

# *Creating a National Database of Certified First Responders*

*...finding the right individual, with  
the right credential, at the right  
time...*

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**Standards Based Programs, Inc**

# National Practitioner Data Bank Models

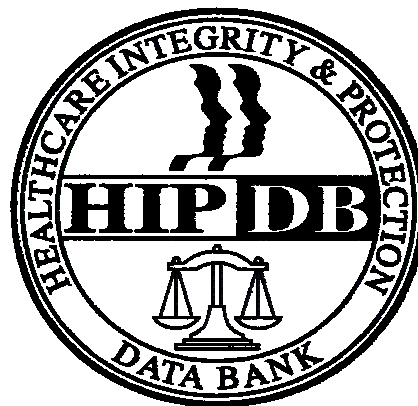
Practice Data



**NPDB**

Established by Law

Criminal Data



**HIPDB**

Credentialing Data



**FCP**

Voluntary

# Highlights

- Data Collection Systems for use in Licensing, Credentialing & Certification
- Established by law and need
- Querying and Reporting is Required by Law or National Accreditation Organizations
- No Public Access to Data Bank Data

# Purpose: Improve Healthcare Quality and Safety

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Provide practice data to hospitals, State licensing boards, professional societies, and other healthcare entities so they can appropriately **identify, credential, employ, dispatch** and, when necessary, **discipline** healthcare practitioners.

# Major Sources of Reports & Data

## NPDB:

- State licensing boards
- Professional Societies
- Hospitals, and
- Other Healthcare Entities

## HIPDB:

- Healthcare Related Criminal Convictions
- Related Civil Judgments
- Federal and State Healthcare Program Exclusions

## FCP:

- Credentialing Coordinators

# What's Reported

## NPDB

- Adverse licensure, clinical privilege, and professional society actions taken against physicians and dentists
- Medical malpractice payments made for the benefit of all licensed health care practitioners
- Criminal Convictions

## HIPDB

- Criminal Convictions

## FCP

- Primary Source Verified Data reported by software solicited organizations

# Who Queries

## NPDB

- State Licensing Boards\*
- Professional Societies\*
- Health Plans\*
- Hospitals (Public and Private)\*

*\*Must Engage in formal peer review activities*

## HIPDB

- Federal and State Government Agencies
- Health Plans
- Health Providers, suppliers and practitioners (self-query only)

## FCP

- Credentialing Staff
- Self Queries\*

# When you May or Must Query

Hospitals: **must query** when a practitioner applies for privileges or membership on the medical staff and once every two years to maintain hospital accreditation

Other Healthcare Entities and State Licensing Boards: **may query** for credentialing, peer review or licensing purposes.  
Practitioners: may query to obtain their own credentials and records



