**Survey of the Eligible Users of the National Practitioner Data Bank**

Internet-Based Survey

Conducted by

Cherry Tree Business and Statistical Consulting

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**Introduction**

The U.S. Department of Health and Human Services, Division of Practitioner Data Banks (DPDB) of the Bureau of Health Professions/Health Resources and Services Administration (HRSA) conducted the *Survey of Eligible Users of the* *National Practitioner Data Bank* (NPDB).

The population of eligible users is hospitals, managed care organizations, physician group practices, state licensing boards, medical malpractice payers, professional societies, other smaller groups of government entities at both the federal and state level, and those who self-query the NPDB. The purpose of the survey is to assess eligible users’ overall satisfaction with NPDB reporting and querying processes, to evaluate the NPDB as a source of information, and to understand the user perception of the usefulness of the NPDB information in hiring, licensing and credentialing decisions. Furthermore, this survey collects information from non-users of the NPDB to understand why they do not use the NPDB.

The survey population consists of three distinct groups: NPDB users, NPDB non-users, and those that self-query the NPDB. For the purpose of this survey, NPDB users include entities that queried the NPDB, reported to the NPDB, or both queried and reported between January 1, 2010 and December 31, 2012. This group includes entities that have completed reporting or querying actions through an authorized agent. The survey collects additional information from users that receive a matched response. A matched response occurs when an eligible user queries the NPDB; and in turn, receives a response that the subject of the query has a report in the NPDB. Collecting feedback regarding matched responses will allow the DPDB to gain a better understanding of how NPDB information is used. Feedback from entities that chose to use authorized agents will inform the DPDB regarding the reasons underlying those choices.

The survey is also administered to non-users that are eligible to use the NPDB. Eligible non-users of the NPDB are those that: (i) never registered in the NPDB; (ii) registered prior to 2010 and were not currently registered during the survey time frame and (iii) were registered but not using the NPDB directly or through an authorized agent. Previous survey response rates in 2001 were actually higher for the non-users than users (83% versus 70%, respectively); indicating that entities that were not utilizing the NPDB were willing to invest staff time to respond to the survey. The intent of the survey was to gain new feedback from non-users through an enhanced data collection instrument designed specifically for this group. Information from the non-users will assist NPDB in understanding why these entities do not use the NPDB.

The third group, those that self-query the NPDB, includes health care practitioners and individuals who are seeking licensure or employment. Self-queriers were not included in previous NPDB surveys. The majority of self-queriers are health care practitioners using the system in their own interest or at the request of a potential employer, licensing or certification authority, or insurance provider. Entities such as practitioner organizations may also self-query to verify their own NPDB status. The NPDB has seen an increase in the number of self-queries in recent years and would like the survey results to provide a better understanding of the Characteristics of these queriers.

Administering this national survey will provide the DPDB with the information necessary to improve NPDB system usability and efficiency for all NPDB users. Comparisons of this survey’s results with results of earlier surveys will inform the DPDB about changes in its user satisfaction over time.

**New Developments**

The DPDB supports initiatives to monitor the NPDB to ensure they are meeting the intent of the laws and regulations to serve its customers in the best way possible. The DPDB has commissioned a series of surveys to examine the quantity and quality of information provided, user satisfaction with the information received, the process by which users interact with the NPDB, and how the information affects decision making.

These efforts were previously established with contracts between the DPDB and the Institute for Health Services Research and Policy Studies, Northwestern University and the Health Policy Center, Survey Research Laboratory, University of Illinois Chicago, and The Gallup Organization to complete the following surveys:

• NPDB-HIPDB User Survey in 2008

• NPDB User and Non-User Survey in 2001

• NPDB User Survey in 1994

On April 5, 2013, a final rule revised existing regulations under sections 401-432 of the Health Care Quality Improvement Act of 1986 and section 1921 of the Social Security Act, governing the NPDB to incorporate statutory requirements under the Patient Protection and Affordable Care Act of 2010 (Affordable Care Act). The DHHS is also removing regulations which implemented the HIPDB. Section 6403 of the Affordable Care Act, the statutory authority for this regulatory action, was designed to eliminate duplicative data reporting and access requirements between the HIPDB (established under section 1128E of the Social Security Act) and the NPDB. It requires the Secretary to establish a transition period to transfer all data in the HIPDB to the NPDB, and once completed, to cease operations of the HIPDB. Information previously collected and disclosed to eligible parties through the HIPDB will then be collected and disclosed to eligible parties through the NPDB. This regulatory action consolidates the collection and disclosure of information from two data banks into one part of the CFR.

The NPDB, formerly two separate data banks that now have been merged into one data bank, is established and governed by revised laws and regulations as of April 5, 2013.

Since implementation of the previous survey of 2008, there have been numerous enhancements to the NPDB for which it has become necessary for DPDB to measure user satisfaction. More than a decade ago, users who queried the system waited four to six weeks to receive responses. Enhancements were made to reduce the wait time to 2 weeks. A few years later, the duration was reduced to 3 days. Continued improvement in the query and response system allowed for responses to now be received in less than an hour on average. The DPDB must consider this type of improvement along with the following list of enhancements in which to solicit feedback from the data bank users to measure changes in their satisfaction.

|  |
| --- |
| **Integrated Query and Reporting System (IQRS) 2006**  The IQRS query workflow became streamlined in recent years. Enhancements to the query process reduced the response time to less than one hour on average. An improved registration renewal process allowed entities and agents to more easily update their registrations.  **Continuous Query, formerly Pro-Active Disclosure Service (PDS) in 2008**  Entities were allowed to renew their registration for an automatic and continuous querying of enrolled practitioners (a 97% renewal rate). Continuous Query is for querying on practitioners, not health care organizations.  **Querying and Reporting XML Service (QRXS)**  The interface control document transfer program phased out for querying and reporting XML Service in 2009. The QRXS used an industry standard XML format that improved the exchange of data between the user and the data banks.  **Report forwarding**  State boards are able to receive medical malpractice, clinical privilege, and professional society actions that are forwarded electronically by participating reporting entities.  **Information Technology Initiatives 2012**  The DPDB implemented several IT initiatives to enhance the timeliness and quality of the information provided to reduce duplication, to provide work queues, and to improve service delivery.  **HIPDB Merger with the NPDB**  In May 2013, the two databanks merged reducing the redundancy of the data bank contents. The merge may effect cost, utilization, and change perceptions of eligible users. |
|  |

1. **Respondent Universe and Sampling Methods**

The survey is administered to eligible users of the National Practitioner Data Bank (NPDB). The respondent universe is comprised of both users and non-users that are eligible to report to the NPDB, query the NPDB, or both between January 1, 2010 and December 31, 2012. Respondents are hospitals, managed care organizations, physician group practices, state licensing boards, medical malpractice payers, professional societies, other smaller groups of government entities at both the federal and state level, and those who self-query the NPDB.

The NPDB receives and discloses reports on medical malpractice payments made on behalf of health care practitioners; as well as certain adverse actions taken against health care practitioners, health care entities, providers and suppliers. Depending on their provisional authority requirements, entities that meet the NPDB's definition of an "eligible entity" may use the NPDB to query, or to submit certain reports on health care practitioners, health care entities, providers, and suppliers. Some entities both report to and query the NPDB.

If an entity uses an authorized agent to perform NPDB reporting or querying activities on their behalf, for the purposes of this survey, both the entity and the agent will be considered registered users of the NPDB. Reporters are required to report certain information related to the professional competence and conduct of physicians, dentists other health care practitioners. Queriers are authorized to receive information on health care practitioners, health care entities, providers, or suppliers to assist in making employment, credentialing, certification, and licensing decisions.

The NPDB administrative data provides a census of currently registered NPDB users as well as previously registered users who were not re-registered for the specified time frame. A stratified sample design is used to capture non-registered non-users and self-queriers.

1. ***NPDB Registered Users***

The NPDB registered users are defined as eligible users who were registered and queried, reported to, or accessed the NPDB using an authorized agent during the defined time frame. This group of respondents includes entities that submitted reports, performed traditional queries (a one-time query), enrolled in continuous query, and those that utilized an authorized agent to query or report on their behalf (see Exhibit 1). The respondent is defined as the entity. For each respondent in this group, the entity’s most recent registered user will be contacted to represent the entity.

1. ***NPDB Non-Users***

The NPDB non-users are defined as entities that were eligible to query or report to the NPDB and did not do so during the defined time frame. The non-user group includes previously registered users who were not re-registered to utilize the NPDB, eligible users who never registered to utilize the NPDB, and registered users who did not submit a query or report during the specified time period. Thus, if an entity was a registered user during the time frame and did not query, report, or utilize an authorized agent to query or report on their behalf, the entity is a non-user.

1. ***NPDB Self-Queriers***

The NPDB self-queriers are health care practitioners and practitioner organizations that submitted a query during the specified time frame to either verify their own status or to provide a copy of the results to a third party. Self-queriers were not included in previous NPDB surveys. While the majority of self-queriers are health care practitioners and individuals who sought licensure or employment, this group of respondents also includes entities known as practitioner organizations. There are two types of practitioner organizations: medical service providers and medical suppliers.

**Sampling Methodology**

The NPDB administrative data provides the basis for the sampling frame used to implement the sampling methodology for all users identified as having ever registered in the NPDB. Non-users who never registered to utilize the NPDB will not be found in the NPDB administrative data. For this group of non-users, external sources of information will be used to build a stratified sampling frame for each identified subgroup. Self-queriers do not register; but, they are required to provide information to verify their identity when they submit a query. For the self-queriers, NPDB administrative data will provide the basis for the sample.

The NPDB administrative data contains the population of registered entities. Therefore a census survey will be conducted for each type of registered entity. A stratified sample will be applied to the remaining eligible users. For strata where the population size is sufficient, a stratified random sample that allows a +3 percent margin of error with 95% confidence will be employed allowing analysis of user perspectives across disparate groups.

1. ***NPDB Registered Users.*** Administrative data will be used to construct a census of eligible entities that are responsible for meeting specific querying or reporting requirements, sometimes both. Eligible entities that use an authorized agent to fulfill their reporting or querying requirements will be included in this census sample. The entity user survey component is provided in Appendix B.

* A census of entities nationwide that submitted a report will receive the user survey component by contacting the most recent registered user who completed a NPDB report.
* A census of entities nationwide that submitted a query will receive the user survey component by contacting the most recent registered user who completed a NPDB query. As described in Part A, queries may result in a “matched response” that can be the result of a one-time query or notification through continuous query.

1. ***NPDB Non-Users.*** Registered non-user sub-groups will be measured using administrative data to develop the census samples. A stratified sample of non-users who never registered to utilize the NPDB will be applied for a maximum sample size of 2,000. The entity non-user survey component is provided in Appendix B.

* A census sample of registered users that do not utilize an authorized agent to query or report on their behalf, and the entity themselves have not queried or reported in the defined time frame, will be asked to complete the non-user survey component.
* A stratified sample of previous users, those whose registration expired previous to and were not re-renewed during the defined time frame, will be asked to complete the non-user survey component.
* A stratified sample of users who never registered to access to NPDB, and who are known to be eligible to report to or query the NPDB will be asked to complete the non-user survey component.

1. ***NPDB Self-Queriers.*** NPDB administrative data will be used to develop a sample, stratified by State, of health care practitioners and practitioner organizations that submitted a query during the specified time frame to either verify their own status or to provide a copy of the results to a third party. The self-querier survey component is provided in Appendix C.

