



# An Overview of the National Practitioner Data Bank

**Pennsylvania Association of Medical Staff Services**

*April 13, 2026*

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**National Practitioner Data Bank (NPDB)**  
**Bureau of Health Workforce (BHW)**

**Vision: Healthy Communities, Healthy People**



# Agenda

- 1 • Overview
- 2 • Querying
- 3 • Reporting
- 4 • Updates
- 5 • Resources

# Overview



# About the National Practitioner Data Bank (NPDB)

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The National Practitioner Data Bank (NPDB) is a web-based repository of reports containing information on medical malpractice payments and certain adverse actions related to health care practitioners, providers, and suppliers.

Established by Congress in 1986, it is a workforce tool that prevents practitioners from moving state to state without disclosure or discovery of previous damaging performance.

The mission of the NPDB is to improve health care quality, protect the public, and reduce health care fraud and abuse in the U.S.

The NPDB charges query fees to meet its statutory requirement to recover the full cost of operations.



# NPDB and Health Care Professionals: A Shared Goal

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You need access to tools and resources to engage and retain a quality health workforce

- Reporting helps complete NPDB information, adding value for all queriers who rely on the information
- Insufficient reporting denies hospitals and other health care entities information on practitioners, raising concerns about competency or conduct

# NPDB Information

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## Types of Information Collected

- Medical malpractice judgments and settlements
- Adverse licensing and certification actions
- Clinical privileges actions
- Health plan contract terminations
- Professional society membership actions
- Negative actions or findings from private accreditation organizations and peer review organizations
- Government administrative actions, e.g., exclusions from programs
- Civil and criminal health care-related judgments

# Who Reports and Queries?

| ENTITY TYPES                                               | REPORT         | QUERY          |
|------------------------------------------------------------|----------------|----------------|
| Hospitals                                                  | Required       | Required       |
| Health plans                                               | Required       | Optional       |
| Health care entities with formal peer review               | Required       | Optional       |
| Medical malpractice payers                                 | Required       | Not Authorized |
| State licensing and certification agencies                 | Required       | Optional       |
| State agencies administering or supervising state programs | Required       | Optional       |
| State law enforcement agencies or fraud control units      | Required       | Optional       |
| Federal licensing and certification agencies               | Required       | Optional       |
| Agencies administering federal health care programs        | Required       | Optional       |
| Federal law enforcement officials and agencies             | Required       | Optional       |
| Professional societies with formal peer review             | Required       | Optional       |
| Peer review organizations                                  | Required       | Not Authorized |
| Private accreditation organizations                        | Required       | Not Authorized |
| Quality improvement organizations                          | Not Authorized | Optional       |



