



# NPDB-HIPDB DATA BANK NEWS



National Practitioner Data Bank—Healthcare Integrity and Protection Data Bank

APRIL 2007

## Data Banks Launch PDS Prototype!

The Data Banks will launch the Proactive Disclosure Service (PDS) prototype on May 1. Over 100,000 practitioners are currently scheduled for enrollment by hospitals, health plans, licensing boards, and other health care entities. The opportunity for registered entities to subscribe to this innovative service is still available. Due to the positive response received from January's PDS Prototype Participation newsletter insert, we are including it again in this newsletter issue. **If you are interested in participating in PDS, complete the insert in this newsletter and return it to the Data Banks.**

PDS was developed in response to the growing interest in the health care community for ongoing monitoring as a means of increasing quality and patient safety in health care. When PDS subscribers enroll their practitioners, they receive all the copies of existing reports on the enrolled practitioners in the Data Bank(s), as they do with regular queries, but additionally receive continuous monitoring. PDS provides continuous monitoring by notifying an entity when a new, revised, or voided report on an enrollee is received by the Data Bank(s) within one business day. Thus, subscribers have virtually immediate access to important new information 24/7, 365 days a year.

The immediacy of PDS notifications can have a substantial impact on the licensing and credentialing of practitioners. According to Data Bank research,

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## ITP Users: Download New ITP Client Program

On June 18, 2007, the National Practitioner Data Bank and the Healthcare Integrity and Protection Data Bank (NPDB-HIPDB) will implement several improvements to the Interface Control Document (ICD) Transfer Program (ITP) submission and response file formats. For information on some upcoming changes, see the article entitled "Data Bank Functionality Improves in June" on page 4 of this newsletter. Additionally, new security enhancements that pertain to ITP users will be activated in June. The Data Banks e-mailed detailed information regarding these security enhancements to ITP users in January.

To better prepare you for the upcoming changes, updated ICDs are now available on the NPDB-HIPDB Web site, at [www.npdb-hipdb.hrsa.gov/itp.html](http://www.npdb-hipdb.hrsa.gov/itp.html). The new version of the ITP client program will be posted to the Data Bank Web site on April 30, 2007. Users should download this program but the new ITP client program version cannot be used prior to June 18, 2007. The previous version (version 1.07) of the ITP program will not work after the Data Bank enhancements are implemented on June 18, 2007. In the future, if you would like e-mail notification when new ICDs are available, sign up for the "ITP E-Mail List" at [www.npdb-hipdb.hrsa.gov/MailingListReg.html](http://www.npdb-hipdb.hrsa.gov/MailingListReg.html).

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currently 398 days is the average time between the date a report is submitted to the Data Banks and the date that an eligible entity queries and receives the report. Compare those results to PDS, which automatically notifies the entity and allows access to the new report within one business day of the report's receipt. Data Bank research also indicates that National Practitioner Data Bank (NPDB) data influenced almost 10 percent of the decisions to license, credential, and assign medical staff membership or privileges to a practitioner. NPDB data can potentially change 40,000 credentialing and licensing decisions every year. PDS expedites information to credentialers and licensing agencies, serving as a powerful tool to improve the quality of health care.

The ongoing monitoring capability of PDS enables subscribers to meet the

criteria of leading accrediting bodies, including the Joint Commission and the National Committee for Quality Assurance, as well as the legal querying requirements of the *Health Care Quality Improvement Act of 1986*. The Centers for Medicare & Medicaid Services (CMS) views a provider's use of the PDS as consistent with CMS hospital requirements for quality assessment and medical staff privileging.