* A sample of approximately 150 practitioners nationwide that *received a matched response* will receive the self-query survey component.
* A sample of approximately 1,350 practitioners nationwide that *did not receive a matched response or did not complete the process* will receive the self-query survey component.

Based on this sampling methodology, the estimated initial sample size and the expected number of completed questionnaires within the NPDB population of eligible users are provided in Table 1. Based on the 2001 survey and a set of enhancements discussed later, an expected response rate of 80 percent is anticipated.

Table 1. Estimated Initial Sample Size and Expected Number of Completed Surveys for the Eligible User Survey

\*\*To be replaced with actual figures instead of estimates\*\*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Respondents Type** | **Respondents Description** | **Initial Sample Size** | **Estimated Responses (80%)** | **Hours per Response** | **Total Burden (Hours)** |
| NPDB Users | Reporters Queriers (Non-Matched Responses) | 14,790 | 11,832 | .333 (20 min) | 3,940 |
| Queriers (Matched Responses) | 2,210 | 1,768 | .383 (23 min) | 677 |
| Non-Users | Ever registered | 1,500 | 1,200 | .133 (8 min) | 160 |
| Never-registered | 500 | 400 | .10 (6min) | 40 |
| NPDB Self Queriers | Non-Matched Responses | 1,350 | 1,080 | .10 (6 min) | 108 |
| Matched | 150 | 120 | .216 (8 min) | 26 |
| Total |  | 20,500 | 16,400 | ----------------- | 4,951 |

**Data Identification Numbers:**

Entity Survey Component

Identification numbers and locations are as follows:

N = \_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_maximum number of columns per respondent

Self-Query Survey Component

Identification numbers and locations are as follows:

N = \_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_maximum number of columns per respondent

**Index to the Data Set: Entity Survey Component**

|  |  |  |  |
| --- | --- | --- | --- |
| Column Number | Variable Name | Question Number | Type |
| 1 | ID | Q1 | All |
|  | REGION | Q2 | All |
|  | ORG\_TYP | Q3 | All |
|  | NUM\_BEDS | Q4 | Hospital |
|  | NUM\_PATIENTS | Q5 | Hospital |
|  | PRCTNRS\_FT | Q6 | Hospital |
|  | PRCTNRS\_PT | Q7 | Hospital |
|  | PRCTNRS\_LT | Q8 | Hospital |
|  | HIRE\_GRANT | Q9 | Hospital |
|  | OFTEN\_REVIEW | Q10 | Hospital |
|  | SOURCE\_NPDB\_IND | Q11A | Hospital |
|  | SOURCE\_ABMS\_IND | Q11B | Hospital |
|  | SOURCE\_AMA\_IND | Q11C | Hospital |
|  | SOURCE\_CMS\_IND | Q11D | Hospital |
|  | SOURCE\_EH\_IND | Q11E | Hospital |
|  | SOURCE\_ER\_IND | Q11F | Hospital |
|  | SOURCE\_FSMB\_IND | Q11G | Hospital |
|  | SOURCE\_HIPDB\_IND | Q11H | Hospital |
|  | SOURCE\_HSPTL\_IND | Q11I | Hospital |
|  | SOURCE\_LAW\_IND | Q11J | Hospital |
|  | SOURCE\_MMP\_IND | Q11K | Hospital |
|  | SOURCE\_PAHP\_IND | Q11L | Hospital |
|  | SOURCE\_SCHOOL\_IND | Q11M | Hospital |
|  | SOURCE\_SQ\_IND | Q11N | Hospital |
|  | SOURCE\_SLB\_IND | Q11O | Hospital |
|  | SOURCE\_OTHR\_IND | Q11P | Hospital |
|  | NUM\_ACTIONS | Q12 | Hospital |
|  | ACTION\_TERM\_IND | Q13A | Hospital |
|  | ACTION\_RSTRCT\_IND | Q13B | Hospital |
|  | ACTION\_PROB\_IND | Q13C | Hospital |
|  | ACTION\_SUSP\_IND | Q13D | Hospital |
|  | ACTION\_LEGAL\_IND | Q13E | Hospital |
|  | ACTION\_DOC\_IND | Q13F | Hospital |
|  | ACTION\_COUNSEL\_IND | Q13G | Hospital |
|  | ACTION\_OTHR | Q13H | Hospital |
|  | RMP | Q14 | Hospital |
|  | MM\_INSURED | Q15 | Hospital |
|  | ACCREDITED | Q16 | Hospital |
|  | ACRDT\_FED\_IND | Q17A | Hospital |
|  | ACRDT\_ST\_IND | Q17B | Hospital |
|  | ACRDT\_AAAHC\_IND | Q17C | Hospital |
|  | ACRDT\_AADGP\_IND | Q17D | Hospital |
| Column Number | Variable Name | Question Number | Hospital |
|  | ACRDT\_ACHC\_IND | Q17E | Hospital |
|  | ACRDT\_AAASF\_IND | Q17F | Hospital |
|  | ACRDT\_AOA\_IND | Q17G | Hospital |
|  | ACRDT\_CAP\_IND | Q17H | Hospital |
|  | ACRDT\_CABC\_IND | Q17I | Hospital |
|  | ACRDT\_COLA\_IND | Q17J | Hospital |
|  | ACRDT\_CHAP\_IND | Q17K | Hospital |
|  | ACRDT\_DNVHC\_IND | Q17L | Hospital |
|  | ACRDT\_HQAA\_IND | Q17M | Hospital |
|  | ACRDT\_IAC\_IND | Q17N | Hospital |
|  | ACRDT\_JC\_IND | Q17O | Hospital |
|  | ACRDT\_NAPBC\_IND | Q17P | Hospital |
|  | ACRDT\_NIHAO\_IND | Q17Q | Hospital |
|  | ACRDT\_NCQA\_IND | Q17R | Hospital |
|  | ACRDT\_URAC\_IND | Q17S | Hospital |
|  | ACRDT\_OTHR\_IND | Q17T | Hospital |
|  | ACRDT\_PLAN | Q18 | Hospital |
|  | NUM\_PATIENTS\_MCO | Q19 | MCO |
|  | PRCTNRS\_FT\_MCO | Q20 | MCO |
|  | PRCTNRS\_PT\_MCO | Q21 | MCO |
|  | PRCTNRS\_LT\_MCO | Q22 | MCO |
|  | HIRE\_GRANT\_MCO | Q23 | MCO |
|  | OFTEN\_REVIEW\_MCO | Q24 | MCO |
|  | SOURCE\_NPDB\_ MCO\_IND | Q25A | MCO |
|  | SOURCE\_ABMS\_ MCO\_IND | Q25B | MCO |
|  | SOURCE\_AMA\_ MCO\_IND | Q25C | MCO |
|  | SOURCE\_CMS\_ MCO\_IND | Q25D | MCO |
|  | SOURCE\_EH\_ MCO\_IND | Q25E | MCO |
|  | SOURCE\_ER\_ MCO\_IND | Q25F | MCO |
|  | SOURCE\_FSMB\_ MCO\_IND | Q25G | MCO |
|  | SOURCE\_HIPDB\_ MCO\_IND | Q25H | MCO |
|  | SOURCE\_HSPTL\_ MCO\_IND | Q25I | MCO |
|  | SOURCE\_LAW\_ MCO\_IND | Q25J | MCO |
|  | SOURCE\_MMP\_ MCO\_IND | Q25K | MCO |
|  | SOURCE\_PAHP\_ MCO\_IND | Q25L | MCO |
|  | SOURCE\_SCHOOL\_ MCO\_IND | Q25M | MCO |
|  | SOURCE\_SQ\_ MCO\_IND | Q25N | MCO |
|  | SOURCE\_SLB\_ MCO\_IND | Q25O | MCO |
|  | SOURCE\_OTHR\_ MCO\_IND | Q25P | MCO |
|  | NUM\_ACTIONS MCO\_ | Q26 | MCO |
|  | ACTION\_TERM\_MCO\_IND | Q27A | MCO |
|  | ACTION\_RSTRCT\_ MCO\_IND | Q27B | MCO |
|  | ACTION\_PROB\_ MCO\_IND | Q27C | MCO |
|  | ACTION\_SUSP\_ MCO\_IND | Q27D | MCO |
|  | ACTION\_LEGAL\_ MCO\_IND | Q27E | MCO |
|  | ACTION\_DOC\_ MCO\_IND | Q27F | MCO |
|  | ACTION\_COUNSEL\_ MCO\_IND | Q27G | MCO |
|  | ACTION\_OTHR\_MCO | Q27H | MCO |
|  | RMP\_MCO | Q28 | MCO |
|  | MM\_INSURED\_MCO | Q29 | MCO |
|  | ACCREDITED \_MCO | Q30 | MCO |
|  | ACRDT\_FED\_ MCO\_IND | Q31A | MCO |
|  | ACRDT\_ST\_ MCO\_IND | Q31B | MCO |
|  | ACRDT\_AAAHC\_ MCO\_IND | Q31C | MCO |
|  | ACRDT\_AADGP\_ MCO\_IND | Q31D | MCO |
|  | ACRDT\_ACHC\_ MCO\_IND | Q31E | MCO |
|  | ACRDT\_AAASF\_ MCO\_IND | Q31F | MCO |
|  | ACRDT\_AOA\_ MCO\_IND | Q31G | MCO |
|  | ACRDT\_CAP\_ MCO\_IND | Q31H | MCO |
|  | ACRDT\_CABC\_ MCO\_IND | Q31I | MCO |
|  | ACRDT\_COLA\_ MCO\_IND | Q31J | MCO |
|  | ACRDT\_CHAP\_ MCO\_IND | Q31K | MCO |
|  | ACRDT\_DNVHC\_ MCO\_IND | Q31L | MCO |
|  | ACRDT\_HQAA\_ MCO\_IND | Q31M | MCO |
|  | ACRDT\_IAC\_ MCO\_IND | Q31N | MCO |
|  | ACRDT\_JC\_ MCO\_IND | Q31O | MCO |
|  | ACRDT\_NAPBC\_ MCO\_IND | Q31P | MCO |
|  | ACRDT\_NIHAO\_ MCO\_IND | Q31Q | MCO |
|  | ACRDT\_NCQA\_ MCO\_IND | Q31R | MCO |
|  | ACRDT\_URAC\_ MCO\_IND | Q31S | MCO |
|  | ACRDT\_OTHR\_MCO\_IND | Q31T | MCO |
|  | ACRDT\_PLAN\_MCO | Q32 | MCO |
|  |  |  |  |
|  | List in development | Q33-129 to be provided in final draft |  |
|  |  |  |  |

**Entity Survey Component**

**VAR: ID**

Q1. Please enter the code from your invitation letter.