# General Overview – NPDB Statistics

## Aggregate Data

**1.94+ million** REPORTS



**23+ thousand** ENTITIES



**941+ thousand** PRACTITIONERS



## 2025 Data

**71.8 thousand** NEW REPORTS



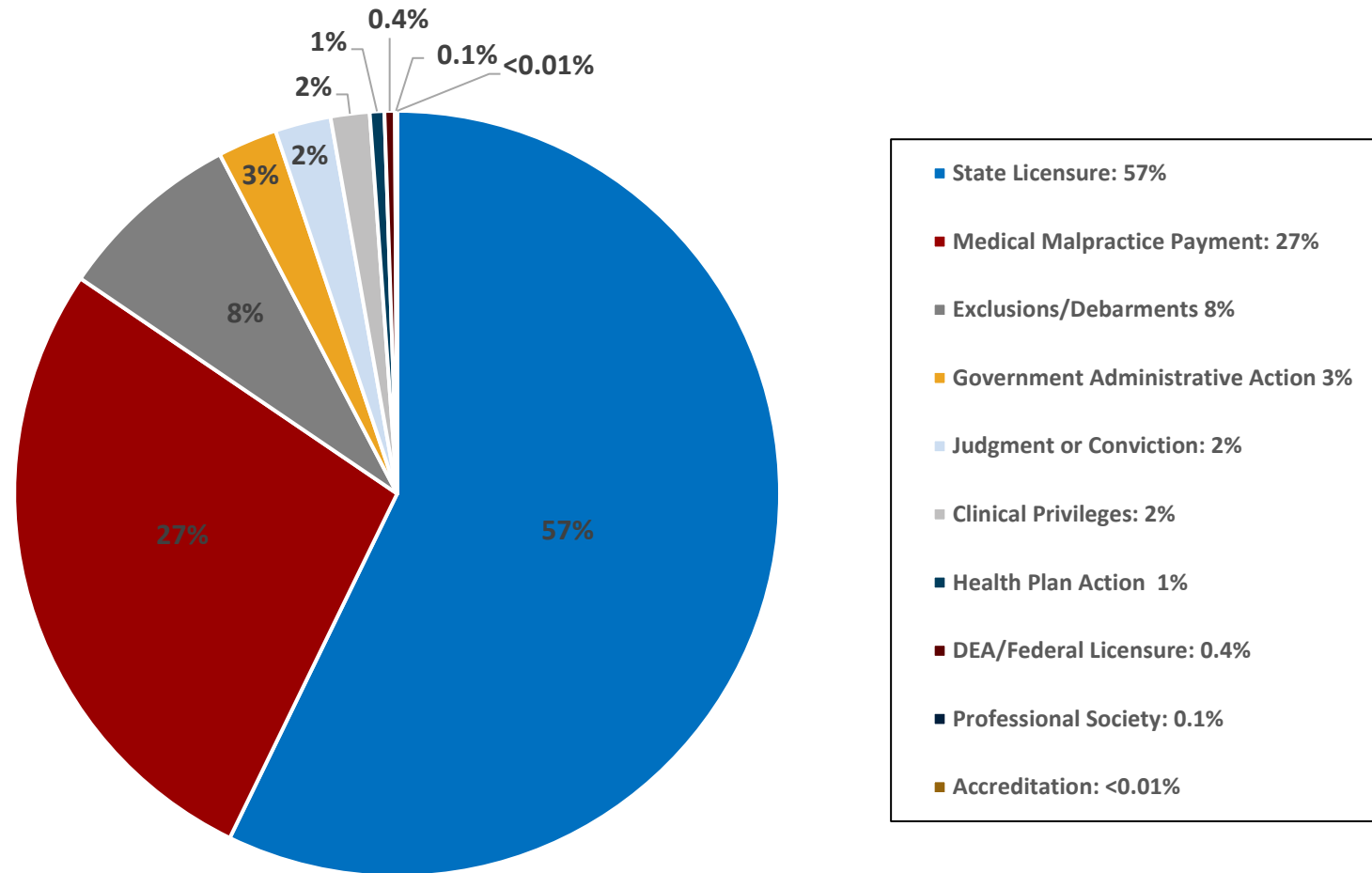
**15.9+ million** QUERIES



**2.58 million** DISCLOSURES



# Reporting – NPDB Reports by Type

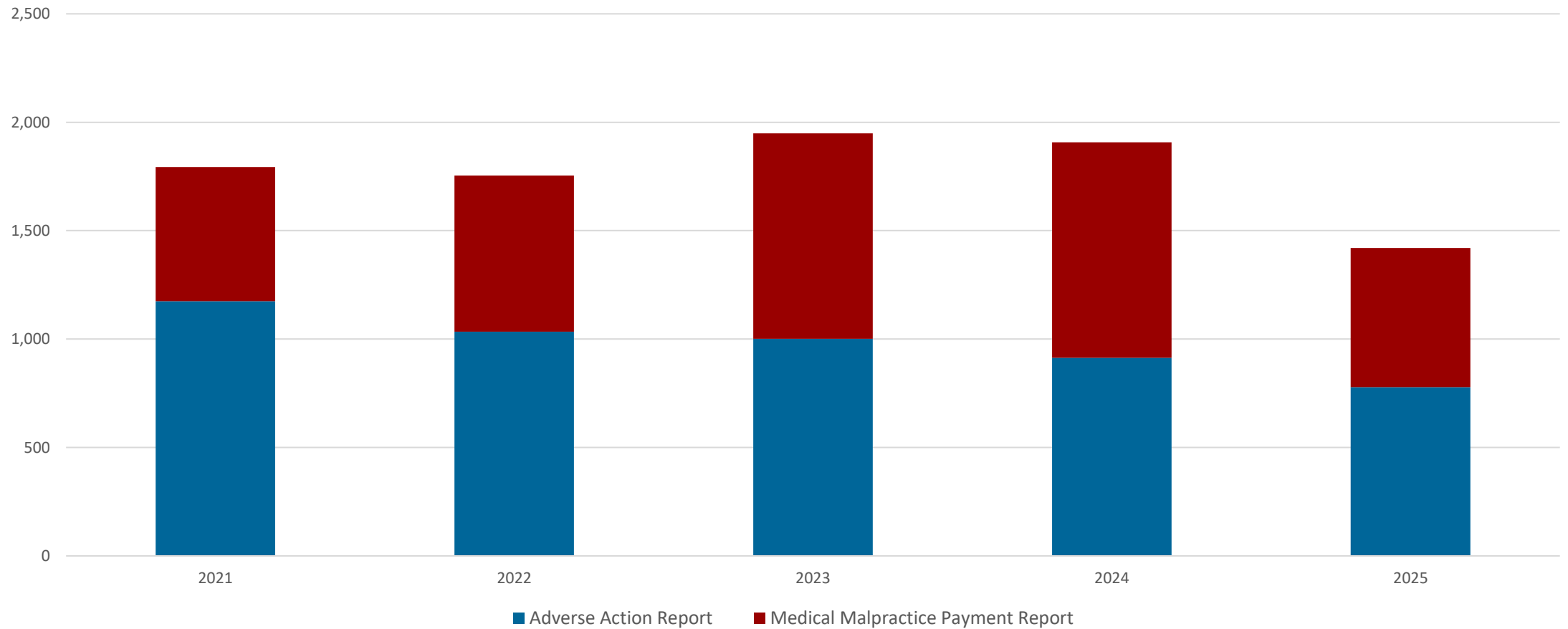


1.94M+ reports as of December 31, 2025



# Reports by Type, Pennsylvania, 2021-25

(n=8,824)



# “Top 10” Practitioner Type Reports (2021-25)

## All States

1. Registered Nurse
2. Physician (MD)
3. Practical Nurse
4. Therapists and Counselors
5. Technicians and Assistants
6. Nursing Para-Professionals
7. Dentist
8. Pharmacist
9. Physician (DO)
10. Adv. Practice Nurse

## Pennsylvania

1. Physician (MD)
2. Registered Nurse
3. Practical Nurse
4. Physician (DO)
5. Nursing Para-Professionals
6. Dentist
7. Therapists and Counselors
8. Pharmacist
9. Adv. Practice Nurse
10. Podiatrist



# Confidentiality

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Information reported to the NPDB is confidential, not available to the general public, and may not be disclosed, except as provided by law.



# Querying



# What is a Query?

- A query is a request to search for information in the NPDB regarding a health care practitioner or organization.
- The ability of an organization to query, and the type of information received through querying, is determined by law.

VIEW INITIAL RESPONSES

NATIONAL PRACTITIONER DATA BANK  
**NPDB**

Responses Details

Select a practitioner to view responses.