# Interesting Statistics as of 6/03

**NPDB** opened Fall, 1990

- 245,241 reports for 137,456 Physicians

**HIPDB** opened Spring, 2000

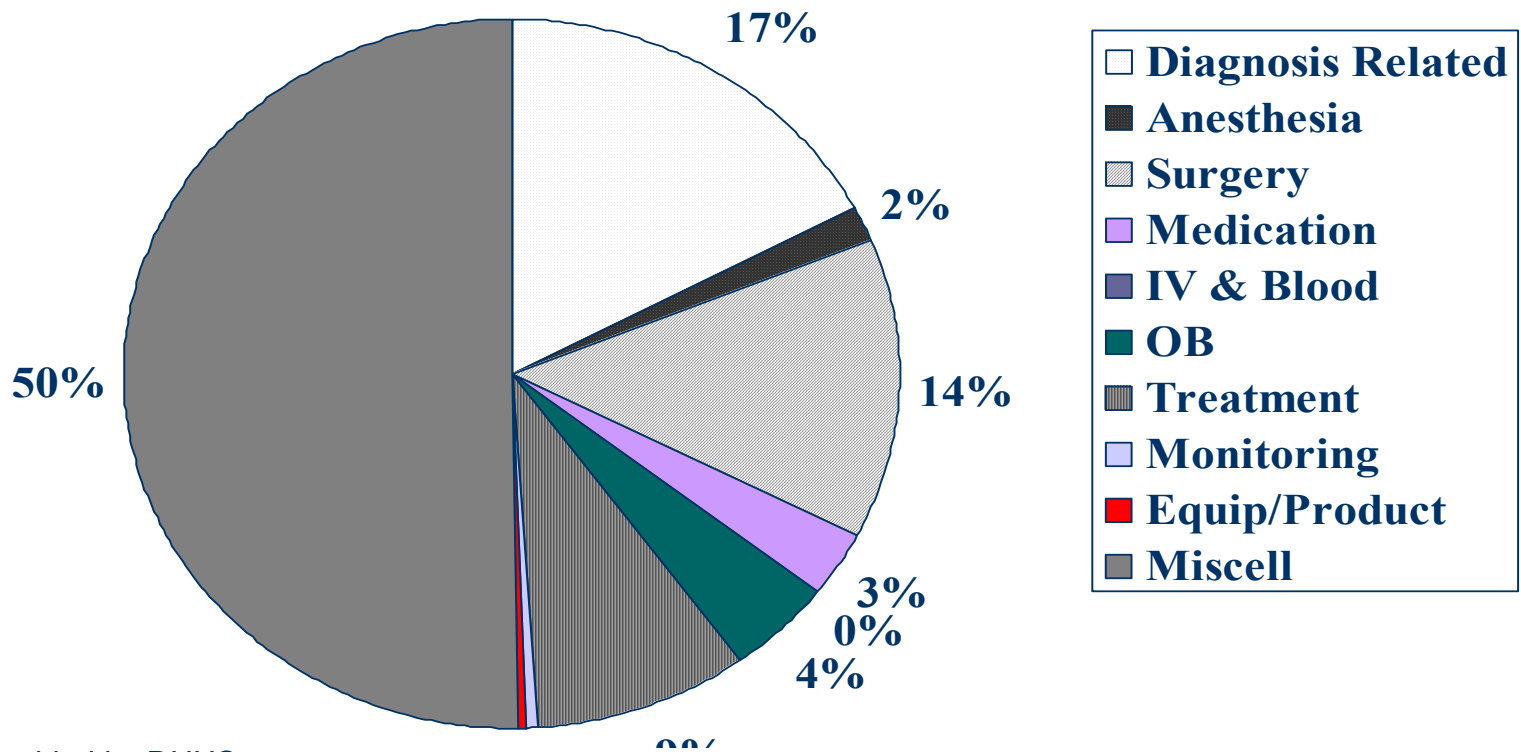
- 141,564 reports

**FCP** opened Spring, 2001

- Entire VA & others mandate use
- > 50,000 enrolled healthcare providers

# NPDB Malpractice Payments

## Percent of Payments by Reason for Payment



Provided by DHHS

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# Federal Credentialing Program



*Improving the nation's health care through  
standardized electronic credentialing*

## FCP *...Established to develop and provide:*

- National Forum for Healthcare Credentialing Issues
- Software designed to standardize credentialing procedures
- Web-based Electronic Credentials Data Bank

# FCP Provides:

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A secure electronic database for the credentialing of healthcare providers, providing rapid verification of credentials in support of regular and multiple appointment(s), rapid deployment for emergency response and telemedicine.

# Problems Before the FCP

- No Standard Credentialing Process
- Slow, Paper-Bound
- Redundant and Inconsistent
- Data not readily nor regionally accessible
- Did not support national disaster efforts and emergency response
- Costly

# FCP Accomplishments:

- Standardized Definitions and Processes for credentialing
- Improved Integrity of Credentialing Data (Trust)
- Reduced Duplication
- Increased Efficiency
- Lowered Costs
- Improved Personnel Management
- Supports Medical Readiness, Emergency Response and Telehealth

# Shared Databank Concepts

- Public/private enterprises
- Stakeholder participation
- Common Definitions developed through National Forums and Working Meetings
- Software-driven process promotes standardization
- Internet Accessible Data Depositories
- Funding derived from user fees



# Funding

The NPDB, HIPDB and FCP do not receive any taxpayer funds. The NPDB and HIPDB are required by law to recover all costs through fee collection. They are funded entirely by query fees. The FCP is funded by proportional contributions from participating agencies.