* Numeric identification number contained in the invitation letter

**VAR: REGION**

Format: Character

Width: 2

Q2. In what region of the country is your organization located?

|  |  |
| --- | --- |
| Response | Region Description |
| 01 | Region 1: Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, or Vermont |
| 02 | Region 2: New Jersey, New York, Puerto Rico, or Virgin Islands |
| 03 | Region 3: Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, or West Virginia |
| 04 | Region 4: Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, or Tennessee |
| 05 | Region 5: Illinois, Indiana, Michigan, Minnesota, Ohio, or Wisconsin |
| 06 | Region 6: Arkansas, Louisiana, New Mexico, Oklahoma, or Texas |
| 07 | Region 7: Iowa, Kansas, Missouri, or Nebraska |
| 08 | Region 8: Colorado, Montana, North Dakota, South Dakota, Utah, or Wyoming |
| 09 | Region 9: Arizona, California, Hawaii, Nevada, American Samoa, Guam, Northern Mariana Islands, or Trust Territory of the Pacific Islands |
| 10 | Region 10: Alaska, Idaho, Oregon, or Washington |
| 99 | Not Ascertained |

**VAR: ORG\_TYPE**

Format: Character

Width: 2

Q3. Which of the following best describes your organization?

|  |  |
| --- | --- |
| Response | Organization Type |
| 01 | Federal-Owned Hospital |
| 02 | State-Owned Hospital |
| 03 | County-Owned Hospital |
| 04 | Community Hospital |
| 05 | Other Hospital |
| 06 | Managed Care Organization |
| 07 | Group Practice |
| 08 | Clinic or Urgent Care Facility |
| 09 | Medical Malpractice Payer |
| 10 | Professional Society |
| 11 | Board of Medical/Dental Examiners |
| 12 | State Healthcare Practitioner Licensing |
| 13 | State Certification Authority |
| 14 | Federal or State Prosecutor (including Attorney General) |
| 15 | Other State Agency |
| 16 | Federal Agency |
| 17 | Other |

**APPLIED SKIP LOGIC**

* If Item 3 is any “Hospital” then go to Item 4
* If Item 3 is “Managed Care Organization” or “Group Practice” or “Clinic or Urgent Care Facility” then go to Item 19
* If Item 3 is “Medical Malpractice Payer” then go to Item 33
* If Item 3 is “Professional Society” then go to Item 34
* If Item 3 is “Board of Medical/Dental Examiners” or “State Healthcare Practitioner Licensing” then go to Item 43
* If Item 3 is “State Certification Authority” then go to Item 49
* If Item 3 is “Federal or State Prosecutor” then go to Item 56
* Otherwise go to Item 60

Skip logic: The following items (Q4-Q18) are related to Hospitals only.

**VAR: NUM\_BEDS**

Format: Numeric

Width: 6

Q4. For the full calendar year of 2012, how many beds were in your hospital?

* Open Numeric Box

**VAR: NUM\_PATIENTS**

Format: Numeric

Width: 6

Q5. For the full calendar year of 2012, approximately how many patients did your hospital serve?

* Open Numeric Box

**VAR: PRCTNRS\_FT**

Format: Numeric

Width: 6

Q6. How many full-time health care practitioners does your hospital employ?

* Open Numeric Box

**VAR: PRCTNRS\_PT**

Format: Numeric

Width: 6

Q7. How many part-time health care practitioners does your hospital employ?

* Open Numeric Box

**VAR: PRCTNRS\_LT**

Format: Numeric

Width: 6

Q8. How many health care practitioners does your hospital employ specifically as locum tenens?

* Open Numeric Box

**VAR: HIRE\_GRANT**

Format: Numeric

Width: 6

Q9. How many employees in your hospital are responsible for hiring and granting privileges to practitioners?

* Open Numeric Box

**VAR: OFTEN\_REVIEW**

Format: Character

Width: 1

Q10. How often does your hospital review the records of practitioners employed on staff or that have privileges at your facility?

|  |  |
| --- | --- |
| Response | Time Between Reviews |
| 0 | Once every 6 months |
| 1 | Once per year |
| 2 | Once every 2 years |
| 3 | Once every 3 years |
| 4 | Once every 4 or more years |
| 8 | Not Applicable |
| 9 | Not Ascertained |

**VAR: SOURCE\_NPDB\_IND**

Format: Numeric Indicator

Width: 1

Q11A. Which of the following sources does your hospital utilize for hiring or granting privileges to a practitioner? *(Please select all that apply.)*

1. Not Selected
2. National Practitioner Data Bank

**VAR: SOURCE\_ABMS\_IND**

Format: Numeric Indicator

Width: 1

Q11B. Which of the following sources does your hospital utilize for hiring or granting privileges to a practitioner? *(Please select all that apply.)*

0 Not Selected

1 American Board of Medical Specialties

**VAR: SOURCE\_AMA\_IND**

Format: Numeric Indicator

Width: 1

Q11C. Which of the following sources does your hospital utilize for hiring or granting privileges to a practitioner? *(Please select all that apply.)*

0 Not Selected

1 American Medical Association

**VAR: SOURCE\_CMS\_IND**

Format: Numeric Indicator

Width: 1

Q11D. Which of the following sources does your hospital utilize for hiring or granting privileges to a practitioner? *(Please select all that apply.)*

0 Not Selected

1 Center for Medicare and Medicaid Services

**VAR: SOURCE\_EH\_IND**

Format: Numeric Indicator

Width: 1

Q11E. Which of the following sources does your hospital utilize for hiring or granting privileges to a practitioner? *(Please select all that apply.)*

0 Not Selected

1 Employment History

**VAR: SOURCE\_ER\_IND**

Format: Numeric Indicator

Width: 1

Q11F. Which of the following sources does your hospital utilize for hiring or granting privileges to a practitioner? *(Please select all that apply.)*

0 Not Selected

1 Employment References

**VAR: SOURCE\_FSMB\_IND**

Format: Numeric Indicator

Width: 1

Q11G. Which of the following sources does your hospital utilize for hiring or granting privileges to a practitioner? *(Please select all that apply.)*

0 Not Selected

1 Federation of State Medical Boards

**VAR: SOURCE\_HIPDB\_IND**

Format: Numeric Indicator

Width: 1

Q11H. Which of the following sources does your hospital utilize for hiring or granting privileges to a practitioner? *(Please select all that apply.)*

0 Not Selected

1 Healthcare Integrity and Protection Data Bank

**VAR: SOURCE\_HSPTL\_IND**

Format: Numeric Indicator

Width: 1

Q11I. Which of the following sources does your hospital utilize for hiring or granting privileges to a practitioner? *(Please select all that apply.)*

0 Not Selected

1 Hospitals

**VAR: SOURCE\_LAW\_IND**

Format: Numeric Indicator

Width: 1

Q11J. Which of the following sources does your hospital utilize for hiring or granting privileges to a practitioner? *(Please select all that apply.)*

0 Not Selected

1 Law Enforcement (including criminal background checks)

**VAR: SOURCE\_MMP\_IND**

Format: Numeric Indicator

Width: 1

Q11K. Which of the following sources does your hospital utilize for hiring or granting privileges to a practitioner? *(Please select all that apply.)*

0 Not Selected

1 Medical Malpractice Insurance

**VAR: SOURCE\_PAHP\_IND**

Format: Numeric Indicator

Width: 1

Q11L. Which of the following sources does your hospital utilize for hiring or granting privileges to a practitioner? *(Please select all that apply.)*

0 Not Selected

1 Practitioners Affiliated Health Plans

**VAR: SOURCE\_SCHOOL\_IND**

Format: Numeric Indicator

Width: 1

Q11M. Which of the following sources does your hospital utilize for hiring or granting privileges to a practitioner? *(Please select all that apply.)*

0 Not Selected

1 Medical/Dental Schools

**VAR: SOURCE\_SQ\_IND**

Format: Numeric Indicator

Width: 1

Q11N. Which of the following sources does your hospital utilize for hiring or granting privileges to a practitioner? *(Please select all that apply.)*

0 Not Selected

1 Self-Queries

**VAR: SOURCE\_SLB\_IND**

Format: Numeric Indicator

Width: 1

Q11O. Which of the following sources does your hospital utilize for hiring or granting privileges to a practitioner? *(Please select all that apply.)*

0 Not Selected

1 State Licensing Boards

**VAR: SOURCE\_OTHR\_IND**

Format: Numeric Indicator

Width: 1

Q11P. Which of the following sources does your hospital utilize for hiring or granting privileges to a practitioner? *(Please select all that apply.)*

0 Not Selected

1 Other (Please Explain)

**VAR: NUM\_ACTIONS**

Format: Character

Width: 1

Q12. For the full calendar year of 2012, how many times has your hospital taken reportable disciplinary actions against practitioners for misconduct or incompetence?

|  |  |
| --- | --- |
| Response | Number of Reportable Actions |
| 0 | None |
| 1 | At least once but less than 5 times |
| 2 | At least 5 times but less than 10 times |
| 3 | More than 10 times |
| 9 | Not Ascertained |

**VAR: ACTION\_TERM\_IND**

Format: Numeric Indicator

Width: 1

Q13A. What types of actions does your hospital take against practitioners for misconduct or incompetence?

0 Not Selected

1 Employment or Contract Termination

**VAR: ACTION\_RSTRCT\_IND**

Format: Numeric Indicator

Width: 1

Q13B. What types of actions does your hospital take against practitioners for misconduct or incompetence?

0 Not Selected

1 Restriction of Clinical Privileges

**VAR: ACTION\_PROB\_IND**

Format: Numeric Indicator

Width: 1

Q13C. What types of actions does your hospital take against practitioners for misconduct or incompetence?

0 Not Selected

1 Probation

**VAR: ACTION\_SUSP\_IND**

Format: Numeric Indicator

Width: 1

Q13D. What types of actions does your hospital take against practitioners for misconduct or incompetence?

0 Not Selected

1 Suspension

**VAR: ACTION\_LEGAL\_IND**

Format: Numeric Indicator

Width: 1

Q13E. What types of actions does your hospital take against practitioners for misconduct or incompetence?

0 Not Selected

1 Legal Actions

**VAR: ACTION\_DOC\_IND**

Format: Numeric Indicator

Width: 1

Q13F. What types of actions does your hospital take against practitioners for misconduct or incompetence?

0 Not Selected

1 Document the Incident for further Review

**VAR: ACTION\_COUNSEL\_IND**

Format: Numeric Indicator

Width: 1

Q13G. What types of actions does your hospital take against practitioners for misconduct or incompetence?

0 Not Selected

1 Counseling

**VAR: ACTION\_OTHR**

Format: Character

Width: 1

Q13H. What types of actions does your hospital take against practitioners for misconduct or incompetence?

|  |  |
| --- | --- |
| Response | Other Type of Actions |
| 0 | No action |
| 1 | Unknown |
| 2 | Not applicable |
| 3 | Other |
| 9 | Not Ascertained |

**VAR: RMP**

Format: Character

Width: 1

Q14. Does your hospital have a risk management program aimed at health care practitioners that aids in the prevention of medical malpractice related issues?

|  |  |
| --- | --- |
| Response | Risk Management Program |
| 0 | No |
| 1 | Yes |
| 2 | Other |
| 9 | Not Ascertained |

**VAR: MM\_INSURED**

Format: Character

Width: 1

Q15. How is your hospital insured for medical malpractice?

|  |  |
| --- | --- |
| Response | Insured |
| 0 | Self-Insured |
| 1 | Third-Party Insurance |
| 2 | Uninsured |
| 3 | Other |
| 9 | Not Ascertained |

**VAR: ACCREDITED**

Format: Character

Width: 1

Q16. Is your hospital accredited by a national accreditation organization?

|  |  |
| --- | --- |
| Response | Accredited Hospital |
| 0 | No |
| 1 | Yes |
| 2 | Not Applicable |
| 9 | Not Ascertained |

**APPLIED SKIP LOGIC**

* If Item 16 is “Yes” then go to Item 17
* Otherwise go to Item 18

**VAR: ACRDT\_FED\_IND**

Format: Numeric Indicator

Width: 1

Q17A. Which of the following national accreditation organizations is your hospital accredited by? *(Please select all that apply.)*

