



**Ambulatory Clinic Policy and Procedure**

Title:	<b>Reporting Information to the National Practitioner Data Bank or the Texas Medical Board</b>	Policy Number:	<b>8.07</b>
		Version Number:	<b>3</b>
Regulation Reference:	<b>TJC, HR.02.01.03, 12, 15, 16, Texas Medical Board; National Practitioner Data Bank</b>	Effective Date:	<b>2/2016</b>
		Original Approval:	<b>10/2010</b>

**POLICY STATEMENT:**

It is the policy of Texas Tech University Health Science Center (TTUHSC) to comply with physician reporting requirements (i.e. the National Practitioner Data Bank (NPDB) and the Texas Medical Board).

**SCOPE:**

This policy applies to all TTUHSC Ambulatory Clinics operated through the School of Medicine.

**PROCEDURE:**

**1. Reporting Malpractice Payments:**

- a. The Director of the Office of General Counsel Professional Liability Division will be the authorized representative to report malpractice information to the Texas Medical Board and malpractice payments to the NPDB. This individual will be responsible for confidential and sensitive information regarding members of the Medical Staff.
- b. TTUHSC shall submit information to the NPDB and the Texas Medical Board within thirty (30) days from the date that a payment is made. (Any payment on behalf of any licensed health practitioner as the result of a claim or judgment for medical malpractice must be reported to the NPDB.)
- c. All information required to be reported to these entities will be on the forms furnished by the entities for the reports.

**2. Reporting adverse actions to the Texas Medical Board:**

- a. The Dean of each School of Medicine or his designee will be the authorized representative to report adverse actions to the National Practitioner Data Bank (NPDB) or the Texas Medical Board. This individual will be responsible for confidential and sensitive information regarding members of the Medical Staff.
- b. TTUHSC shall report an adverse action to the NPDB within fifteen (15) days from the date the adverse action was taken. The adverse action includes, but is not limited to any professional review action that adversely affects the clinical privileges of the physician for a period longer than thirty days. If the organization fails to report adverse action on clinical privileges, the immunity protection provided under Part H of the Health Care Quality Improvement Act will not apply to the organization for professional review activities for a three year period.
- c. TTUHSC shall report to the Texas Medical Board the following actions:
  - 1) Any professional review action that adversely affects the clinical privileges of a physician for a period longer than 30 days;
  - 2) Acceptance of the surrender of clinical privileges or any restriction of such privileges by a physician:

- a) While the physician is under investigation by a health care entity relating to possible incompetence or improper professional conduct; or
  - b) In return for not conducting such an investigation or proceeding.
- d. What information must be reported: TTUHSC shall report the following information concerning actions described in paragraph 2(c) above with respect to the physician.
- 1) Name
  - 2) Work address,
  - 3) Home address, if known
  - 4) Social Security number, if known, and if obtained in accordance with section 7 of the Privacy Act of 1974,
  - 5) Date of birth,
  - 6) Name of each professional school attended and year of graduation,
  - 7) For each professional license; the license number, the field of licensure, and the name of the State or Territory in which the license is held,
  - 8) Drug Enforcement Administration registration number, if known,
  - 9) A description of the acts or omissions or other reasons for privilege loss, or, if known, for surrender,
  - 10) Action taken, date the action was taken, and effective date of the action.

### **3. Reporting errors, omissions and revisions:**

- a. The persons making the reports are responsible for the accuracy of information, which they report to the NPDB and the Texas Medical Board. If errors or omissions are found after the information has been reported, the person who reported it must send an addition or correction to the Data Bank, or to the Texas Medical Board as soon as possible.
- b. The person who reports information on licensure or clinical privileges must also report any revision of the action originally reported. Revisions include reversal of a professional review action or reinstatement of license. Revisions are subject to the same time constraints and procedures as applicable to the original action, which was reported.

### **APPROVAL AUTHORITY:**

This policy shall be recommended for approval by the Joint Ambulatory Policy Committee to the Council of Deans.

### **RESPONSIBILITY AND REVISIONS:**

It is the responsibility of the Joint Ambulatory Policy Committee to review and initiate necessary revisions based on collaboration and input by and through Quality Improvement/Performance Improvement, Risk Management and the Office of Institutional Compliance.

### **RIGHT TO CHANGE POLICY:**

TTUHSC reserves the right to interpret, change, modify, amend or rescind this policy in whole or in part at any time to reflect changes in policy and/or law.

### **CERTIFICATION:**

This policy was approved by the Council of Deans on February 4, 2016.