time.

Hospitals

Hospitals are the only health care entities with mandatory requirements for querying the NPDB. Each hospital must request information from the NPDB as follows:

- When a physician, dentist, or other health care practitioner applies for medical staff appointment (courtesy or otherwise) or for clinical privileges at the hospital.
- Every 2 years (biennially) on all physicians, dentists, and other health care practitioners who are on its medical staff (courtesy or otherwise) or who hold clinical privileges at the hospital.

MANDATORY QUERYING



The biennial query may be done in accordance with regular medical staff reappointment and clinical privilege redelineation. Hospitals are not required to query more than once every 2 years on a practitioner who is continuously on staff. Hospitals with annual reappointment are not required to query annually. Hospitals may query the NPDB at any time they wish with respect to professional review activity.

Hospitals are also required to query the NPDB when a practitioner wishes to add to or expand existing privileges and when a practitioner submits an application for temporary privileges. For example, if a practitioner applies for temporary clinical privileges four times in one year, the hospital must query the NPDB on each of those four occasions. A hospital is required to query the NPDB

each time a *locum tenens* practitioner makes an application for temporary privileges, not each time the practitioner comes to the facility. To reduce the query burden, hospitals that frequently use particular *locum tenens* practitioners may choose to appoint such practitioners to their consultant staff or other appropriate staff category in accordance with their bylaws and then query on them when they query on their full staff biennially.

Hospitals are required to query on courtesy staff considered part of the medical staff, even if afforded only non-clinical professional courtesies such as use of the medical library and continuing education facilities. If a hospital extends non-clinical practice courtesies without first appointing practitioners to a medical staff category, querying is not required on those practitioners.

D-2 September 2001

Residents and Interns

Health care entities are not required to query the NPDB on medical and dental residents, interns, or staff fellows (housestaff), even though they are often licensed, because they are trainees in structured programs of supervised graduate medical education, rather than members of the medical staff.

There is no difference between the housestaff of the clinical facility belonging to the formal education program and the housestaff rotating to a clinical facility providing a clinical training site for the formal educational program. Hospitals **are not required** to query the NPDB on housestaff providing services as part of their formal clinical education. However, hospitals **are required** to query on

residents or interns when such individuals are appointed to the medical staff or granted clinical privileges to practice outside the parameters of the formal medical education program (for example, moonlighting in the intensive care unit or Emergency Department of that hospital).

Professional Societies

Professional societies that meet Title IV eligibility requirements may request information from the NPDB when screening applicants for membership or affiliation and in support of professional review activities.

State Licensing Boards

State licensing boards may request information from the NPDB at any time.

OPTIONAL QUERYING

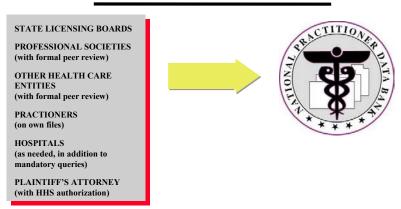


Table D-1. Title IV Querying Requirements

ENTITY REQUIREMENT
Hospitals

Screening applicants for medical staff appointment or granting of clinical privileges; every 2 years for physicians, dentists or other health care practitioners on the medical staff or granted clinical privileges.

Must query

At other times as they deem necessary.

May query

State Licensing Boards (including Medical and Dental)

When they deem necessary.

May query

Other Health Care Entities

Screening applicants for medical staff appointment, membership or affiliation, or granting of clinical privileges; supporting professional review activities.

May query

Professional Societies

Screening applicants for membership or affiliation; supporting professional review activities.

May query

Plaintiff's Attorneys

Plaintiff's attorney or plaintiff representing himself or herself who has filed a medical malpractice action or claim in a State or Federal court or other adjudicative body against a hospital when evidence is submitted to HHS which reveals that the hospital failed to make a required query of the NPDB on the practitioner(s) also named in the action or claim.

May query

May query

Physicians, Dentists, and Other Health Care Practitioners

Regarding their own files.