One new time-saving feature for PDS subscribers is the ability to import practitioner files directly from their Integrated Querying and Reporting Service subject database to the PDS database without re-keying each practitioner's data. Data Bank entities can enroll all of their practitioner staff at one time or they can "try out" the PDS prototype by enrolling only some of their practitioner staff. Entities may enroll practitioners as they come up

for re-credentialing, renewal, or any time within the prototype period. The annual PDS fee covers the practitioner's initial report(s) and all future reports received by the designated Data Bank during the enrollment year. PDS is governed by the same laws that protect the confidentiality of the information in the NPDB and Healthcare Integrity and Protection Data Bank therefore the registration and other procedures remain the same. Authorized entities must be registered with the appropriate Data Bank(s). Similarly, authorized agents can perform on behalf of an entity using the PDS, just as they currently interact with the Data Banks. For more information on the PDS, visit the Data Bank Web site, [www.npdb-hipdb.hrsa.gov](http://www.npdb-hipdb.hrsa.gov), or call the Customer Service Center at 1-800-767-6732. ¶

## Upcoming Data Bank Outreach Activities

Representatives from the Practitioner Data Banks Branch (PDBB) plan to participate in a variety of outreach activities which provide an opportunity to share Data Bank information, learn from health care community experts and associations, and get a first hand look at the cares and concerns of the Data Bank users. The Data Banks will participate in the following meetings and conferences:

### April

- Boston University's Quality in Healthcare Conference (Boston, MA, April 3-5).
- Midwest State Association Medical Staff Services (Detroit, MI, April 18-20).
- Wisconsin Association Medical Staff Services (Madison, WI, April 18-20).
- Wyoming State National Practitioner Data Bank and Healthcare Integrity and Protection Data Bank (NPDB-HIPDB) Policy Forum (Cheyenne, WY, April 23-26).
- Illinois Association Medical Staff Services (Chicago, IL, April 25-27).

### May

- Federation of Chiropractic Licensing Boards (St. Louis, MO, May 2-7).
- California Association Medical Staff Services (Rancho Mirage, CA, May 23-25).

### June

- The American Health Lawyers Association Annual Meeting (Chicago, IL, June 23-27).

### July

- The National Podiatric Medical Association (Las Vegas, NV, July 25-29).
- The National Association of Specialty Health Organizations Meeting (Westlake Village, CA, July 30-August 3).

If you have an event for which you desire PDBB participation, please contact us with your request at [npdb-hipdb@sra.com](mailto:npdb-hipdb@sra.com). On the subject line, specify "PDBB meeting participation request". Be sure to include your organization's name, event description, location, date(s), contact name, and phone number in your request. ¶

# Reporting Multiple Defendant MMPRs

Reporting a medical malpractice event involving two or more practitioners to the National Practitioner Data Bank (NPDB) requires extra care to ensure that the payment amount is reflected accurately. The payment amount for each practitioner must be reported separately, and each report must include the amount paid by the reporting entity for all practitioners in the case. Malpractice payment report forms have three fields for the amount paid to assist in reporting properly. These fields are:

1. "Amount of This Payment for This Practitioner."
2. "Total Amount Paid or to Be Paid by This Payer for This Practitioner."
3. "Total Amount Paid or to Be Paid by This Payer for All Practitioners in This Case."

To report correctly, the total amount paid for all practitioners must be entered in the "Total Amount Paid or to Be Paid by This Payer for All Practitioners in This Case" field on each practitioner's Report Input form. In addition, the total paid for all practitioners must be allocated among the individual practitioners and reported separately for the subject practitioner in each practitioner's Report Input form. This is done in the "Amount of This Payment for This Practitioner" field and the "Total Amount Paid or to Be Paid by This Payer for This Practitioner" field on the Report Input form. Unless only one practitioner is involved in a case, the amount reported in these fields cannot be the same as the total amount paid for all practitioners.