0 Not Selected

1 Federal Government

**VAR: ACRDT\_ST\_IND**

Format: Numeric Indicator

Width: 1

Q17B. Which of the following national accreditation organizations is your hospital accredited by? *(Please select all that apply.)*

0 Not Selected

1 State Government

**VAR: ACRDT\_AAAHC\_IND**

Format: Numeric Indicator

Width: 1

Q17C. Which of the following national accreditation organizations is your hospital accredited by? *(Please select all that apply.)*

0 Not Selected

1 Accreditation Association for Ambulatory Health Care

**VAR: ACRDT\_AADGP\_IND**

Format: Numeric Indicator

Width: 1

Q17D. Which of the following national accreditation organizations is your hospital accredited by? *(Please select all that apply.)*

0 Not Selected

1 American Academy of Dental Group Practice

**VAR: ACRDT\_ACHC\_IND**

Format: Numeric Indicator

Width: 1

Q17E. Which of the following national accreditation organizations is your hospital accredited by? *(Please select all that apply.)*

0 Not Selected

1 Accreditation Commission for Health Care, Inc.

**VAR: ACRDT\_AAASF\_IND**

Format: Numeric Indicator

Width: 1

Q17F. Which of the following national accreditation organizations is your hospital accredited by? *(Please select all that apply.)*

0 Not Selected

1 American Association for Accreditation of Ambulatory Surgery Facilities

**VAR: ACRDT\_AOA\_IND**

Format: Numeric Indicator

Width: 1

Q17G. Which of the following national accreditation organizations is your hospital accredited by? *(Please select all that apply.)*

0 Not Selected

1 American Osteopathic Association/Healthcare Facilities Accreditation Program

**VAR: ACRDT\_CAP\_IND**

Format: Numeric Indicator

Width: 1

Q17H. Which of the following national accreditation organizations is your hospital accredited by? *(Please select all that apply.)*

0 Not Selected

1 College of American Pathologists

**VAR: ACRDT\_CABC\_IND**

Format: Numeric Indicator

Width: 1

Q17I. Which of the following national accreditation organizations is your hospital accredited by? *(Please select all that apply.)*

0 Not Selected

1 Commission for Accreditation of Birth Centers

**VAR: ACRDT\_COLA\_IND**

Format: Numeric Indicator

Width: 1

Q17J. Which of the following national accreditation organizations is your hospital accredited by? *(Please select all that apply.)*

0 Not Selected

1 Commission on Laboratory Accreditation

**VAR: ACRDT\_CHAP\_IND**

Format: Numeric Indicator

Width: 1

Q17K. Which of the following national accreditation organizations is your hospital accredited by? *(Please select all that apply.)*

0 Not Selected

1 Community Health Accreditation Program

**VAR: ACRDT\_DNVHC\_IND**

Format: Numeric Indicator

Width: 1

Q17L. Which of the following national accreditation organizations is your hospital accredited by? *(Please select all that apply.)*

0 Not Selected

1 DNV Healthcare

**VAR: ACRDT\_HQAA\_IND**

Format: Numeric Indicator

Width: 1

Q17M. Which of the following national accreditation organizations is your hospital accredited by? *(Please select all that apply.)*

0 Not Selected

1 Healthcare Quality Association on Accreditation

**VAR: ACRDT\_IAC\_IND**

Format: Numeric Indicator

Width: 1

Q17N. Which of the following national accreditation organizations is your hospital accredited by? *(Please select all that apply.)*

0 Not Selected

1 Intersocietal Accreditation Commission

**VAR: ACRDT\_JC\_IND**

Format: Numeric Indicator

Width: 1

Q17O. Which of the following national accreditation organizations is your hospital accredited by? *(Please select all that apply.)*

0 Not Selected

1 Joint Commission

**VAR: ACRDT\_NAPBC\_IND**

Format: Numeric Indicator

Width: 1

Q17P. Which of the following national accreditation organizations is your hospital accredited by? *(Please select all that apply.)*

0 Not Selected

1 National Accreditation Program for Breast Centers / American College of Surgeons

**VAR: ACRDT\_NIHAO\_IND**

Format: Numeric Indicator

Width: 1

Q17Q. Which of the following national accreditation organizations is your hospital accredited by? *(Please select all that apply.)*

0 Not Selected

1 National Integrated Accreditation for Healthcare Organizations

**VAR: ACRDT\_NCQA\_IND**

Format: Numeric Indicator

Width: 1

Q17R. Which of the following national accreditation organizations is your hospital accredited by? *(Please select all that apply.)*

0 Not Selected

1 National Committee for Quality Assurance

**VAR: ACRDT\_URAC\_IND**

Format: Numeric Indicator

Width: 1

Q17S. Which of the following national accreditation organizations is your hospital accredited by? *(Please select all that apply.)*

0 Not Selected

1 Utilization Review Accreditation Commission

**VAR: ACRDT\_OTHR\_IND**

Format: Numeric Indicator

Width: 1

Q17T. Which of the following national accreditation organizations is your hospital accredited by? *(Please select all that apply.)*

0 Not Selected

1 Other

**APPLIED SKIP LOGIC**

* All responses in Item 17 go to Item 61

**VAR: ACRDT\_PLAN**

Format: Character

Width: 1

Q18. Does your hospital plan to obtain accreditation from a national accreditation organization?

|  |  |
| --- | --- |
| Response | Accreditation |
| 0 | No |
| 1 | Yes |
| 2 | Not Applicable |
| 9 | Not Ascertained |

**APPLIED SKIP LOGIC**

* All responses in Item 18 go to Item 61

Skip logic: The following items (Q19-32) are related to Managed Care Organization, Group Practice, Clinic, and Urgent Care Facility.

**VAR: NUM\_PATIENTS\_MCO**

Format: Numeric

Width: 6

Q19. For the full calendar year of 2012, approximately how many patients did your organization serve?

* Open Numeric Box

**VAR: PRCTNRS\_FT\_MCO**

Format: Numeric

Width: 6

Q20. How many full-time health care practitioners does your organization employ?

* Open Numeric Box

**VAR: PRCTNRS\_PT\_MCO**

Format: Numeric

Width: 6

Q21. How many part-time health care practitioners does your organization employ?

* Open Numeric Box

**VAR: PRCTNRS\_LT\_MCO**

Format: Numeric

Width: 6

Q22. How many health care practitioners does your organization employ specifically as locum tenens?

* Open Numeric Box

**VAR: HIRE\_GRANT\_MCO**

Format: Numeric

Width: 6

Q23. How many employees in your organization are responsible for hiring and granting privileges to practitioners?

* Open Numeric Box

**VAR: OFTEN\_REVIEW\_MCO**

Format: Character

Width: 1

Q24. How often does your organization review the records of practitioners employed on staff or that have privileges at your facility?

|  |  |
| --- | --- |
| Response | Time Between Reviews |
| 0 | Once every 6 months |
| 1 | Once per year |
| 2 | Once every 2 years |
| 3 | Once every 3 years |
| 4 | Once every 4 or more years |
| 8 | Not Applicable |
| 9 | Not Ascertained |

**VAR: SOURCE\_NPDB\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q25A. Which of the following sources does your organization utilize for hiring or granting privileges to a practitioner?

1. Not Selected
2. National Practitioner Data Bank

**VAR: SOURCE\_ABMS\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q25B. Which of the following sources does your organization utilize for hiring or granting privileges to a practitioner?

0 Not Selected

1 American Board of Medical Specialties

**VAR: SOURCE\_AMA\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q25C. Which of the following sources does your organization utilize for hiring or granting privileges to a practitioner?

0 Not Selected

1 American Medical Association

**VAR: SOURCE\_CMS\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q25D. Which of the following sources does your organization utilize for hiring or granting privileges to a practitioner?

0 Not Selected

1 Center for Medicare and Medicaid Services

**VAR: SOURCE\_EH\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q25E. Which of the following sources does your organization utilize for hiring or granting privileges to a practitioner?

0 Not Selected

1 Employment History

**VAR: SOURCE\_ER\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q25F. Which of the following sources does your organization utilize for hiring or granting privileges to a practitioner?

0 Not Selected

1 Employment References

**VAR: SOURCE\_FSMB\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q25G. Which of the following sources does your organization utilize for hiring or granting privileges to a practitioner?

0 Not Selected

1 Federation of State Medical Boards

**VAR: SOURCE\_HIPDB\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q25H. Which of the following sources does your organization utilize for hiring or granting privileges to a practitioner?

0 Not Selected

1 Healthcare Integrity and Protection Data Bank

**VAR: SOURCE\_HSPTL\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q25I. Which of the following sources does your organization utilize for hiring or granting privileges to a practitioner?

0 Not Selected

1 Hospitals

**VAR: SOURCE\_LAW\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q25J. Which of the following sources does your organization utilize for hiring or granting privileges to a practitioner?

0 Not Selected

1 Law Enforcement (including criminal background checks)

**VAR: SOURCE\_MMP\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q25K. Which of the following sources does your organization utilize for hiring or granting privileges to a practitioner?

0 Not Selected

1 Medical Malpractice Insurance

**VAR: SOURCE\_PAHP\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q25L. Which of the following sources does your organization utilize for hiring or granting privileges to a practitioner?

0 Not Selected

1 Practitioners Affiliated Health Plans

**VAR: SOURCE\_SCHOOL\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q25M. Which of the following sources does your organization utilize for hiring or granting privileges to a practitioner?

0 Not Selected

1 Medical/Dental Schools

**VAR: SOURCE\_SQ\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q25N. Which of the following sources does your organization utilize for hiring or granting privileges to a practitioner?

0 Not Selected

1 Self-Queries

**VAR: SOURCE\_SLB\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q25O. Which of the following sources does your organization utilize for hiring or granting privileges to a practitioner?

0 Not Selected

1 State Licensing Boards

**VAR: SOURCE\_OTHR\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q25P. Which of the following sources does your organization utilize for hiring or granting privileges to a practitioner?

0 Not Selected

1 Other (Please Explain)

**VAR: NUM\_ACTIONS\_MCO**

Format: Character

Width: 1

Q26. For the full calendar year of 2012, how many times has your organization taken reportable disciplinary actions against practitioners for misconduct or incompetence?

|  |  |
| --- | --- |
| Response | Number of Reportable Actions |
| 0 | None |
| 1 | At least once but less than 5 times |
| 2 | At least 5 times but less than 10 times |
| 3 | More than 10 times |
| 9 | Not Ascertained |

**VAR: ACTION\_TERM\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q27A. What types of actions does your organization take against practitioners for misconduct or incompetence?

0 Not Selected

1 Employment or Contract Termination

**VAR: ACTION\_RSTRCT\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q27B. What types of actions does your organization take against practitioners for misconduct or incompetence?

0 Not Selected

1 Restriction of Clinical Privileges

**VAR: ACTION\_PROB\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q27C. What types of actions does your organization take against practitioners for misconduct or incompetence?

0 Not Selected

1 Probation

**VAR: ACTION\_SUSP\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q27D. What types of actions does your organization l take against practitioners for misconduct or incompetence?

0 Not Selected

1 Suspension

**VAR: ACTION\_LEGAL\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q27E. What types of actions does your organization take against practitioners for misconduct or incompetence?

0 Not Selected

1 Legal Actions

**VAR: ACTION\_DOC\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q27F. What types of actions does your organization take against practitioners for misconduct or incompetence?

0 Not Selected

1 Document the Incident for further Review

**VAR: ACTION\_COUNSEL\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q27G. What types of actions does your organization take against practitioners for misconduct or incompetence?