Filter ▼

Download All Unviewed Responses

| Submitted  | Viewed     | Name        | Submitted By | Billing Amount |
|------------|------------|-------------|--------------|----------------|
| 11/17/2015 | Not Viewed | KENT, CLARK | SALLY LAKE   | \$3.00         |
| 11/16/2015 | Not Viewed | DOE, JOHN   | SALLY LAKE   | \$3.00         |
| 11/16/2015 | Not Viewed | SMITH, JANE | SALLY LAKE   | \$3.00         |
| 11/13/2015 | Not Viewed | BLACK, JOE  | SALLY LAKE   | \$3.00         |
| 11/12/2015 | Not Viewed | WHITE, MATT | SALLY LAKE   | \$0.00         |

# Queries for Registered Entities

- One-Time Query
  - Allows you to receive a query response for a practitioner or organization
  - You will not be notified of any new reports submitted after the initial query date
  - Fee: \$2.50\*
- Continuous Query (one year enrollment)
  - Allows you to receive an initial query response for a practitioner
  - Provides new or updated report notifications for a practitioner
  - Fee: \$2.50 \*

\*NPDB is required by law to recover its full cost of operations, which it does by charging fees.



# Why Use Continuous Query?

| Features                                                                           | Continuous Query | One-Time Query |
|------------------------------------------------------------------------------------|------------------|----------------|
| \$2.50 processing fee                                                              | ✓                | ✓              |
| Accepted by accreditation organizations and meets hospitals' querying requirements | ✓                | ✓              |
| Provides an initial query response                                                 | ✓                | ✓              |
| Compatible with credentialing software                                             | ✓                | ✓              |
| Edit and update practitioners' identifying information                             | ✓                | ✗              |
| Notifies you when the NPDB receives new reports on your enrolled practitioners     | ✓                | ✗              |
| Retrieve an updated query response at any time                                     | ✓                | ✗              |
| Stores query responses for more than 45 days                                       | ✓                | ✗              |
| Provides a monthly summary of all reports received on your enrolled practitioners  | ✓                | ✗              |
| Renew continuous monitoring for re-credentialing                                   | ✓                | ✗              |

# Self-Query

- Health care practitioners, entities, providers, and suppliers may query the NPDB regarding themselves at any time.
- The fee for a digitally-certified query response (PDF) is \$3.00. An additional \$13.00 fee is charged for each paper copy requested, which is sent using U.S. Postal Service Certified Mail (signature required) to secure Personally Identifiable Information (PII).
- Subjects may share their query with:
  - licensing authorities
  - insurers
  - credentialing entities

 National Practitioner Data Bank  
Health Resources and Services Administration  
U.S. Department of Health and Human Services  
P.O. Box 10832  
Chantilly, VA 20153-0832  
<https://deva.npdb.hrsa.gov/8480>

7910000178124977  
Process Date: 08/20/2021  
Page: 1 of 4

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**DOE, JANE - SELF-QUERY RESPONSE FOR AN INDIVIDUAL**

**A. SUBJECT IDENTIFICATION INFORMATION** (Recipients should verify that subject identified is, in fact, the subject of interest.)

Practitioner Name: DOE, JANE  
Date of Birth: 01/01/1950  
Gender: FEMALE  
Shipping Address: 15036 CONFERENCE CENTER DR, CHANTILLY, VA 20151-3846  
Social Security Number: \*\*\*\*\*-3333  
License: PHYSICIAN (MD), 123456, VA, AEROSPACE MEDICINE  
Professional School(s): UNIVERSITY OF VA (2000)

**B. SUMMARY OF REPORTS ON FILE WITH THE DATA BANK AS OF 08/20/2021**

The following report types have been searched:

|                                         |                |                                    |                |
|-----------------------------------------|----------------|------------------------------------|----------------|
| Medical Malpractice Payment Report      | Yes, See Below | Health Plan Action(s)              | No Reports     |
| State Licensure or Certification Action | Yes, See Below | Professional Society Action(s)     | Yes, See Below |
| Exclusion or Debarment Action(s)        | No Reports     | DEA/Federal Licensure Action(s)    | No Reports     |
| Government Administrative Action(s)     | No Reports     | Judgment or Conviction Report(s)   | No Reports     |
| Clinical Privileges Action(s)           | Yes, See Below | Peer Review Organization Action(s) | No Reports     |

Copies of these reports are provided for restricted/limited use as prescribed by statutes listed on the preceding cover page.

