



National Practitioner Data Bank

Healthcare Integrity and Protection Data Bank



FACT SHEET ON SECTION 1921

Background of Section 1921

Title IV of Public Law 99-660, the *Health Care Quality Improvement Act of 1986*, as amended, established the National Practitioner Data Bank (NPDB) as an information clearinghouse to collect and release certain information related to the professional competence and conduct of physicians, dentists, and, in some cases, other healthcare practitioners. Originally the operations of the NPDB were directed only toward collecting and releasing information under Title IV. However, in 1987 Congress passed Public Law 100-93, Section 5 of the *Medicare and Medicaid Patient and Program Protection Act of 1987* (Section 1921 of the *Social Security Act*), authorizing the Government to collect information concerning sanctions taken by State licensing authorities against all healthcare practitioners and entities.

Section 1921 was enacted to provide protection from unfit healthcare practitioners to beneficiaries participating in the *Social Security Act's* healthcare programs and to improve the anti-fraud provisions of these programs. Congress later amended Section 1921 with the *Omnibus Budget Reconciliation Act of 1990*, Public Law 101-508, to add “any negative action or finding by such authority, organization, or entity regarding the practitioner or entity.”

The U.S. Department of Health and Human Services (HHS) issued a Notice of Proposed Rulemaking for Section 1921 on March 21, 2006 and issued the Final Rule for Section 1921 of the *Social Security Act* as published in the *Federal Register* on January 28, 2010. The Data Banks opened Section 1921 for reporting and querying on March 1, 2010.

Section 1921 expands the information collected and disseminated through the NPDB to include reports on all licensure actions taken against all healthcare practitioners, not just physicians and dentists, as well as healthcare entities. Peer Review Organizations and Private Accreditation Organizations must report any negative actions or findings taken against healthcare practitioners or organizations. Queriers have access to State licensure actions taken against all healthcare practitioners and Section 1921 provides limited querying by Quality Improvement Organizations, Federal and State Healthcare Programs, State Medicaid Fraud Control Units and other law enforcement agencies. Section 1921 also will allow entities new to the NPDB to access Section 1921 data through the NPDB.

Confidentiality of Section 1921 Information

Information reported to the NPDB, including information reported under Section 1921, is considered confidential and shall not be disclosed, except as specified in the NPDB regulations. The Office of Inspector General (OIG), HHS, has been delegated the authority to impose civil money penalties on those who violate the confidentiality provisions of NPDB information.

Persons or organizations who receive information from the NPDB, either directly or indirectly, are subject to the confidentiality provisions and the imposition of a civil money penalty if they violate those provisions.

The *Privacy Act*, 5 USC §552a, protects the contents of Federal systems of records on individuals, like those contained in the NPDB, from disclosure without the individual's consent, unless the disclosure is for a routine use of the system of records as published annually in the *Federal Register*. The published routine uses of NPDB information do not allow disclosure to the general public. 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.

Eligible Entities

Entities required to report and entitled to query under Section 1921 are defined in the provisions of Public Law 100-93, the *Medicare and Medicaid Patient and Program Protection Act of 1987*, as amended. Each eligible entity must certify its eligibility to the NPDB in order to report and/or query Section 1921 data.

Section 1921 requires each State to adopt a system of reporting to the Secretary of HHS certain adverse licensure actions taken against all healthcare practitioners and healthcare entities by any authority of the State that is responsible for the licensing of such practitioners or entities. Additional information may include any negative action or finding that a State licensing authority, peer review organization, or private accreditation entity has concluded against a healthcare practitioner or healthcare entity.

Entities that may obtain State licensure actions and negative actions or findings concluded against licensed healthcare practitioners and entities reported to the NPDB under Section 1921 are not allowed to obtain information regarding medical malpractice payments or adverse clinical

privileges and professional society membership actions on practitioners. The following group of queriers will have access to information reported to the NPDB under Section 1921 only:

- Agencies administering Federal healthcare programs, including private sector entities administering such programs under contract.
- State agencies administering or supervising State healthcare programs.
- Authorities of a State or its political subdivisions responsible for licensing health care entities.
- State Medicaid Fraud Control Units.
- U.S. Attorney General and other law enforcement officials.
- U.S. Comptroller General.
- Utilization and Quality Control Peer Review Organizations (now known as Quality Improvement Organizations).

Organizations that are eligible under Title IV to receive medical malpractice payments or adverse licensure, clinical privileges, and professional society membership actions on practitioners are also eligible to receive Section 1921 data.

Section 1921 data is not be available to the general public. However, persons or organizations are permitted to request information in a form that does not identify any particular practitioner or entity.

Fees

Fees are charged for all queries to the NPDB and are announced in the *Federal Register*. Query fees are based on the cost of processing requests and providing information to eligible entities. The NPDB only accepts payments for query fees by pre-authorized Electronic Funds Transfer (EFT) or credit card (VISA, MasterCard, Discover, or American Express). For information on Data Bank querying fees and acceptable payment methods, see the *Fact Sheet on Query Fees*.

Self-Queries

A healthcare practitioner or entity may self-query the Data Banks at any time by visiting the NPDB-HIPDB Web site at www.npdb-hipdb.hrsa.gov. All self-query fees must be paid by credit card. For detailed instructions about self-querying, see the *Fact Sheet on Self-Querying*.

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 email 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.