0 Not Selected

1 Counseling

**VAR: ACTION\_OTHR\_MCO**

Format: Character

Width: 1

Q27H. What types of actions does your organization take against practitioners for misconduct or incompetence?

|  |  |
| --- | --- |
| Response | Other Types of Actions |
| 0 | No action |
| 1 | Unknown |
| 2 | Not applicable |
| 3 | Other |
| 9 | Not Ascertained |

**VAR: RMP\_MCO**

Format: Character

Width: 1

Q28. Does your organization have a risk management program aimed at health care practitioners that aids in the prevention of medical malpractice related issues?

|  |  |
| --- | --- |
| Response | Risk Management Program |
| 0 | No |
| 1 | Yes |
| 2 | Other |
| 9 | Not Ascertained |

**VAR: MM\_INSURED\_MCO**

Format: Character

Width: 1

Q29. How is your organization insured for medical malpractice?

|  |  |
| --- | --- |
| Response | Insured |
| 0 | Self-Insured |
| 1 | Third-Party Insurance |
| 2 | Uninsured |
| 3 | Other |
| 9 | Not Ascertained |

**VAR: ACCREDITED\_MCO**

Format: Character

Width: 1

Q30. Is your organization accredited by a national accreditation organization?

|  |  |
| --- | --- |
| Response | Accredited Hospital |
| 0 | No |
| 1 | Yes |
| 2 | Not Applicable |
| 9 | Not Ascertained |

**APPLIED SKIP LOGIC**

* If Item 30 is “Yes” then go to Item 31
* Otherwise go to Item 32

**VAR: ACRDT\_FED\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q31A. Which of the following national accreditation organizations is your organization accredited by?

0 Not Selected

1 Federal Government

**VAR: ACRDT\_ST\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q31B. Which of the following national accreditation organizations is your organization accredited by?

0 Not Selected

1 State Government

**VAR: ACRDT\_AAAHC\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q31C. Which of the following national accreditation organizations is your organization accredited by?

0 Not Selected

1 Accreditation Association for Ambulatory Health Care

**VAR: ACRDT\_AADGP\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q31D. Which of the following national accreditation organizations is your organization accredited by?

0 Not Selected

1 American Academy of Dental Group Practice

**VAR: ACRDT\_ACHC\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q31E. Which of the following national accreditation organizations is your organization accredited by?

0 Not Selected

1 Accreditation Commission for Health Care, Inc.

**VAR: ACRDT\_AAASF\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q31F. Which of the following national accreditation organizations is your organization accredited by?

0 Not Selected

1 American Association for Accreditation of Ambulatory Surgery Facilities

**VAR: ACRDT\_AOA\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q31G. Which of the following national accreditation organizations is your organization accredited by?

0 Not Selected

1 American Osteopathic Association/Healthcare Facilities Accreditation Program

**VAR: ACRDT\_CAP\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q31H. Which of the following national accreditation organizations is your organization accredited by?

0 Not Selected

1 College of American Pathologists

**VAR: ACRDT\_CABC\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q31I. Which of the following national accreditation organizations is your organization accredited by?

0 Not Selected

1 Commission for Accreditation of Birth Centers

**VAR: ACRDT\_COLA\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q31J. Which of the following national accreditation organizations is your organization accredited by?

0 Not Selected

1 Commission on Laboratory Accreditation

**VAR: ACRDT\_CHAP\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q31K. Which of the following national accreditation organizations is your organization accredited by?

0 Not Selected

1 Community Health Accreditation Program

**VAR: ACRDT\_DNVHC\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q31L. Which of the following national accreditation organizations is your organization accredited by?

0 Not Selected

1 DNV Healthcare

**VAR: ACRDT\_HQAA\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q31M. Which of the following national accreditation organizations is your organization accredited by?

0 Not Selected

1 Healthcare Quality Association on Accreditation

**VAR: ACRDT\_IAC\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q31N. Which of the following national accreditation organizations is your organization accredited by?

0 Not Selected

1 Intersocietal Accreditation Commission

**VAR: ACRDT\_JC\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q31O. Which of the following national accreditation organizations is your organization accredited by?

0 Not Selected

1 Joint Commission

**VAR: ACRDT\_NAPBC\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q31P. Which of the following national accreditation organizations is your organization accredited by?

0 Not Selected

1 National Accreditation Program for Breast Centers / American College of Surgeons

**VAR: ACRDT\_NIHAO\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q31Q. Which of the following national accreditation organizations is your organization accredited by?

0 Not Selected

1 National Integrated Accreditation for Healthcare Organizations

**VAR: ACRDT\_NCQA\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q31R. Which of the following national accreditation organizations is your organization accredited by?

0 Not Selected

1 National Committee for Quality Assurance

**VAR: ACRDT\_URAC\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q31S. Which of the following national accreditation organizations is your organization accredited by?

0 Not Selected

1 Utilization Review Accreditation Commission

**VAR: ACRDT\_OTHR\_MCO\_IND**

Format: Numeric Indicator

Width: 1

Q31T. Which of the following national accreditation organizations is your organization accredited by?

0 Not Selected

1 Other

**APPLIED SKIP LOGIC**

* All responses in Item 31 go to Item 61

**VAR: ACRDT\_PLAN\_MCO**

Format: Character

Width: 1

Q32. Does your organization plan to obtain accreditation from a national accreditation organization?

|  |  |
| --- | --- |
| Response | Accreditation |
| 0 | No |
| 1 | Yes |
| 2 | Not applicable |
| 9 | Not Ascertained |

**APPLIED SKIP LOGIC**

* All responses in Item 32 go to Item 61

Skip logic: The following item (Q33) is related to Medical Malpractice Payers.

**VAR: NUM\_CLIENTS\_MMP**

Format: Numeric

Width: 6

Q33. For the full calendar year of 2012, approximately how many clients did your organization provide medical malpractice insurance?

* Open Numeric Box

**APPLIED SKIP LOGIC**

* All responses to Item 33 go to Item 111

Skip logic: The following items (Q34-42) are related to Professional Society.

**VAR: APPS\_RECEIVE\_PS**

Format: Numeric

Width: 6

Q34. For the full calendar year of 2012, how many applications for membership did your professional society receive?

* Open Numeric Box

**VAR: APPS\_APPROVE\_PS**

Format: Numeric

Width: 6

Q35. For the full calendar year of 2012, how many applications did your professional society approve for membership?

* Open Numeric Box

**VAR: MEMBERS\_PS**

Format: Numeric

Width: 6

Q36. For the full calendar year of 2012, how many members did your professional society have?

* Open Numeric Box

**VAR: GRANT\_MEMBER\_PS**

Format: Numeric

Width: 6

Q37. How many individuals in your professional society are responsible for granting membership to practitioners?

* Open Numeric Box

**VAR: OFTEN\_REVIEW\_PS**

Format: Character

Width: 1

Q38. How often does your organization review the records of practitioners that have been granted membership into your professional society?

|  |  |
| --- | --- |
| Response | Time Between Reviews |
| 0 | Once every 6 months |
| 1 | Once per year |
| 2 | Once every 2 years |
| 3 | Once every 3 years |
| 4 | Once every 4 or more years |
| 8 | Not Applicable |
| 9 | Not Ascertained |

**VAR: SOURCE\_NPDB\_PS\_IND**

Format: Numeric Indicator

Width: 1

Q39A. Which of the following sources does your professional society utilize for granting membership to a practitioner?

1. Not Selected
2. National Practitioner Data Bank

**VAR: SOURCE\_ABMS\_ PS\_IND**

Format: Numeric Indicator

Width: 1

Q39B. Which of the following sources does your professional society utilize for granting membership to a practitioner?

0 Not Selected

1 American Board of Medical Specialties

**VAR: SOURCE\_AMA\_ PS\_IND**

Format: Numeric Indicator

Width: 1

Q39C. Which of the following sources does your professional society utilize for granting membership to a practitioner?

0 Not Selected

1 American Medical Association

**VAR: SOURCE\_CMS\_ PS\_IND**

Format: Numeric Indicator

Width: 1

Q39D. Which of the following sources does your professional society utilize for granting membership to a practitioner?

0 Not Selected

1 Center for Medicare and Medicaid Services

**VAR: SOURCE\_EH\_ PS\_IND**

Format: Numeric Indicator

Width: 1

Q39E. Which of the following sources does your professional society utilize for granting membership to a practitioner?

0 Not Selected

1 Employment History

**VAR: SOURCE\_ER\_ PS\_IND**

Format: Numeric Indicator

Width: 1

Q39F. Which of the following sources does your professional society utilize for granting membership to a practitioner?

0 Not Selected

1 Employment References

**VAR: SOURCE\_FSMB\_ PS\_IND**

Format: Numeric Indicator

Width: 1

Q39G. Which of the following sources does your professional society utilize for granting membership to a practitioner?

0 Not Selected

1 Federation of State Medical Boards

**VAR: SOURCE\_HIPDB\_ PS\_IND**

Format: Numeric Indicator

Width: 1

Q39H. Which of the following sources does your professional society utilize for granting membership to a practitioner?

0 Not Selected

1 Healthcare Integrity and Protection Data Bank

**VAR: SOURCE\_HSPTL\_ PS\_IND**

Format: Numeric Indicator

Width: 1

Q39I. Which of the following sources does your professional society utilize for granting membership to a practitioner?

0 Not Selected

1 Hospitals

**VAR: SOURCE\_LAW\_ PS\_IND**

Format: Numeric Indicator

Width: 1

Q39J. Which of the following sources does your professional society utilize for granting membership to a practitioner?

0 Not Selected

1 Law Enforcement (including criminal background checks)

**VAR: SOURCE\_PS \_IND**

Format: Numeric Indicator

Width: 1

Q39K. Which of the following sources does your professional society utilize for granting membership to a practitioner?

0 Not Selected

1 Medical Malpractice Insurance

**VAR: SOURCE\_PAHP\_ PS\_IND**

Format: Numeric Indicator

Width: 1

Q39L. Which of the following sources does your professional society utilize for granting membership to a practitioner?

0 Not Selected

1 Practitioners Affiliated Health Plans

**VAR: SOURCE\_SCHOOL\_ PS\_IND**

Format: Numeric Indicator

Width: 1

Q39M. Which of the following sources does your professional society utilize for granting membership to a practitioner?

0 Not Selected

1 Medical/Dental Schools

**VAR: SOURCE\_SQ\_ PS\_IND**

Format: Numeric Indicator

Width: 1

Q39N. Which of the following sources does your professional society utilize for granting membership to a practitioner?

0 Not Selected

1 Self-Queries

**VAR: SOURCE\_SLB\_ PS\_IND**

Format: Numeric Indicator

Width: 1

Q39O. Which of the following sources does your professional society utilize for granting membership to a practitioner?

0 Not Selected

1 State Licensing Boards

**VAR: SOURCE\_OTHR\_ PS\_IND**

Format: Numeric Indicator

Width: 1

Q39P. Which of the following sources does your professional society utilize for granting membership to a practitioner?

0 Not Selected

1 Other (Please Explain)

**VAR: NUM\_ACTIONS\_PS**

Format: Character

Width: 1

Q40. For the full calendar year of 2012, how many times has your professional society taken reportable disciplinary actions against practitioners for misconduct or incompetence?

|  |  |
| --- | --- |
| Response | Number of Reportable Actions |
| 0 | None |
| 1 | At least once but less than 5 times |
| 2 | At least 5 times but less than 10 times |
| 3 | More than 10 times |
| 9 | Not Ascertained |

**VAR: TYPE\_ACTIONS\_PS**

Format: Character

Width: 250

Q41. What types of actions does your professional society take against any practitioners for misconduct or incompetence?