**TEST INSURANCE COMPANY**

**TITLE IV CLINICAL PRIVILEGES**

Basis for Action: - LICENSE REVOCATION, SUSPENSION OR OTHER DISCIPLINARY ACTION TAKEN BY A FEDERAL, STATE OR LOCAL LICENSING AUTHORITY

Initial Action: - VOLUNTARY SURRENDER OF CLINICAL PRIVILEGE(S), WHILE UNDER, OR TO AVOID, INVESTIGATION RELATING TO PROFESSIONAL COMPETENCE OR CONDUCT  
Date of Action: 08/18/2021  
DCN: 7910000178124903

**TEST INSURANCE COMPANY**

**TITLE IV CLINICAL PRIVILEGES**

Basis for Action: - LICENSE REVOCATION, SUSPENSION OR OTHER DISCIPLINARY ACTION TAKEN BY A FEDERAL, STATE OR LOCAL LICENSING AUTHORITY

Initial Action: - VOLUNTARY SURRENDER OF CLINICAL PRIVILEGE(S), WHILE UNDER, OR TO AVOID, INVESTIGATION RELATING TO PROFESSIONAL COMPETENCE OR CONDUCT  
Date of Action: 08/01/2021  
DCN: 7910000178124910

Subsequent Action: - VOLUNTARY SURRENDER OF CLINICAL PRIVILEGE(S), WHILE UNDER, OR TO AVOID, INVESTIGATION RELATING TO PROFESSIONAL COMPETENCE OR CONDUCT  
Date of Action: 08/01/2021  
DCN: 7910000178124908

Subsequent Action: - VOLUNTARY LIMITATION, RESTRICTION, OR REDUCTION OF CLINICAL PRIVILEGE(S), WHILE UNDER, OR TO AVOID, INVESTIGATION RELATING TO PROFESSIONAL COMPETENCE OR CONDUCT  
Date of Action: 08/19/2021  
DCN: 7910000178124950

# Question & Answer

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## Question 1:

Under what conditions are hospitals required to query every 2 years on courtesy staff who are afforded only non-clinical professional privileges?

# Question & Answer

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## **Answer 1:**

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.

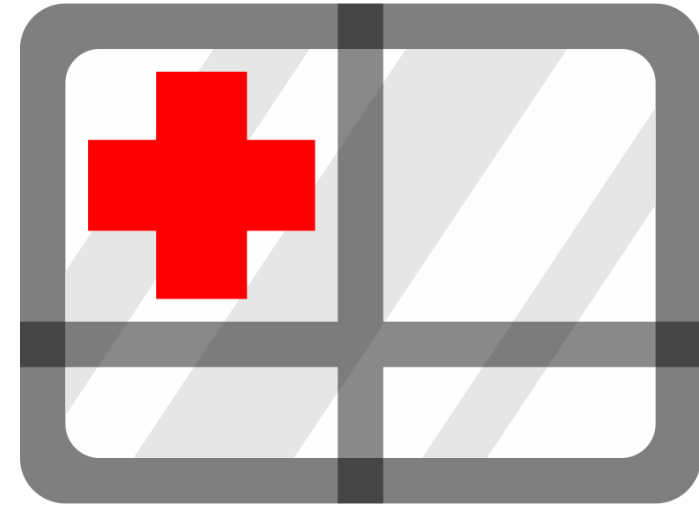
# Hospital Querying

## **Must query:**

- Health care practitioners when they apply for staff appointments (courtesy or otherwise) or clinical privileges (including temporary privileges)
- Every 2 years, on practitioners on staff or with clinical privileges

## **May query:**

- Health care practitioners with whom the hospital has entered (or may be entering) employment or affiliation relationships