Medical Malpractice Payers

May not query

D-4 September 2001

Types of Queries

Title IV of Public Law 99-660, the *Health Care Quality Improvement Act of 1986*, as amended, prescribes the following types of queries:

- Privileging or Employment: for use by a hospital or other health care entity, including a professional society, when screening applicants for medical staff appointment, granting of clinical privileges, membership, or professional affiliation.
- Professional Review Activity: for use by a hospital or other health care entity, including a professional society, when conducting professional review activity.
- Mandatory 2-Year: for use by a
 hospital when submitting biennial
 queries on physicians, dentists, or
 other health care practitioners on their
 medical staff or to whom clinical
 privileges have been granted.
- State Licensing Board: for use by State boards of medical examiners, State boards of dentistry, or other State licensing bodies.
- Self-Query: for use by a physician, dentist, or other health care practitioner.
- Other: for use by a plaintiff's attorney or the Secretary of HHS, as authorized by Title IV.

Attorney Access

A plaintiff's attorney or a plaintiff representing himself or herself is permitted to obtain information from the NPDB under the following limited conditions:

- A medical malpractice action or claim must have been filed by the plaintiff against a hospital in a State or Federal court or other adjudicative body, and
- The subject on whom the information is requested must be named in the action or claim.

Obtaining NPDB information on the specified subject is permitted only after evidence is submitted to HHS demonstrating that the hospital failed to submit a mandatory query to the NPDB regarding the subject named by the plaintiff in the action. This evidence is not available to the plaintiff through the NPDB. Evidence that the hospital failed to request information from the NPDB must be obtained by the plaintiff from the hospital through discovery in the litigation process.

A plaintiff's attorney must submit all of the following to the NPDB:

- A letter requesting authorization to obtain information.
- Supporting evidence that the hospital did not make a mandatory query to the NPDB regarding the subject named by the plaintiff in the action or claim.
- Identifying information about the subject on whom the attorney wishes to query.

Examples of evidence may include a deposition, a response to an interrogatory, and admission or other evidence of the failure of a hospital to request information. The plaintiff's attorney must submit a separate request for information disclosure for each subject named in the action or claim.

The approval of a plaintiff's attorney query is limited to a one-time-only disclosure; the approval of such a request does not allow a plaintiff's attorney to obtain NPDB information on a continuing basis. Subsequent disclosures of NPDB information require the plaintiff's attorney to initiate a new request. A fee is assessed when the NPDB discloses such information.

An approved query request entitles the plaintiff's attorney to receive only that information available in the NPDB at the time the hospital was required to query but did not. It also includes information on any reports that were subsequently voided.

There are limitations on the use of information obtained by the plaintiff in a judicial proceeding. Specifically, the information obtained from the NPDB on the subject can only be used with respect to a legal action or claim against the hospital, not against the subject. Any further disclosure or use violates the confidentiality provisions of Title IV, and subjects the plaintiff's attorney and/or plaintiff to a civil money penalty of up to \$11,000.

Defense attorneys are not permitted access to the NPDB under Title IV because the defendant subject is permitted to self-query the NPDB.

Authorized Agents

Eligible entities may elect to have an authorized agent query the NPDB on their behalf. Authorized agents must query the NPDB **separately** on behalf of each eligible entity. The response to an NPDB query submitted for one entity cannot be disclosed to another entity. For more information on authorized agents, see page B-7.

Submitting a Query to the NPDB

Eligible entities prepare and submit queries using the Integrated Querying and Reporting Service (IQRS) at www.npdb-hipdb.com. A DBID, a user ID, and a unique password are used by eligible entities and their authorized agents to report and retrieve query responses via the World Wide Web. Internet access with a web browser is required for using the IQRS.

The IQRS does not accept an incomplete query (one that is missing required information or is improperly completed). Such queries are rejected. Entities are encouraged to gather as much information as possible as part of the application process, to make the completion of the query easier.