* Open Comment Box

**VAR: RMP\_PS**

Format: Character

Width: 1

Q42. Does your professional society have a risk management program aimed at health care practitioners that aids in the prevention of medical malpractice related issues?

|  |  |
| --- | --- |
| Response | Risk Management Program |
| 0 | No |
| 1 | Yes |
| 2 | Other |
| 9 | Not Ascertained |

**APPLIED SKIP LOGIC**

* All responses in Item 42 go to Item 61

Skip logic: The following items (Q43-48) are related to Board of Medical/Dental Examiners or State Healthcare Practitioner Licensing.

**VAR: APPS\_RECEIVE\_BL**

Format: Numeric

Width: 6

Q43. For the full calendar year of 2012, how many applications for licensure did your organization receive?

* Open Numeric Box

**VAR: APPS\_APPROVE\_BL**

Format: Numeric

Width: 6

Q44. For the full calendar year of 2012, how many applications did your organization approve for licensure?

* Open Numeric Box

**VAR: MEMBERS\_BL**

Format: Numeric

Width: 6

Q45. How many total staff members within your organization are responsible for licensing practitioners?

* Open Numeric Box

**VAR: OFTEN\_REVIEW\_BL**

Format: Character

Width: 1

Q46. How often does your organization review the records of practitioners for which your organization has granted licensure?

|  |  |
| --- | --- |
| Response | Time Between Reviews |
| 0 | Once every 6 months |
| 1 | Once per year |
| 2 | Once every 2 years |
| 3 | Once every 3 years |
| 4 | Once every 4 or more years |
| 8 | Not Applicable |
| 9 | Not Ascertained |

**VAR: SOURCE\_NPDB\_BL\_IND**

Format: Numeric Indicator

Width: 1

Q47A. Which of the following sources does your organization utilize for granting licensure to a practitioner?

1. Not Selected
2. National Practitioner Data Bank

**VAR: SOURCE\_ABMS\_ BL\_IND**

Format: Numeric Indicator

Width: 1

Q47B. Which of the following sources does your organization utilize for granting licensure to a practitioner?

0 Not Selected

1 American Board of Medical Specialties

**VAR: SOURCE\_AMA\_ BL\_IND**

Format: Numeric Indicator

Width: 1

Q47C. Which of the following sources does your organization utilize for granting licensure to a practitioner?

0 Not Selected

1 American Medical Association

**VAR: SOURCE\_CMS\_ BL\_IND**

Format: Numeric Indicator

Width: 1

Q47D. Which of the following sources does your organization utilize for granting licensure to a practitioner?

0 Not Selected

1 Center for Medicare and Medicaid Services

**VAR: SOURCE\_EH\_ BL\_IND**

Format: Numeric Indicator

Width: 1

Q47E. Which of the following sources does your organization utilize for granting licensure to a practitioner?

0 Not Selected

1 Employment History

**VAR: SOURCE\_ER\_ BL\_IND**

Format: Numeric Indicator

Width: 1

Q47F. Which of the following sources does your organization utilize for granting licensure to a practitioner?

0 Not Selected

1 Employment References

**VAR: SOURCE\_FSMB\_ BL\_IND**

Format: Numeric Indicator

Width: 1

Q47G. Which of the following sources does your organization utilize for granting licensure to a practitioner?

0 Not Selected

1 Federation of State Medical Boards

**VAR: SOURCE\_HIPDB\_ BL\_IND**

Format: Numeric Indicator

Width: 1

Q47H. Which of the following sources does your organization utilize for granting licensure to a practitioner?

0 Not Selected

1 Healthcare Integrity and Protection Data Bank

**VAR: SOURCE\_HSPTL\_ BL\_IND**

Format: Numeric Indicator

Width: 1

Q47I. Which of the following sources does your organization utilize for granting licensure to a practitioner?

0 Not Selected

1 Hospitals

**VAR: SOURCE\_LAW\_ BL\_IND**

Format: Numeric Indicator

Width: 1

Q47J. Which of the following sources does your organization utilize for granting licensure to a practitioner?

0 Not Selected

1 Law Enforcement (including criminal background checks)

**VAR: SOURCE\_BL \_IND**

Format: Numeric Indicator

Width: 1

Q47K. Which of the following sources does your organization utilize for granting licensure to a practitioner?

0 Not Selected

1 Medical Malpractice Insurance

**VAR: SOURCE\_PAHP\_ BL\_IND**

Format: Numeric Indicator

Width: 1

Q47L. Which of the following sources does your organization utilize for granting licensure to a practitioner?

0 Not Selected

1 Practitioners Affiliated Health Plans

**VAR: SOURCE\_SCHOOL\_ BL\_IND**

Format: Numeric Indicator

Width: 1

Q47M. Which of the following sources does your organization utilize for granting licensure to a practitioner?

0 Not Selected

1 Medical/Dental Schools

**VAR: SOURCE\_SQ\_ BL\_IND**

Format: Numeric Indicator

Width: 1

Q47N. Which of the following sources does your organization utilize for granting licensure to a practitioner?

0 Not Selected

1 Self-Queries

**VAR: SOURCE\_SLB\_ BL\_IND**

Format: Numeric Indicator

Width: 1

Q47O. Which of the following sources does your organization utilize for granting licensure to a practitioner?

0 Not Selected

1 State Licensing Boards

**VAR: SOURCE\_OTHR\_ BL\_IND**

Format: Numeric Indicator

Width: 1

Q47P. Which of the following sources does your organization utilize for granting licensure to a practitioner?

0 Not Selected

1 Other (Please Explain)

**VAR: TYPE\_ACTIONS\_BL**

Format: Character

Width: 250

Q48. What types of actions does your organization take against any practitioners for misconduct or incompetence?

* Open Comment Box

**APPLIED SKIP LOGIC**

* All responses in Item 48 go to Item 61

Skip logic: The following items (Q49-55) are related to State Certification Authority.

**VAR: APPS\_RECEIVE\_SCA**

Format: Numeric

Width: 6

Q49. For the full calendar year of 2012, how many applications for certification did your organization receive?

* Open Numeric Box

**VAR: APPS\_APPROVE\_SCA**

Format: Numeric

Width: 6

Q50. For the full calendar year of 2012, how many applications did your organization approve for certification?

* Open Numeric Box

**VAR: MEMBERS\_SCA**

Format: Numeric

Width: 6

Q51. How many total staff members within your organization are responsible for certifying practitioners?

* Open Numeric Box

**VAR: OFTEN\_REVIEW\_SCA**

Format: Character

Width: 1

Q52. How often does your organization review the records of practitioners for which your organization granted certification?

|  |  |
| --- | --- |
| Response | Time Between Reviews |
| 0 | Once every 6 months |
| 1 | Once per year |
| 2 | Once every 2 years |
| 3 | Once every 3 years |
| 4 | Once every 4 or more years |
| 8 | Not Applicable |
| 9 | Not Ascertained |

**VAR: SOURCE\_NPDB\_SCA\_IND**

Format: Numeric Indicator

Width: 1

Q53A. Which of the following sources does your organization utilize for granting certification to a practitioner?

1. Not Selected
2. National Practitioner Data Bank

**VAR: SOURCE\_ABMS\_ SCA \_IND**

Format: Numeric Indicator

Width: 1

Q53B. Which of the following sources does your organization utilize for granting certification to a practitioner?

0 Not Selected

1 American Board of Medical Specialties

**VAR: SOURCE\_AMA\_ SCA \_IND**

Format: Numeric Indicator

Width: 1

Q53C. Which of the following sources does your organization utilize for granting certification to a practitioner?

0 Not Selected

1 American Medical Association

**VAR: SOURCE\_CMS\_ SCA \_IND**

Format: Numeric Indicator

Width: 1

Q53D. Which of the following sources does your organization utilize for granting certification to a practitioner?

0 Not Selected

1 Center for Medicare and Medicaid Services

**VAR: SOURCE\_EH\_ SCA \_IND**

Format: Numeric Indicator

Width: 1

Q53E. Which of the following sources does your organization utilize for granting certification to a practitioner?

0 Not Selected

1 Employment History

**VAR: SOURCE\_ER\_ SCA \_IND**

Format: Numeric Indicator

Width: 1

Q53F. Which of the following sources does your organization utilize for granting certification to a practitioner?

0 Not Selected

1 Employment References

**VAR: SOURCE\_FSMB\_ SCA \_IND**

Format: Numeric Indicator

Width: 1

Q53G. Which of the following sources does your organization utilize for granting certification to a practitioner?

0 Not Selected

1 Federation of State Medical Boards

**VAR: SOURCE\_HIPDB\_ SCA \_IND**

Format: Numeric Indicator

Width: 1

Q537H. Which of the following sources does your organization utilize for granting certification to a practitioner?

0 Not Selected

1 Healthcare Integrity and Protection Data Bank

**VAR: SOURCE\_HSPTL\_ SCA \_IND**

Format: Numeric Indicator

Width: 1

Q53I. Which of the following sources does your organization utilize for granting certification to a practitioner?

0 Not Selected

1 Hospitals

**VAR: SOURCE\_LAW\_ SCA \_IND**

Format: Numeric Indicator

Width: 1

Q53J. Which of the following sources does your organization utilize for granting certification to a practitioner?

0 Not Selected

1 Law Enforcement (including criminal background checks)

**VAR: SOURCE\_ SCA \_IND**

Format: Numeric Indicator

Width: 1

Q53K. Which of the following sources does your organization utilize for granting certification to a practitioner?

0 Not Selected

1 Medical Malpractice Insurance

**VAR: SOURCE\_PAHP\_ SCA \_IND**

Format: Numeric Indicator

Width: 1

Q53L. Which of the following sources does your organization utilize for granting certification to a practitioner?

0 Not Selected

1 Practitioners Affiliated Health Plans

**VAR: SOURCE\_SCHOOL\_ SCA \_IND**

Format: Numeric Indicator

Width: 1

Q53M. Which of the following sources does your organization utilize for granting certification to a practitioner?

0 Not Selected

1 Medical/Dental Schools

**VAR: SOURCE\_SQ\_ SCA \_IND**

Format: Numeric Indicator

Width: 1

Q53N. Which of the following sources does your organization utilize for granting certification to a practitioner?

0 Not Selected

1 Self-Queries

**VAR: SOURCE\_SLB\_ SCA \_IND**

Format: Numeric Indicator

Width: 1

Q53O. Which of the following sources does your organization utilize for granting certification to a practitioner?

0 Not Selected

1 State Licensing Boards

**VAR: SOURCE\_OTHR\_ SCA \_IND**

Format: Numeric Indicator

Width: 1

Q53P. Which of the following sources does your organization utilize for granting certification to a practitioner?

0 Not Selected

1 Other (Please Explain)

**VAR: NUM\_ACTIONS\_SCA**

Format: Character

Width: 1

Q54. For the full calendar year of 2012, how many times has your organization taken reportable disciplinary actions against practitioners for misconduct or incompetence?

|  |  |
| --- | --- |
| Response | Number of Reportable Actions |
| 0 | None |
| 1 | At least once but less than 5 times |
| 2 | At least 5 times but less than 10 times |
| 3 | More than 10 times |
| 9 | Not Ascertained |

**VAR: TYPE\_ACTIONS\_ SCA**

Format: Character

Width: 250

Q55. What types of actions does your organization take against any practitioners for misconduct or incompetence?