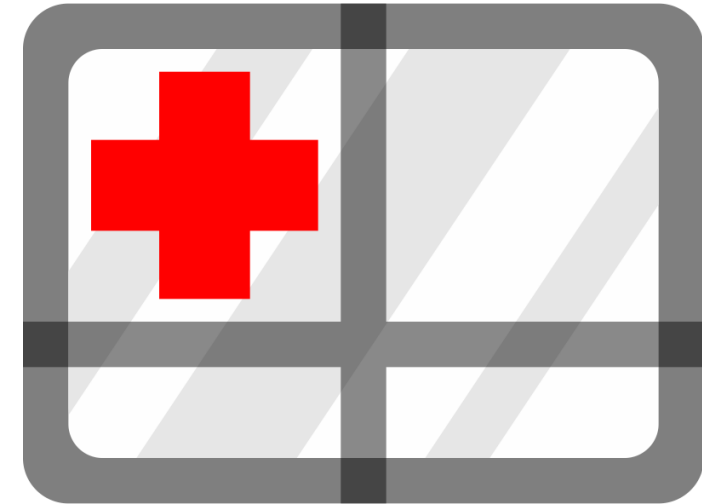
# Other Health Care Entity Querying

## Other Health Care Entity Defined:

- Must provide health care services and follow a formal peer review process.

## May query:

- When they have or may be entering into employment or affiliation relationships with health care practitioners
- When practitioners apply for clinical privileges or medical staff appointments
- When the entities engage in professional review activities.



# Credentialing

## Centralized Credentialing

- One peer review process and one decision-making body for the system
- May query the NPDB once on each practitioner, regardless of whether the practitioner provides health care services in one or multiple entities

## Decentralized Credentialing

- Each entity conducts peer review and grants facility privileges
- Each entity must query the NPDB for its practitioners and sharing is prohibited



# Question & Answer

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## Question 2:

To query the NPDB, should a Credentials Verification Organization (CVO) register as a single entity or agent?

# Question & Answer

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## Answer 2:

It depends:

- A CVO operating in an environment with a centralized peer review process and decision-making body should register with the NPDB as a single entity
- A CVO should register with the NPDB as an agent if each health care entity for which it works conducts its own credentialing and grants privileges at its own facility
  - When a CVO is registered as an agent, each facility for which it works must register separately with the NPDB as a health care entity



# Failure to Query

When a hospital fails to query as required on a practitioner, a plaintiff in a medical malpractice dispute may be allowed access to NPDB information on that practitioner for use in litigation *against the hospital*.



# Reporting



# Types of Reports

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- ▶ **Initial:** The first report of a medical malpractice payment, adverse action, or judgment or conviction submitted to and processed by the NPDB.
- ▶ **Correction:** A Correction Report corrects an error or omission in a previously submitted report by replacing it.
- ▶ **Revision-to-Action:** A Revision-to-Action Report is a report of an action that modifies an adverse action previously reported to the NPDB.
- ▶ **Void:** A Void Report, also referred to as a Void, is the withdrawal of a report in its entirety.

# Question & Answer

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## Question 3:

How soon does an adverse clinical privileges action need to be reported to the NPDB?

# Question & Answer

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## **Answer 3:**

Adverse actions must be reported to the NPDB within 30 days of the action taken.



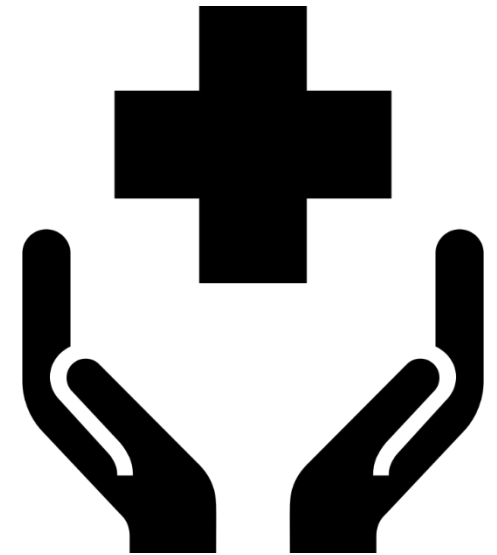
# Hospital Reporting

## **Must report on:** Physicians and dentists:

- Adverse clinical privileges actions >30 days related to professional competence or conduct
- Surrendering privileges while under investigation