Entities may submit queries using electronic transaction file submission, also known as the ICD Transfer Program (ITP). The ITP is a program that transmits Interface Control Document (ICD) query submission files and receives query response files from the NPDB-HIPDB. All data are transmitted over an Internet Secure Socket Layer (SSL) connection. Submitting queries using the ITP is an alternative for those entities that generate

D-6 September 2001

queries from custom (third-party) or other special purpose software. Entities that choose to query via the ITP must provide data in the format specified in the NPDB-HIPDB *Interface Control Document (ICD)* for Query Transactions. Information about querying via the ITP is available at www.npdb-hipdb.com.

Entities that are authorized and registered to query both the NPDB and the Healthcare Integrity and Protection Data Bank (HIPDB) may elect to query both Data Banks simultaneously with a single query submission. Entities that wish to query both Data Banks should indicate this preference on their *Entity Registration* form

Equipment Needed to Query Electronically

Requirements for using the IQRS can be found on the NPDB-HIPDB web site. Entities must use the appropriate version of either Internet Explorer or Netscape Communicator to query the NPDB. Entities can determine their browser's version number by starting their browser, selecting Help from the main menu, then selecting About Communicator or About Internet Explorer, as appropriate.

You also need a program that can read files in Portable Document Format (PDF) (i.e., files with a .pdf extension), such as Adobe Acrobat Reader 4.0 (or higher). Download the latest version of the free Acrobat Reader at http://www.adobe.com. These guidelines explain the minimum requirements necessary to access the IQRS. To improve reliability, the NPDB recommends that you use the most recent version of each browser available for your operating system.

Querying Through an Authorized Agent

The NPDB's response to a query submitted by an authorized agent on behalf of an entity is based upon two eligibility standards: (1) the entity must be entitled to receive the information, and (2) the agent must be authorized to receive that information on behalf of that entity. Both the entity and the agent must be properly registered with the NPDB prior to the authorized agent's query submission.

Authorized agents cannot use a query response on behalf of more than one entity. NPDB regulations specify that information received from the NPDB must be used solely for the purpose for which it was provided. If two different entities designate the same authorized agent to query the NPDB on their behalf, and both entities wish to request information on the same subject, the authorized agent must query the NPDB separately on behalf of each entity. The response to a query submitted for one entity cannot be disclosed to another entity.

Query Processing

When the NPDB receives a properly completed query, the information is entered into the NPDB computer system. The computer system performs a validation process that matches subject (i.e., practitioner) identifying information submitted in the query with information previously reported to the NPDB. Information reported about a specific subject is released to an eligible querier only if the identifying information provided in the query matches the information in a report.

Each query processed by the NPDB computer system is assigned a unique Data Bank Control Number (DCN). The DCN is used by the NPDB to locate the query within the computer system and is prominently displayed on an electronic response. If a question arises concerning a particular query, the entity must reference the DCN in any correspondence to the NPDB

Subject Information

When submitting a query, the entity is required to provide certain subject information. The NPDB computer system does not allow entities to submit queries that do not include information in all mandatory fields. An entity's lack of mandatory information does not relieve it of querying requirements for the purposes of Title IV.

A subject's Social Security Number (SSN) should be provided if known, but only if it was obtained in accordance with Section 7 of the Privacy Act of 1974, which states that disclosure of an individual's SSN is voluntary unless otherwise provided by law. Disclosure of an individual's SSN for the purposes of this program is voluntary. The NPDB uses SSNs only to verify the identity of individuals, and SSNs will be disclosed only as authorized by the *Health Care Quality Improvement* Act of 1986, as amended. The inclusion of this information helps to ensure the accurate identification of the subject of the report.

Subject Database

You may establish a subject database to complete your querying and reporting obligations more efficiently. The subject

database is a feature of the IQRS that offers an easy method for maintaining information about the subjects on whom you routinely query or report, (e.g., Social Security Numbers, dates of birth, license numbers).

You may import a pre-existing QPRAC subject database into the IQRS, eliminating the need to retype subject data. For information, see the *Fact Sheet on Creating and Maintaining a Subject Database*, available at www.npdb-hipdb.com.