For example, assume there is a \$1 million payment in a case involving two practitioners. A separate Medical Malpractice Payment Report (MMPR) must be filed for each practitioner. The "Total Amount Paid or to Be Paid by This Payer for All Practitioners in This Case" field on both these reports would specify \$1 million. But a

smaller amount must be reported for each practitioner in the "Amount of This Payment for This Practitioner" and the "Total Amount Paid or to Be Paid by This Payer for This Practitioner" fields. The \$1 million must be split between the two practitioners, e.g., \$1 for one practitioner and \$999,999 for the other, or \$500,000 and \$500,000, or in any other way as long as the total reflects the \$1 million payment for both of the involved practitioners. The reporting entity must not attribute the full \$1 million payment to each practitioner as it results in double reporting of the payment amount, is unfair to practitioners, and is not allowed under NPDB reporting requirements. In addition, at least \$1 must be allocated to each reported practitioner. **Note:** A report cannot list a zero amount for the reported practitioner.

Settlement agreements or court judgments that state the amount being paid for each practitioner should be reported as specified in the judgment or settlement. Otherwise, the reporting entity may use its own

judgment of degree of responsibility or simply arbitrarily divide the total payment by the number of practitioners involved. Reporting entities must state in the "Description of Judgment or Settlement and Any Conditions, Including Terms of Payment" narrative field of the report how the allocation was made. For example, the narrative could say that, for NPDB reporting purposes, the reporting entity has simply divided the total payment by the number of practitioners involved in the settlement and that the allocated amount does not reflect the reporting entity's opinion as to the practitioner's degree of responsibility. Or the statement may say that the amount allocated to the practitioner does not represent the reporting entity's judgment concerning the practitioner's degree of responsibility.

These reporting procedures apply to all entities reporting MMPRs whether they are commercial medical malpractice carriers, self-insured civilian hospitals, Federal agencies making payments under the *Federal Tort Claims Act*, or others. ¶

The screenshot shows a web browser window with the title "Report Input Form - Microsoft Internet Explorer". The page content is titled "REPORT INPUT" and includes the following sections:

- Payments by This Payer for This Practitioner:**
  - Amount of This Payment for This Practitioner (Format NNNNN.NN): \$ [input field]
  - Date of This Payment (MMDDYYYY): [input field]
  - This Payment Represents:  A Single Final Payment  One of Multiple Payments
  - Total Amount Paid or to Be Paid by This Payer for This Practitioner (Format NNNNN.NN): \$ [input field]
  - Payment Result of:  Judgment  Settlement  Payment Prior to Settlement
  - Date of Judgment or Settlement, if Any (MMDDYYYY): [input field]
- Payments by This Payer for Other Practitioners in This Case:**
  - Total Amount Paid or to Be Paid by This Payer for All Practitioners in This Case (Including the Amount Specified Above for This Practitioner) (Format NNNNN.NN): \$ [input field]
  - Number of Practitioners for Whom This Payer Has Paid or Will Pay in This Case: [input field]
- Payments by Others for This Practitioner:**
  - Complete if your entity is an Insurance Company or a Self-Insured Organization.
  - Has a State Guaranty Fund or State Excess Judgment Fund Made a Payment for This Practitioner in This Case, or Is Such a Payment Expected to Be Made?:  Yes  No  Unknown
  - Amount Paid or Expected to Be Paid by the State Fund (Format NNNNN.NN): \$ [input field]

Figure 1. The Report Input screen enables users to clearly note payment information for each practitioner. Note: The screen is split to show pertinent payment information.

## Data Bank Functionality Improves in June

The Data Banks are pleased to announce upcoming system enhancements scheduled to take effect on June 18, 2007, for users of the Integrated Querying and Reporting Service (IQRS) and the Interface Control Document Transfer Program (ITP). The improvements are a result of user requests and suggestions.

### CORRECTION TO REVISION TO ACTION REPORTS

IQRS reporters will have the ability to correct Revision to Action reports through the IQRS. Previously, reporters had to void Revision to Action reports after a mistake was made and submit a new Revision to Action report. This improvement should save users time. ITP users will not have the ability to submit Corrections to Revision to Action reports through ITP, but they will be able to view Corrections to Revision to Action reports in their query responses. ITP users may submit Corrections to Revision to Action reports through the IQRS. To correct a Revision to Action report, log in to the IQRS and click **Report** on the *Options* screen. Enter the report Data Bank Control Number (DCN) and click **Correct** to modify the report. After making changes to the report, click **Submit**.