## **May report on:** Other practitioners:

- Adverse clinical privileges actions >30 days related to professional competence or conduct



# Other Health Care Entity Reporting

**Other health care entities with peer review must report on:** Physicians and dentists:

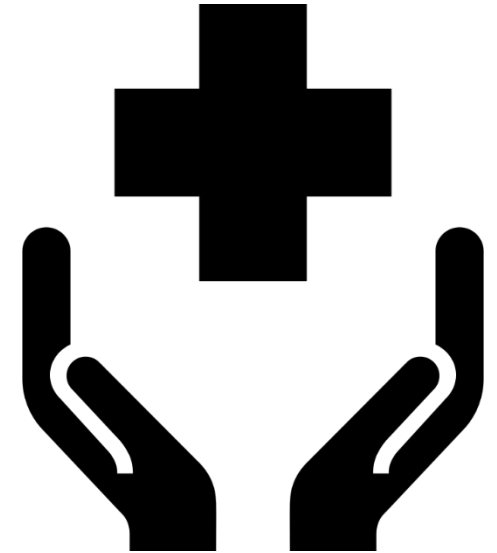
- Adverse clinical privileges actions >30 days related to professional competence or conduct
- Surrendering privileges while under investigation

**May report on:** Other practitioners:

- Adverse clinical privileges actions >30 days related to professional competence or conduct

**All health plans must report on:**

- Health care-related civil judgments in state or federal court



# Question & Answer

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## Question 4:

A physician's application for surgical privileges was denied because the physician is not board certified in the clinical specialty and subspecialty for which he applied, as required by the hospital to which he applied for surgical privileges. Must this action be reported to the NPDB?

# Question & Answer

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## Answer 4:

No. The action should not be reported to the NPDB if the physician failed to meet the hospital's established threshold criteria applied to all medical staff or clinical privilege applicants. Examples of threshold criteria may include: (1) minimum professional liability coverage, (2) board certification, (3) geographic proximity to the hospital, and (4) performance of a minimum number of procedures prescribed for a particular clinical privilege.

# Investigations

Investigations by themselves are **not** reportable, but the **result** of an investigation may be.

Definition of term is *not* controlled by entity's bylaws – rather, by NPDB's definition.

Routine review of a practitioner is *not* an investigation.

Focus must be on a particular practitioner.

Precursor to professional review action.

Ongoing until decision-making authority takes final action.



# Employment Action

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An employment action is not based on the professional competence or professional conduct of an individual health care practitioner.

It doesn't include a decision on a practitioner's privileges.

It doesn't involve a peer review process.

But it includes administrative actions, such as:

- When a board certification expires and a physician's privileges are automatically revoked
- When a physician fails to meet requisite number of training hours, resulting in privileges being suspended

# Professional Review Action

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A professional review action is taken after a peer review activity to:

- Determine whether the practitioner may have clinical privileges
- Determine the scope or condition of such privileges, or
- Change or modify such privileges

A professional review action excludes any matter that does not relate to the competence or professional conduct of a health care practitioner.

# Question & Answer

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## Question 5:

A hospital summarily suspended a physician's clinical privileges to allow sufficient time for allegations of gross negligence to be fully investigated. The day after the summary suspension was imposed, the physician requested an educational leave of absence. If the hospital grants the leave of absence, must the summary suspension be reported to the NPDB?

# Question & Answer

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## Answer 5:

If the summary suspension is not lifted within 30 days, it must be reported to the NPDB, regardless of when the leave of absence begins or if it ever occurs.