Character Limits

Each field in a query (such as Subject Name, Work Address, and License Number) is limited to a certain number of characters, including spaces and punctuation. The IQRS software does not allow the entity to use more than the allotted number of characters. The NPDB does not change any information submitted in a query.

Query Responses

In general, query responses are available electronically within an average of 4 to 6 hours of receipt by the NPDB. Under certain circumstances, additional processing may be required. Entities that submit queries using the IQRS should retrieve their query responses from the IQRS. Queries marked Completed have been processed and are available for retrieval. Queries marked Pending have not yet been processed. Queries marked Partially Completed require additional processing time. Queries marked Rejected have one or more errors; they have been processed and a document describing the error(s) is available for retrieval.

D-8 September 2001

Entities that submit queries via the ITP must retrieve their query responses using the file transfer program specified in the ITP instructions. ITP responses are formatted in the *Interface Control Document (ICD) for Query Transactions* according to the specifications of the appropriate ICD. Subjects who self-query will receive paper responses sent by First Class U.S. Mail.

When there is no information in the NPDB about a subject, the entity receives in response to a query only the identifying subject information provided in the query and a notification that no information about the subject is contained in the NPDB. Query information submitted by the entity is not retained on subjects for whom there is no record in the NPDB.

Entities that submit 10 or fewer subject names receive separate response files for each query. When the number of subject names submitted is 11 or more, batch downloading consolidates query files so that a single file can contain multiple responses and hold up to 1 megabyte of data. Along with the query response files, entities also receive a list of all the subject names queried and the file number where each response is located. This list helps to quickly identify the location of a specific subject query response.

Query Response Availability

Query responses are available via the IQRS or ITP 4 to 6 hours after the query is processed. Entities must retrieve responses within 30 days of processing, or they will be forced to re-submit their queries. Entities that wish to save query responses should download them immediately and save them to their hard drives.

Ideally, information from the NPDB will be considered during the credentialing process. However, the NPDB law does not require querying entities to receive query responses from the NPDB before proceeding with the granting of clinical privileges, hiring, appointment to the medical staff, issuance of licenses, or approval of memberships. Because the NPDB is one of several resources for the credentials review process, entities may act on applications according to their established criteria and information obtained from other sources.

Missing Query Responses

If you do not receive a query response within 2 to 3 business days of submission, please contact the NPDB-HIPDB Customer Service Center to request a query status. Please do not resubmit a query on the subject in question, as this will result in duplicate transactions and duplicate query fees.

Correcting Query Information

If the information you submitted in a query does not accurately identify the subject on whom you intended to query, your query will not match NPDB reports submitted with correct identifying information. To query the NPDB with the proper identifying information on the subject, submit a new, correctly completed query to the NPDB.

Failure to Query

Any hospital that does not query on a practitioner (1) at the time the practitioner applies for a position on its medical staff or for clinical privileges (initial or expanded) at the hospital, and (2) every 2

years concerning any practitioner who is on its medical staff or has clinical privileges at the hospital, is presumed to have knowledge of any information reported to the NPDB concerning the practitioner. A hospital's failure to query on a practitioner may give a plaintiff's attorney or plaintiff representing himself or herself access to NPDB information on that practitioner for use in litigation against the hospital.

Questions and Answers

1. Should I query on the members of my hospital's Allied Health Practitioner Staff?

If the Allied Health Practitioners are granted clinical privileges or medical staff membership, yes. For example, if your hospital grants clinical privileges to nurse practitioners, you must query on them. Each hospital must determine, based on State law and on its own by-laws, which practitioners are licensed by its State and credentialed as part of the medical staff or granted clinical privileges. The intent of the statute is to require querying on medical staff members or privilege holders who are individually credentialed by the hospital.

2. Are hospitals required to query the NPDB on medical and dental interns and residents?

No. Since interns and residents are trainees in structured programs of supervised graduate medical education and are not (generally) members of the medical staff in a formal sense, there is no requirement to query on them. Hospitals may choose to query on residents and interns if they desire.