### REPORTS DISPLAY MOST RECENT ENTITY INFORMATION

To ensure that practitioners receive the most recent entity information on Data Bank reports (name, address, and report point of contact), Section A (of all report types) is expanding to include the reporting entity's most recent name and address (if the entity information has changed or if an entity has a successor since the report was filed). The original entity report contact information will remain unchanged on the report, but as entity information changes over the years, the new data will be added so queriers and practitioners will have current reporting entity contact information at all times. These changes affect both IQRS and ITP users.

### NARRATIVE FIELDS INCREASE TO 4,000 CHARACTERS

The character limit in report narrative and subject statement fields will increase to 4,000 characters. In addition, the size of the text area is being enlarged so that users will see more text on the screen and a character counter will display, enabling users to track the number of characters used. The change in field size affects both IQRS and ITP users.

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*Data Bank Functionality Improves  
in June continued on page 5*

# Helpful Hints From

### ASSIGN SPECIFIC CREDIT CARDS TO SPECIFIC USERS FOR QUERY PAYMENT

Entity administrators may save and assign specific credit card numbers to specific users. This enables users to charge Data Bank queries without entering credit card information each time a query is performed. To assign entity users to a credit card for query payments, the entity's administrator clicks the appropriate credit card radio button on the *Maintain IQRS Credit Card* screen and then clicks **Edit**. On the *Edit Credit Card* screen, the administrator can quickly assign (and delete) existing entity users to and from the selected credit card. **Note:** If an entity administrator assigns a new credit card number to a user on the *Edit Credit Card* screen, the user will only be able to use the new credit card (the new credit card number replaces the old credit card number).

### IMPORT YOUR (FIXED-WIDTH AND XML) SUBJECT DATABASE INTO THE IQRS!

You can import your subject database into the Integrated Querying and Reporting Service (IQRS) if it is formatted in fixed-width or eXtensible Markup Language (XML) format. The XML import format offers several advantages over the fixed-width format. While the fixed-width format only allows users to add individual subjects to their subject database, the XML format enables users to add, update, and delete both individual and organization subjects. XML import format also provides a Subject ID# data element for the entity's personal use, helping users to track subjects with their own unique identifying number during the import process. To obtain additional information on importing your subject database into the IQRS, go to [www.npdb-hipdb.hrsa.gov/iqrsSubjectDatabase.html](http://www.npdb-hipdb.hrsa.gov/iqrsSubjectDatabase.html).

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## NEW OPTION FOR REINSTATEMENT ON ADVERSE ACTION REPORTS

Currently, entities select “yes” or “no” in response to whether a reinstatement is automatic at completion of the adverse action period. A third response, “Yes, with conditions”, will be available to entities in June and will require entities to submit a Revision to Action report when a status changes. These changes affect both IQRS and ITP users.

## REPORTING REQUIREMENT

All ITP report responses will include a reporting timeframe compliance notice. (All IQRS submitted reports already contain this notice.) The compliance notice notifies reporters whether or not they submitted the report within the mandatory reporting timeframe.

Data Bank improvements are designed to meet your needs as you fulfill your querying and reporting obligations. Please let us know if you find them helpful. ¶

## Web Site Address Migration Complete

The Data Banks Web site address transitioned last year from a .com to a Government-controlled [hrsa.gov](http://hrsa.gov) domain name: [www.npdb-hipdb.hrsa.gov](http://www.npdb-hipdb.hrsa.gov). To allow users time to update links and bookmarks, the old address automatically redirected users to the new address. This migration period is now complete, and users must enter the secure Federal Government [hrsa.gov](http://hrsa.gov) address. Please ensure your bookmarks are updated to [www.npdb-hipdb.hrsa.gov](http://www.npdb-hipdb.hrsa.gov). ¶