# Medical Malpractice Payment Reports (MMPR)

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To be reported to the NPDB, an MMPR must:

1. Be the result of a written complaint or claim demanding monetary payment for damages. The written complaint or claim must be based on a practitioner's provision of or failure to provide health care services.
2. Document that the practitioner was named or identified in the complaint or claim demanding monetary payment and in the settlement release or final adjudication.
3. Document that a payment was made on behalf of the practitioner named in the settlement of a claim.

If you have any questions or need clarification regarding specific situations within your agency, hospital, workplace, or other place of business, your best option is to contact our [Customer Service Center](#) via the Web or call 1-800-767-6732. You may also email [NPDB](#).



# Medical Malpractice Payment Reporting

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## **Presumption of Medical Malpractice?**

Medical malpractice claims (particularly those referred to as nuisance claims) may be settled for convenience and, as such, are not necessarily a reflection on the professional competence or professional conduct of a practitioner.

# Question & Answer

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## Question 6:

If an entity changes the penalty it imposes or reconsiders the grounds upon which it took an action, should a correction or revision be filed?

# Question & Answer

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## Answer 6:

It depends.

If the entity correctly described the penalty or grounds at the time the original report was filed, then a Revision-to-Action Report, not a Correction Report, must be filed. However, if the initial report was incorrect, then the entity would need to file a Correction Report.

# Failure to Report

A health care entity that substantially fails to report adverse clinical privileges actions can lose, for 3 years, the immunity protections for professional review actions it takes against physicians and dentists based on their professional competence and professional conduct.

State licensing boards that fail to report can have their names published and made publicly available.



# Updates



# NPDB Attestation

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**What:** Hospitals should affirm that they have submitted all required reports and queries to the NPDB within the past 2 years.

**Why:**

- To educate entities about their legal obligation to report, and
- To ensure that they have reported all legally required reports to the NPDB.

**When:** During the entity's registration renewal process, which occurs every 2 years.

# Requirements: MFA and Identity Verification

The NPDB is committed to preserving your privacy and protecting information stored in the NPDB. In compliance with federal cybersecurity requirements issued by the [National Institute of Standards and Technology](#):

- NPDB requires multi-factor authentication (MFA) for all users. MFA requires something you know (like a password) and something you have (like a cell phone) for authentication.
- Identity verification is mandatory for all users to access their NPDB accounts. Identity verification uses photos and videos to confirm you are who you say you are, keeping your information secure. All information you provide through this process is secured and encrypted.



**Need help?** Visit the NPDB Identity Verification Help Page.

<https://www.npdb.hrsa.gov/hcorg/identityVerificationHelp.jsp>

# Update – Query Merger

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On **December 4, 2026**, the NPDB will release NPDB Query, merging One-Time and Continuous Query services.

**The following enhancements will facilitate the transition:**

- Existing Continuous Query enrollments will automatically be transitioned to NPDB Query enrollments. No action is necessary.
- Organizations can export a file of their One-Time Query subjects and bulk import the file as NPDB Query enrollments.
- NPDB will identify duplicate subjects that are already enrolled.
- Organizations can select an enrollment duration for each query (one-day to 12-months).
- Organizations can resume a canceled enrollment within the enrollment period.



# Resources



# Resources

## Help When You Need It

- Website: [www.npdb.hrsa.gov](http://www.npdb.hrsa.gov)
- [Infographics](#)
- [NPDB Guidebook](#)
- [Recorded webinars](#)
- [Legislation & regulations](#)
- [Statistical data & research tools](#)
- [Codes for querying & reporting](#)
- [NPDB Multi-Factor Authentication Video](#)



**NPDB Customer Service Center**  
**800.767.6732**  
**[help@npdb.hrsa.gov](mailto:help@npdb.hrsa.gov)**

# Connect with HRSA

Learn more about our agency at:

[www.HRSA.gov](http://www.HRSA.gov)



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# Questions

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# Contact Us

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National Practitioner Data Bank

Bureau of Health Workforce (BHW)

Health Resources and Services Administration (HRSA)

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