**NPDB:** (Example of Query Fees)

- Self-Query: \$10 per Data Bank
- Practitioners \$20 automatically query both
- Entity: \$4.25 per Data Bank

**FCP:** Funded entirely by the participating who cost share based on program use

# Proposal: National Certification & Credentials Data Bank (NCCDB)

Data Bank Model provides a proven approach to the creation of a National Credentials and Certification Data Bank

## **NCCDB:**

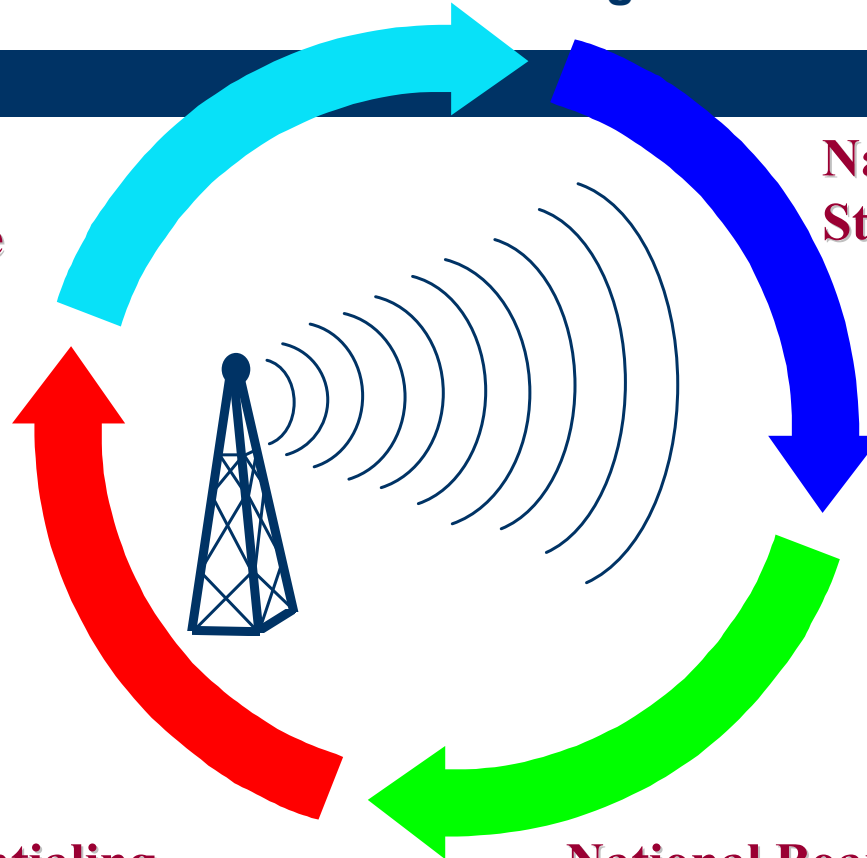
- stakeholder driven partnership to assure collaboration.
- software to drive standardization and quality
- Internet to provide ready access, and

# NCCDB

Public – Private Partnership  
Common Lexicon  
Software Driven Certification and  
Credentialing  
Internet Data Banking  
User Fee Funding

United States  
Postal Service

National Council of  
State Boards of Nursing



Federal Credentialing  
Program

National Board on Fire Service  
Professional Qualifications

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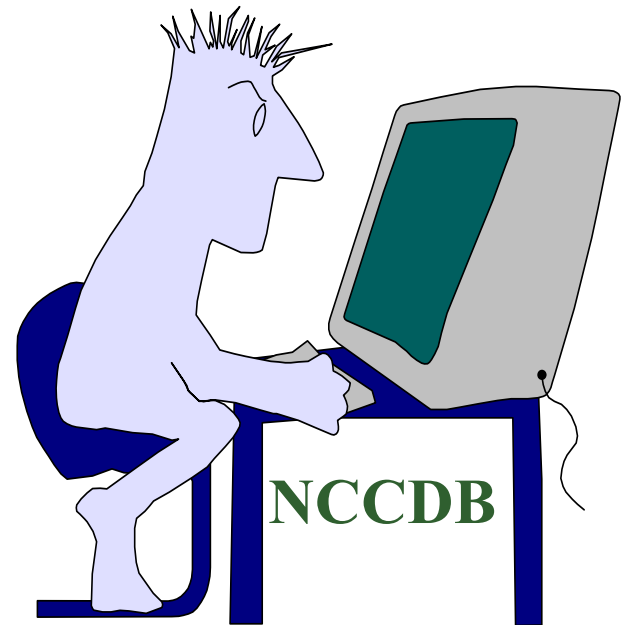
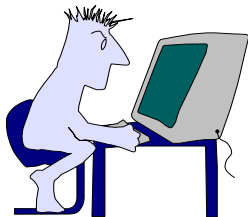
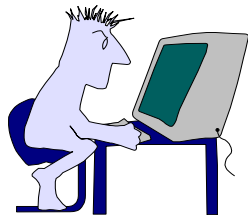
# NCCDB Program Advantages

- Done once
- Done right
- Stored electronically
- Instantly Available (Tactical)
- Consistent
- Transferable/Sharable
- Economical