* Open Comment Box

**APPLIED SKIP LOGIC**

* All responses in Item 55 go to Item 61

Skip logic: The following items (Q56-59) are related to Federal or State Prosecutor.

**VAR: PROSECUTED\_NUM**

Format: Numeric

Width: 6

Q56. For the full calendar year of 2012, how many cases did you prosecute?

* Open Numeric Box

**VAR: PROSECUTED\_HEALTH\_NUM**

Format: Numeric

Width: 6

Q57. For the full calendar year of 2012, how many health related cases did you prosecute?

* Open Numeric Box

**VAR: CONVICTION\_NUM**

Format: Numeric

Width: 6

Q58. For the full calendar year of 2012, approximately how many of your health care related cases resulted in a conviction?

* Open Numeric Box

**VAR: CONVICTION\_NUM**

Format: Numeric

Width: 6

Q59. How many total staff members within your organization support case work?

* Open Numeric Box

**(SKIP LOGIC)**

* All responses in Item 59 go to Item 61

Skip logic: The following item (Q60) is related to all other entity types.

**VAR: STAFFMEMBERS\_NUM**

Format: Numeric

Width: 6

Q60. How many total staff members within your organization are responsible for providing services?

* Open Numeric Box

Skip logic: All entity types complete the following item (Q61).

**VAR: QUERY\_IND**

Format: Character

Width: 1

Q61. Has your organization queried the Data Bank between January 2010 and December 2012?

|  |  |
| --- | --- |
| Response | Type of Query |
| 0 | No |
| 1 | Yes, the NPDB (National Practitioner Data Bank) |
| 2 | Yes, the HIPDB (Healthcare Integrity and Protection Data Bank) |
| 3 | Yes, both the NPDB and the HIPDB |
| 9 | Other (Please Explain) |

**APPLIED SKIP LOGIC**

* If Item 61 is any “Yes” then go to Item 62
* Otherwise go to Item 111

Skip logic: All entity types that query complete items Q62-Q63.

**VAR: QUERY\_REQUIRE\_IND**

Format: Character

Width: 1

Q62. Does your organization query the Data Bank due to legal or regulatory requirements either from a governing body or a national accreditation organization?

|  |  |
| --- | --- |
| Response | Query for Legal or Regulatory Requirements |
| 0 | No |
| 1 | Yes |
| 9 | Other (Please Explain) |

**VAR: QUERY\_AGENT\_IND**

Format: Character

Width: 1

Q63. Does your organization contract with an authorized agent to query the Data Bank?

|  |  |
| --- | --- |
| Response | Contract Authorized Agent |
| 0 | No |
| 1 | Yes |
| 9 | Other (Please Explain) |

**APPLIED SKIP LOGIC**

* If Item 63 is “Yes” then go to Item 64
* Otherwise go to Item 65

Skip logic: All entity types that query and contract with an Agent complete items Q64.

**VAR: AGENT\_ VERIFY\_QRY**

Format: Numeric Indicator

Width: 1

Q64A. What are the reasons that your organization uses an authorized agent to query the Data Bank?

0 Not Selected

1 Credentialing Verification Organization Does All Primary Source Verification

**VAR: AGENT\_CENTRALCRED\_QRY**

Format: Numeric Indicator

Width: 1

Q64B. What are the reasons that your organization uses an authorized agent to query the Data Bank?

0 Not Selected

1 Result of Centralized Credentialing

**VAR: AGENT\_VOLUME\_QRY**

Format: Numeric Indicator

Width: 1

Q64C. What are the reasons that your organization uses an authorized agent to query the Data Bank?

0 Not Selected

1 High Volume Processing Efficiency

**VAR: AGENT\_RESOURCES\_QRY**

Format: Numeric Indicator

Width: 1

Q64D. What are the reasons that your organization uses an authorized agent to query the Data Bank?

0 Not Selected

1 Not Enough Resources

**VAR: AGENT\_COST\_QRY**

Format: Numeric Indicator

Width: 1

Q64E. What are the reasons that your organization uses an authorized agent to query the Data Bank?

0 Not Selected

1 Cost Effective

**VAR: AGENT\_OTHER\_QRY**

Format: Numeric Indicator

Width: 1

Q64F. What are the reasons that your organization uses an authorized agent to query the Data Bank?

0 Not Selected

1 Other (Please Explain)

**APPLIED SKIP LOGIC**

* All responses in Item 64 go to Item 72

Skip logic: All entity types that query, and do not contract with an Agent, complete items Q65-Q81.

**VAR: QUERY\_TIME\_NUM**

Format: Character

Width: 1

Q65. How long has your work responsibilities included having to query the Data Bank?

|  |  |
| --- | --- |
| Response | Length of Time |
| 0 | Less than 1 year |
| 1 | At least 1 year but less than 2 years |
| 2 | At least 2 years but less than 3 years |
| 3 | At least 3 years but less than 4 years |
| 4 | At least 4 years but less than 5 years |
| 5 | 5 years or more |

**VAR: QUERY\_EASY\_RANK**

Format: Character

Width: 1

Q66A. Please rate your level of agreement with the following statements concerning querying the Data Bank?

The first time that I queried the Data Bank; I found it easy to do.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: QUERY\_INTUITIVE\_RANK**

Format: Character

Width: 1

Q66B. Please rate your level of agreement with the following statements concerning querying the Data Bank?

Querying the Data Bank is very intuitive; I was able to do it with little to no instruction.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: QUERY\_CONFIDENT\_RANK**

Format: Character

Width: 1

Q66C. Please rate your level of agreement with the following statements concerning querying the Data Bank?

I feel confident that I can teach a fellow co-worker how to query the Data Bank.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: QUERY\_TIMELY\_RANK**

Format: Character

Width: 1

Q66D. Please rate your level of agreement with the following statements concerning querying the Data Bank?

I am able to complete all of the tasks of querying the Data Bank in a timely manner.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: QUERY\_COMPLEX\_RANK**

Format: Character

Width: 1

Q66E. Please rate your level of agreement with the following statements concerning querying the Data Bank?

Querying the Data Bank is too complex; it can be simplified for users.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: QUERY\_INSTRUCTION\_RANK**

Format: Character

Width: 1

Q66F. Please rate your level of agreement with the following statements concerning querying the Data Bank?

Whenever I query the Data Bank, I can do it with little to no instruction.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: QUERY\_TASK\_RANK**

Format: Character

Width: 1

Q66G. Please rate your level of agreement with the following statements concerning querying the Data Bank?

I find it hard to remember all of the tasks required to query the Data Bank.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: QUERY\_DFCLT\_RANK**

Format: Character

Width: 1

Q66H. Please rate your level of agreement with the following statements concerning querying the Data Bank?

I have difficulties in completing all of the tasks of querying the Data Bank.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: QUERY\_HELP\_RANK**

Format: Character

Width: 1

Q66I. Please rate your level of agreement with the following statements concerning querying the Data Bank?

I usually have to ask for help when I query the Data Bank.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: QUERY\_LEARN\_RANK**

Format: Character

Width: 1

Q66J. Please rate your level of agreement with the following statements concerning querying the Data Bank?

I needed to learn a lot of things before I could get going with querying the Data Bank.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: QUERY\_PASSWORD**

Format: Numeric Indicator

Width: 1

Q67A. What aspects of querying the Data Bank do you consider the most difficult?

0 Not Selected

1 Recalling the password

**VAR: QUERY\_WEBSITE**

Format: Numeric Indicator

Width: 1

Q67B. What aspects of querying the Data Bank do you consider the most difficult?

0 Not Selected

1 Locating the website

**VAR: QUERY\_NAVIGATE**

Format: Numeric Indicator

Width: 1

Q67C. What aspects of querying the Data Bank do you consider the most difficult?

0 Not Selected

1 Navigating the website

**VAR: QUERY\_INPUT**

Format: Numeric Indicator

Width: 1

Q67D. What aspects of querying the Data Bank do you consider the most difficult?

0 Not Selected

1 Collecting all the required input

**VAR: QUERY\_DBASE**

Format: Numeric Indicator

Width: 1

Q67E. What aspects of querying the Data Bank do you consider the most difficult?

0 Not Selected

1 Managing a Practitioner (Subject) Database

**VAR: QUERY\_ACCNTS**

Format: Numeric Indicator

Width: 1

Q67F. What aspects of querying the Data Bank do you consider the most difficult?

0 Not Selected

1 Managing User Accounts

**VAR: QUERY\_PMTS**

Format: Numeric Indicator

Width: 1

Q67G. What aspects of querying the Data Bank do you consider the most difficult?

0 Not Selected

1 Making payments

**VAR: QUERY\_OTHER**

Format: Numeric Indicator

Width: 1

Q67H. What aspects of querying the Data Bank do you consider the most difficult?

0 Not Selected

1 Other (Please Explain)

**VAR: QUERY\_HOW**

Format: Character

Width: 1

Q68. How does your organization obtain Data Bank information about health care practitioner applicants?

|  |  |
| --- | --- |
| Response | Obtain Data Bank Information |
| 1 | Utilize One-Time Query |
| 2 | Applicant Provides Copy of Self-Query |
| 3 | Continuous Query |
| 9 | Other (Please Explain) |

**VAR: QUERY\_COPIES**

Format: Character

Width: 1

Q69. Does your organization accept copies of self-query provided directly from applicants or are they required to have copies sent directly from the Data Bank?

|  |  |
| --- | --- |
| Response | Obtain Data Bank Information |
| 1 | Directly from Applicant |
| 2 | Sent from Data Bank |
| 9 | Other (Please Explain) |

**VAR: QUERY\_CONFIRM**

Format: Character

Width: 1

Q70. Does your organization use information from the Data Bank as confirmation that applicants submitted complete and accurate information?

|  |  |
| --- | --- |
| Response | Confirmation |
| 0 | No |
| 1 | Yes |
| 9 | Other (Please Explain) |

**VAR: QUERY\_STAFF**

Format: Character

Width: 1

Q71. What type of query does your organization utilize for health care practitioners who are already members of staff?

|  |  |
| --- | --- |
| Response | Query Staff |
| 1 | One-Time Query |
| 2 | Continuous Query |
| 3 | Both Types of Query |
| 9 | Other (Please Explain) |

**VAR: QUERY\_ACCURATE**

Format: Character

Width: 1

Q72. I feel that the information that we received from the Data Bank is accurate.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: QUERY\_COMPLETE**

Format: Character

Width: 1

Q73. I feel that the information that we received from the Data Bank is complete.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: QUERY\_TIMELY**

Format: Character

Width: 1

Q74. I feel that we have received information from the Data Bank in a timely manner.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: QUERY\_COST\_RATE**

Format: Character

Width: 1

Q75. How would you rate the cost to query the Data Bank?

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Very Inexpensive |
| 2 | Inexpensive |
| 3 | Fair Cost |
| 4 | Expensive |
| 5 | Very Expensive |

**VAR: QUERY\_ONE\_TIME**

Format: Character

Width: 1

Q76A. Please rate your organization’s level of satisfaction for each of the following items: One-Time Query

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: QUERY\_CONT**

Format: Character

Width: 1

Q76B. Please rate your organization’s level of satisfaction for each of the following items: Continuous Query

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: QUERY\_SUBJECTDBS**

Format: Character

Width: 1

Q76C. Please rate your organization’s level of satisfaction for each of the following items: Practitioner (Subject) Database

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: QUERY\_REQUERY**

Format: Character

Width: 1

Q76D. Please rate your organization’s level of satisfaction for each of the following items: Re-Query of Previously Saved Practitioners

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: QUERY\_RENEWAL**

Format: Character

Width: 1

Q76E. Please rate your organization’s level of satisfaction for each of the following items: Registration Renewal Process

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: PRCPTN\_ADVERSE**

Format: Character

Width: 1

Q77. What is your organization’s perception of health care practitioners with adverse action reports in the Data Bank?