# The Data Banks

## YOU MAY DESIGNATE MULTIPLE AUTHORIZED AGENTS

To designate one or more authorized agents to query or report for your entity, the entity administrator logs in to the IQRS, clicks **Administrator Options** on the *Options* screen, and then clicks **Designate Authorized Agent** on the *Administrator Options* screen. The administrator completes all fields on the *Designate Authorized Agent* screen, certifies the information, and clicks **Continue**. A formatted copy of the *Agent Designation Request* displays. The administrator prints a copy for entity records and then notifies the authorized agent’s administrator to log in to the IQRS to accept this request. The agent administrator also receives a Data Bank Correspondence message regarding this request. **Note:** The *Designate Authorized Agent* screen must be completed for each agent you select. Once the agent accepts the designation, they can begin to act on your behalf.

## SUBJECT NOTIFICATION DOCUMENTS

When a report is received and processed, the Data Banks send a Subject Notification Document (SND) to the subject named in the report at the address provided by the reporting entity.

If the SND is returned by the Post Office as “undeliverable,” the address to which the subject’s report was sent and the date it was sent is added to the report, along with a note indicating the Data Banks attempted to notify the subject at the address stated, but the attempt was unsuccessful. ¶

## Security Hints from the Data Banks: Importance of Unique User IDs and Confidential Passwords

The National Practitioner Data Bank and the Healthcare Integrity and Protection Data Bank (NPDB-HIPDB) contain sensitive information. Access is restricted to authorized users to maintain the confidentiality and integrity of this information. All authorized users of the NPDB-HIPDB must log in to the system by entering a unique user ID and password. Each user is responsible for protecting his user ID and password. If unauthorized users access the NPDB-HIPDB through your user account, the activities will be traced to you. Therefore, it is important that you keep your user ID and password confidential at all times—do not share this information with anyone. If you suspect that your account has been compromised, change your password and contact the Customer Service Center immediately at 1-800-767-6732.

It is the responsibility of each registered entity's administrator to ensure that his organization's users are established with their own unique Data Bank user ID and password. Administrator log-in information should only be used by the entity administrator and is not meant to be shared with others.

### HOW TO ESTABLISH USER ACCOUNTS

The entity administrator can establish individual user accounts from the *Maintain User Account* screen. First, go to the *Options* screen, click **Administrator Options** and then click **Maintain User Accounts**. Click **Add** to add a new user account. Complete all the fields on the *User Account Information* screen and click **Save**. Administrators may edit and update user accounts as needed.

In addition, entity administrators should delete unused user accounts including users who no longer access the system. To assist the entity administrator, the *Maintain User Accounts* screen also lists the password expiration dates.

To help maintain security, the NPDB-HIPDB enforces the following password rules:

### USER PASSWORD SECURITY RULES

- A changed or updated password must contain between 8 and 14 characters, with at least 1 alphabetic and 1 numeric character.
- Password must be different from previous 4 passwords.
- Password must not be similar to a word in the dictionary.
- Password must not be similar to a common Data Bank phrase.
- Password must not be similar to your user ID.
- Password must not be a simple sequence of characters (e.g., abcd1234).
- Changed or updated password expires after 90 calendar days.
- New entity password expires after 30 calendar days.
- A reset password expires after 3 calendar days.

Following these guidelines will help protect your NPDB-HIPDB information.†

## Dear Data Banks...

**T**his column answers questions you may have about Data Banks policy and procedures. **If you have a question about how the Data Banks work, please write to Dear Data Banks at P.O. Box 10832, Chantilly, VA 20153-0832 or e-mail your question to "Dear Data Banks" at [npdb-hipdb@sra.com](mailto:npdb-hipdb@sra.com).** We look forward to hearing from you!