# NCCDB Support Emergency Response Support

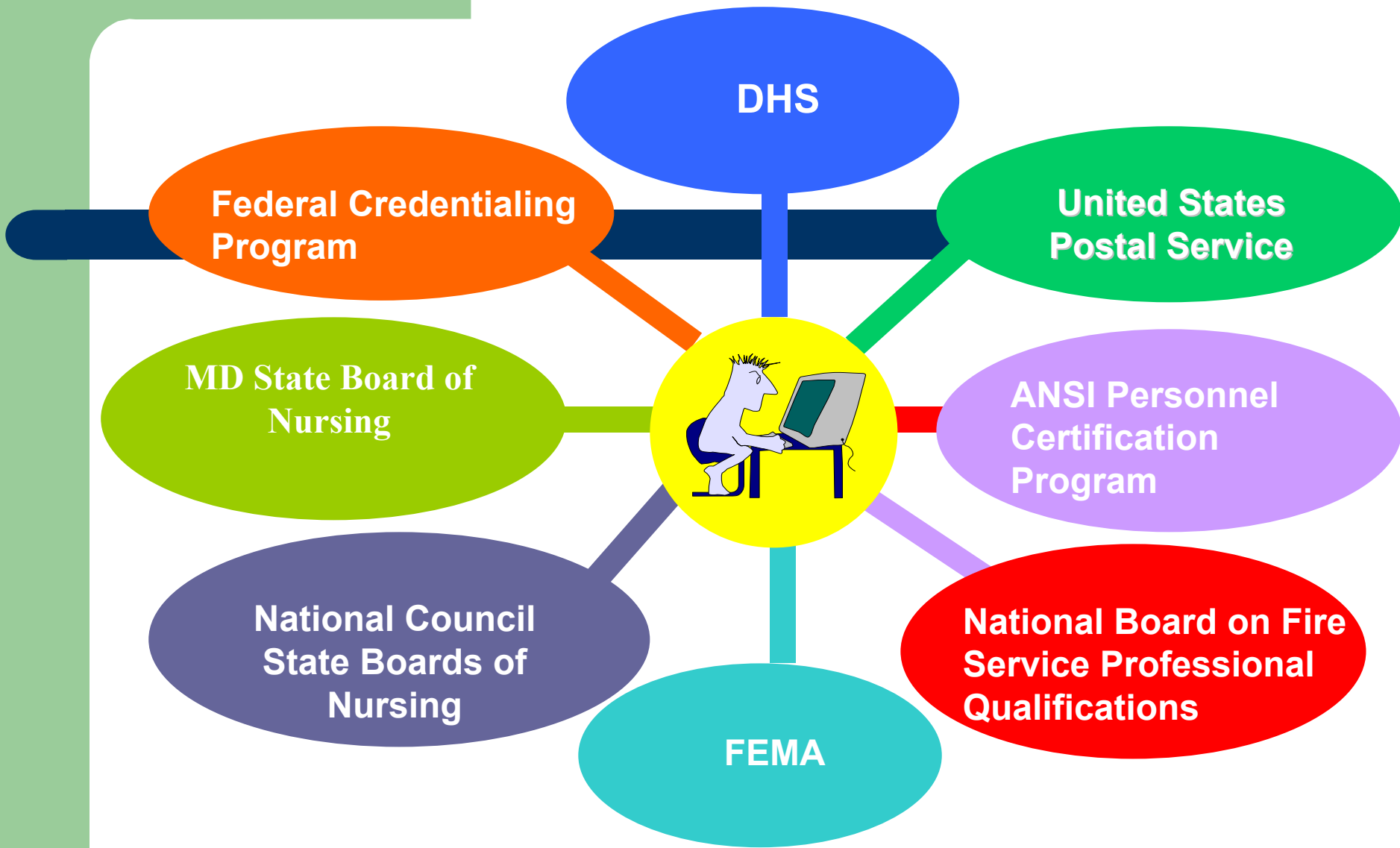
- Catalogue health care personnel to be used in emergency response
- Include demographic and personal information
- Identify scarce health care professionals
- Assure Individual is appropriately qualified, certified or licensed to perform required tasks

# NCCDB



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# Reference Sites

## Web Site

- [www.npdb-hipdb.com](http://www.npdb-hipdb.com)
  - Interactive Training
  - Public Use File
  - Data on Reporting
  - Annual Report
  - Instructions for Reporting and Querying
- Help Line  
1-800-767-6732