However, if the resident or intern is being considered for clinical privileges outside of his or her structured program, the hospital must query. Note that medical malpractice payments made on behalf of and adverse licensure actions taken against residents and interns must be reported.

3. Is my hospital required to query on all of our nurses?

If an individual belongs to the medical staff or has clinical privileges at your hospital and if that individual is licensed or otherwise authorized (either registered or certified) by a State to provide health care services, the hospital is required to query on that individual. Examples of nursing staff who frequently are granted individual privileges and meet this definition may include certified nurse anesthetists and nurse practitioners.

4. Are hospitals required to document and maintain records of their requests for information?

Hospitals are not specifically required by the NPDB's implementing regulations to do so.

5. How long should my organization keep query responses on file?

While the NPDB regulations require hospitals to query the NPDB, they do not specify that query responses be kept on file by requesting entities. Please note, however, that your query response may be used as proof that your organization queried the NPDB on the practitioners.

D-10 September 2001

6. If I cannot find or did not receive a response to a query, may I request a copy from the NPDB?

No. The NPDB currently does not have the capability to produce duplicate responses. If you did not receive a response to a query and were not charged for the query, the query has not been processed by the NPDB and should be resubmitted. Once processed by the NPDB, query responses will be maintained in the IQRS for 30 days. After 30 days, the responses will be deleted from the IQRS and the entity will have to resubmit the query to receive a response. If you did not receive a response to a query but were charged for it, see the Missing Query Responses section in this chapter of the Guidebook.

7. May self-queries be used to satisfy requirements for peer review and employment?

Subjects may share the information contained in their own self-query responses with whomever they choose; however, such shared information **does not** satisfy a hospital's legal requirement to query the NPDB whenever a physician, dentist, or other health care practitioner applies for clinical privileges or a medical staff appointment.

8. My hospital is in Chapter 7 bankruptcy. Can it continue to query the NPDB?

If your hospital still has ongoing business and is functioning as a hospital while concluding its liquidation, even under a debtor-inpossession, it must continue to query
the NPDB. If it is in liquidation
solely for the purpose of sale of assets
and there is no ongoing business as a
hospital, there is no reason to query
and your DBID will be deactivated.
Your organization is responsible for
notifying the NPDB of your status. If
the hospital comes under new
ownership, the new owner must
register with the NPDB and is
responsible for fulfilling its reporting
and querying obligations.

9. My hospital is in Chapter 9 bankruptcy. Can it continue to query the NPDB?

Yes. Your hospital will be charged for any queries submitted after the NPDB receives notice of the filing of the Petition for Bankruptcy. Organizations that have an obligation to query (i.e., hospitals) must still meet their querying obligations.

10. My hospital is in Chapter 11 bankruptcy. Can it continue to query the NPDB?

Yes. Your organization will be charged for any queries submitted after the NPDB receives notice of the filing of the Petition for Bankruptcy. Organizations that have an obligation to query (i.e., hospitals) must still meet their querying obligations.

11. My hospital has been liquidated by the State. Can it continue to query the NPDB?

If your hospital still has ongoing business and is functioning as a hospital while concluding its liquidation, it must continue to query the NPDB. Once the liquidation process is concluded or your organization has no ongoing business as a hospital, there is no reason to query and your DBID will be deactivated. Your organization is responsible for notifying the NPDB of its status. If the hospital comes under new ownership, the new owner must register with the NPDB and is responsible for fulfilling its reporting and querying obligations.

12. Can I designate more than one authorized agent to query for my hospital?

Yes. The NPDB computer system can now accommodate multiple authorized agents for each querying entity.

13. If I decide to designate an authorized agent or change from one agent to another, how long will it take before the authorized agent can query for my hospital?

If the authorized agent is already registered with the NPDB and has been assigned a DBID, the NPDB will send notification documents to your organization and the authorized agent. You should check the documents to ensure that all information is correct. Your authorized agent will be able to query on your organization's behalf immediately upon receipt of the notification documents.

D-12 September 2001