**Q**uestion: I am with a State dental board, and we suspended an oral surgeon's license until the practitioner completed additional training. The board reinstated the dentist's license 28 days after the date of the suspension. Is this a reportable action?

**A**nswer: Yes, this would be a reportable action because State licensure suspension must be reported regardless of the duration of the suspension. Therefore, the board must report the suspension as an initial report, and report the reinstatement of the license as a Revision to Action. Reinstatements and other types of revisions to previously reported licensure actions must be reported to the National Practitioner Data Bank and the Healthcare Integrity and Protection Data Bank (NPDB-HIPDB).

**Q**uestion: I am an entity administrator and I am unable to log in to the Integrated Querying and Reporting Service (IQRS) because I forgot my password. How do I retrieve my password?

**A**nswer: You must call the Customer Service Center at 1-800-767-6732 to receive a temporary password that will allow you to log in and create your own new password. Once the Customer Service Center verifies that you are the entity administrator, you will be provided a temporary password. Note: The temporary password is valid for only three calendar days and is used one time only to allow you to log in to the IQRS and create your own unique password. Once you log in, enter the temporary password in the "Old Password" field. Your newly created password must be alpha-numeric (8-14 characters), may not be the same as any of your last 4 passwords, and may not be a word found in the dictionary. (Additional password security rules are discussed on page 6 of this newsletter.) Be sure to save your new password and immediately log out of the IQRS. Finally, log back in to the IQRS with the newly created password to proceed.

**Q**uestion: I queried on a physician who is applying for appointment and my query response indicated "No Reports Found". However, the physician provided my entity with information about his claims history which included a payment of a \$1million settlement on his behalf. What should I do?

**A**nswer: As the querying entity, you should discuss this matter with the applicant and the insurer for clarification. There are five possible reasons why this situation could occur:

- Your query may not have contained adequate or correct information to match an existing report on the practitioner. If you think inadequate matching information was the problem, please submit your query again with additional or corrected identifying information.
- A medical malpractice payment made prior to the opening of the NPDB in 1990 will not be displayed in the results.
- A reportable payment must be made for the benefit of a practitioner and that practitioner must be named or identifiable in the claim and the release (except for payments made under the *Federal Tort Claims Act*). A practitioner that is not named or identifiable in both the claim and the release will not be reported.
- A payment made for the sole benefit of a corporation such as a clinic, group practice, or hospital will not be reported as a payment for the individual practitioner.
- A required report was not filed. If you think a report should have been filed but wasn't, please call the Customer Service Center at 1-800-767-6732.

**Q**uestion: I submitted a query yesterday and when I tried to view my query response today, it showed a "Rejection". How do I find out why it rejected?

**A**nswer: Queries marked as "Rejected" had one or more errors. The query was processed and a notice describing the error(s) is available. Click the highlighted Data Bank Control Number (DCN) and then select the Subject Name for the rejection reason. In general, responses to each query are available electronically within an average of two to four hours after receipt by the Data Bank(s).

**If you have an urgent question, please call the Customer Service Center at 1-800-767-6732. 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 Customer Service Center is closed on all Federal holidays.** ¶

# National Practitioner Data Bank Healthcare Integrity and Protection Data Bank

P.O. Box 10832, Chantilly, Virginia 20153-0832 • www.npdb-hipdb.hrsa.gov

**DO YOU ACT AS AN AUTHORIZED AGENT?**

Please provide the following information **if you act as an Agent**. **Note:** If you represent multiple entities that plan to enroll in PDS, check the box below and attach entity information separately.

**Yes, I represent more than one entity that plans to enroll in PDS. I am attaching information for \_\_\_ (number of entities).**

Entity Name: \_\_\_\_\_

Entity DBID: \_\_\_\_\_

Entity Contact Name for PDS: \_\_\_\_\_

Entity Phone Number: \_\_\_\_\_

Entity E-mail Address: \_\_\_\_\_

Number of Practitioners That I Will Enroll in PDS for This Entity: \_\_\_\_\_

**ENROLLMENT INFORMATION**

Number of Practitioners That I Will Enroll in PDS for My Entity: \_\_\_\_\_

Total Number of Practitioners That I Will Enroll in PDS: \_\_\_\_\_

Total Anticipated Annual Enrollment Fee: \_\_\_\_\_ (The Number of Enrolled Practitioners x \$3.25 per Data Bank)

**PDS ACCESS METHOD**

How Do You Plan to Use the PDS?: **IQRS**  **ITP**

Do You Plan to Use ITP Software Provided by Another Vendor?: **Yes**  **No**

If you plan to use software provided by another vendor, please provide the vendor information below so we may assist them with questions.

Vendor Name: \_\_\_\_\_

Vendor Contact Name for PDS: \_\_\_\_\_

Vendor Phone Number: \_\_\_\_\_

**CERTIFICATION**

I agree to enroll in the NPDB-HIPDB PDS Prototype. I understand that enrollment will begin on or about May 2007 and that payment must be made upon enrollment.

\_\_\_\_\_  
Department/Entity Representative Signature

\_\_\_\_\_  
Date

PERFORATED

**National Practitioner Data Bank**  
**Healthcare Integrity and Protection Data Bank**  
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**PROACTIVE DISCLOSURE SERVICE (PDS) PROTOTYPE PARTICIPATION**

**(Please tear out and complete both pages.)**

Please complete both pages and return to: Attn: PDS Prototype Participation, NPDB-HIPDB, P.O. Box 10832, Chantilly, VA 20153-0832, or you may fax it to 703-802-4109, or you may e-mail it to [npdb-hipdb@sra.com](mailto:npdb-hipdb@sra.com). **Be sure to sign page 2 before returning to the Data Banks.**

**ORGANIZATION INFORMATION**

Name: \_\_\_\_\_

Data Bank Identification Number (DBID): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact Name for PDS: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Entity Type: **Hospital**  **Health Plan, MCO**  **Licensing Board**  **Other**

If you selected Other above, specify your entity type: \_\_\_\_\_

**DO YOU HAVE AN AUTHORIZED AGENT?**

Please provide the following information **if you plan to use an agent for PDS**. **Note:** If you plan to use more than one agent for PDS, check the box below and attach agent information.

**Yes, I have more than one agent. I am attaching information for \_\_\_ (number of agents).**

Agent Name: \_\_\_\_\_

Agent DBID: \_\_\_\_\_

Agent Contact Name for PDS: \_\_\_\_\_

Agent Phone Number: \_\_\_\_\_

Agent E-mail Address: \_\_\_\_\_

PERFORATED

## On the Horizon

### POLICY FORUM AND ANNUAL NATIONAL ASSOCIATION MEDICAL STAFF SERVICES (NAMSS) CONFERENCE

September 30th will find Data Bank representatives in New York, NY for a Data Banks Policy Forum. This Forum convenes before the start of the 31st annual NAMSS conference. The Forum attendees will discuss:

- Existing policies that have generated frequent questions.
- Section 1921 of the *Social Security Act*.
- The importance of compliance.
- The Proactive Disclosure Service (PDS).

Following the Policy Forum, Data Bank representatives will attend the NAMSS conference and answer questions from Data Bank users at the National Practitioner Data Bank and Healthcare Integrity and Protection Data Bank (NPDB-HIPDB) exhibit booth. NAMSS members include individuals responsible for managing credentialing, privileging, practitioner/provider organizations, and regulatory compliance in the diverse health care industry.

U.S. DEPARTMENT OF HEALTH AND  
HUMAN SERVICES

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Health Resources & Services Administration  
Bureau of Health Professions  
Office of Workforce Evaluation and Quality Assurance  
Practitioner Data Banks Branch  
Parklawn Building, Room 8-103  
5600 Fishers Lane  
Rockville, MD 20857

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