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Very Negative |
| 2 | Negative |
| 3 | Neutral |
| 4 | Positive |
| 5 | Very Positive |

**VAR: PRCPTN\_CONVCT**

Format: Character

Width: 1

Q78. What is your organization’s perception of health care practitioners with judgment or conviction reports in the Data Bank?

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Very Negative |
| 2 | Negative |
| 3 | Neutral |
| 4 | Positive |
| 5 | Very Positive |

**VAR: PRCPTN\_MMP**

Format: Character

Width: 1

Q79. What is your organization’s perception of health care practitioners with medical malpractice payment reports in the Data Bank?

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Very Negative |
| 2 | Negative |
| 3 | Neutral |
| 4 | Positive |
| 5 | Very Positive |

**VAR: REJECT**

Format: Character

Width: 1

Q80. Has your organization ever rejected an applicant because the applicant had a report in the Data Bank?

|  |  |
| --- | --- |
| Ranking | Rejected Applicant |
| 0 | No |
| 1 | Yes |
| 9 | Other (Please Explain) |

**VAR: MATCHED\_RESPONSE**

Format: Character

Width: 1

Q81. Has your organization received a query response including an adverse action report, a judgment or conviction report, or a medical malpractice payment report from the Data Bank for a member of staff or someone with clinical privileges between January 2010 and December 2012??

|  |  |
| --- | --- |
| Ranking | Rejected Applicant |
| 0 | No |
| 1 | Yes |
| 5 | Other (Please Explain) |

**APPLIED SKIP LOGIC**

* If Item 81 is “Yes” then go to Item 82
* Otherwise go to Item 94

**VAR: RSPNS\_SLAR**

Format: Numeric Indicator

Width: 1

Q82A. What type of information did your organization receive as a result of conducting a Data Bank query from January 2010 and December 2012?

0 Not Selected

1 State Licensure Action Report

**VAR: RSPNS\_DFLAR**

Format: Numeric Indicator

Width: 1

Q82B. What type of information did your organization receive as a result of conducting a Data Bank query from January 2010 and December 2012?

0 Not Selected

1 DEA/Federal Licensure Action Report

**VAR: RSPNS\_CPAR**

Format: Numeric Indicator

Width: 1

Q82C. What type of information did your organization receive as a result of conducting a Data Bank query from January 2010 and December 2012?

0 Not Selected

1 Title IV Clinical Privileges Action Report

**VAR: RSPNS\_HPAR**

Format: Numeric Indicator

Width: 1

Q82D. What type of information did your organization receive as a result of conducting a Data Bank query from January 2010 and December 2012?

0 Not Selected

1 Health Plan Action Report

**VAR: RSPNS\_EDAR**

Format: Numeric Indicator

Width: 1

Q82E. What type of information did your organization receive as a result of conducting a Data Bank query from January 2010 and December 2012?

0 Not Selected

1 Exclusion/Debarment Action Report

**VAR: RSPNS\_PSAR**

Format: Numeric Indicator

Width: 1

Q82F. What type of information did your organization receive as a result of conducting a Data Bank query from January 2010 and December 2012?

0 Not Selected

1 Professional Society Action Report

**VAR: RSPNS\_PROAR**

Format: Numeric Indicator

Width: 1

Q82G. What type of information did your organization receive as a result of conducting a Data Bank query from January 2010 and December 2012?

0 Not Selected

1 Peer Review Organization Action Report

**VAR: RSPNS\_AAR**

Format: Numeric Indicator

Width: 1

Q82H. What type of information did your organization receive as a result of conducting a Data Bank query from January 2010 and December 2012?

0 Not Selected

1 Accreditation Action Report

**VAR: RSPNS\_GAAR**

Format: Numeric Indicator

Width: 1

Q82I. What type of information did your organization receive as a result of conducting a Data Bank query from January 2010 and December 2012?

0 Not Selected

1 Government Administrative Action Report

**VAR: RSPNS\_RR**

Format: Numeric Indicator

Width: 1

Q82J. What type of information did your organization receive as a result of conducting a Data Bank query from January 2010 and December 2012?

0 Not Selected

1 Reinstatement Report

**VAR: RSPNS\_CCR**

Format: Numeric Indicator

Width: 1

Q82K. What type of information did your organization receive as a result of conducting a Data Bank query from January 2010 and December 2012?

0 Not Selected

1 Criminal Conviction Report

**VAR: RSPNS\_DCPTDR**

Format: Numeric Indicator

Width: 1

Q82L. What type of information did your organization receive as a result of conducting a Data Bank query from January 2010 and December 2012?

0 Not Selected

1 Deferred Conviction or Pre-Trial Diversion Report

**VAR: RSPNS\_NCPR**

Format: Numeric Indicator

Width: 1

Q82M. What type of information did your organization receive as a result of conducting a Data Bank query from January 2010 and December 2012?

0 Not Selected

1 Nolo Contendere (No Contest) Plea Report

**VAR: RSPNS\_CJR**

Format: Numeric Indicator

Width: 1

Q82N. What type of information did your organization receive as a result of conducting a Data Bank query from January 2010 and December 2012?

0 Not Selected

1 Civil Judgment Report

**VAR: RSPNS\_IR**

Format: Numeric Indicator

Width: 1

Q82O. What type of information did your organization receive as a result of conducting a Data Bank query from January 2010 and December 2012?

0 Not Selected

1 Injunction Report

**VAR: RSPNS\_MMP**

Format: Numeric Indicator

Width: 1

Q82P. What type of information did your organization receive as a result of conducting a Data Bank query from January 2010 and December 2012?

0 Not Selected

1 Medical Malpractice Payment Report

**VAR: QUERY\_OTHER**

Format: Numeric Indicator

Width: 1

Q82Q. What type of information did your organization receive as a result of conducting a Data Bank query from January 2010 and December 2012?

0 Not Selected

1 Other (Please Explain)

**VAR: RESPONSE\_ACTION**

Format: Character

Width: 1

Q83. What types of actions does your organization take when a query response shows adverse action reports, judgment or conviction reports, or medical malpractice payment reports on practitioners at your facility?

|  |  |
| --- | --- |
| Ranking | Actions to a Matched Response |
| 0 | Take Action Against the Practitioner |
| 1 | Seek Additional Information |
| 2 | Conduct a Formal Peer Review |
| 3 | File Information for Scheduled Review |
| 4 | No Action Is Taken |
| 5 | Unknown |
| 9 | Other (Please Explain) |

**VAR: DCSN\_AFFCT\_HIREFIRE**

Format: Numeric Indicator

Width: 1

Q84A. Which of the following decisions are affected by the information provided by the Data Bank?

0 Not Selected

1 Hiring and Firing of Staff

**VAR: DCSN\_AFFCT\_CREDNTL**

Format: Numeric Indicator

Width: 1

Q84B. Which of the following decisions are affected by the information provided by the Data Bank?

0 Not Selected

1 Credentialing

**VAR: DCSN\_AFFCT\_PRVLG**

Format: Numeric Indicator

Width: 1

Q84C. Which of the following decisions are affected by the information provided by the Data Bank?

0 Not Selected

1 Granting Clinical Privileges

**VAR: DCSN\_AFFCT\_DISCPLN**

Format: Numeric Indicator

Width: 1

Q84D. Which of the following decisions are affected by the information provided by the Data Bank?

0 Not Selected

1 Disciplinary Actions

**VAR: DCSN\_AFFCT\_NA**

Format: Numeric Indicator

Width: 1

Q84E. Which of the following decisions are affected by the information provided by the Data Bank?

0 Not Selected

1 Not Applicable

**VAR: DCSN\_AFFCT\_OTHER**

Format: Numeric Indicator

Width: 1

Q84F. Which of the following decisions are affected by the information provided by the Data Bank?

0 Not Selected

1 Other (Please Explain)

**VAR: DCSN\_DIFFER**

Format: Character

Width: 1

Q85. Would your decisions regarding practitioner have been different if you had not received the Data Bank response?

|  |  |
| --- | --- |
| Ranking | Different Actions If No Matched Response |
| 0 | No |
| 1 | Yes |
| 9 | Other (Please Explain) |

**VAR: EFFECT\_SLAR**

Format: Character

Width: 1

Q86A. For each type of report listed below, please rate its effect on your organization’s decision to offer employment or clinical privileges to a practitioner, if the practitioner had such a report in the Data Bank: State Licensure Action Report

|  |  |
| --- | --- |
| Ranking | Effect on Decision |
| 0 | Not Applicable |
| 1 | No Effect at All |
| 2 | Very Weak |
| 3 | Weak |
| 4 | Moderate |
| 5 | Strong |
| 6 | Very Strong |

**VAR: EFFECT\_DFLAR**

Format: Character

Width: 1

Q86B. For each type of report listed below, please rate its effect on your organization’s decision to offer employment or clinical privileges to a practitioner, if the practitioner had such a report in the Data Bank: DEA/Federal Licensure Action Report

|  |  |
| --- | --- |
| Ranking | Effect on Decision |
| 0 | Not Applicable |
| 1 | No Effect at All |
| 2 | Very Weak |
| 3 | Weak |
| 4 | Moderate |
| 5 | Strong |
| 6 | Very strong |

**VAR: EFFECT\_CPAR**

Format: Character

Width: 1

Q86C. For each type of report listed below, please rate its effect on your organization’s decision to offer employment or clinical privileges to a practitioner, if the practitioner had such a report in the Data Bank: Title IV Clinical Privileges Action Report

|  |  |
| --- | --- |
| Ranking | Effect on Decision |
| 0 | Not Applicable |
| 1 | No Effect at All |
| 2 | Very Weak |
| 3 | Weak |
| 4 | Moderate |
| 5 | Strong |
| 6 | Very Strong |

**VAR: EFFECT\_HPAR**

Format: Character

Width: 1

Q86D. For each type of report listed below, please rate its effect on your organization’s decision to offer employment or clinical privileges to a practitioner, if the practitioner had such a report in the Data Bank: Health Plan Action Report

|  |  |
| --- | --- |
| Ranking | Effect on Decision |
| 0 | Not Applicable |
| 1 | No Effect at All |
| 2 | Very Weak |
| 3 | Weak |
| 4 | Moderate |
| 5 | Strong |
| 6 | Very Strong |

**VAR: EFFECT\_EDAR**

Format: Character

Width: 1

Q86E. For each type of report listed below, please rate its effect on your organization’s decision to offer employment or clinical privileges to a practitioner, if the practitioner had such a report in the Data Bank: Exclusion/Debarment Action Report

|  |  |
| --- | --- |
| Ranking | Effect on decision |
| 0 | Not Applicable |
| 1 | No Effect at All |
| 2 | Very Weak |
| 3 | Weak |
| 4 | Moderate |
| 5 | Strong |
| 6 | Very Strong |

**VAR: EFFECT\_PSAR**

Format: Character

Width: 1

Q86F. For each type of report listed below, please rate its effect on your organization’s decision to offer employment or clinical privileges to a practitioner, if the practitioner had such a report in the Data Bank: Professional Society Action Report

|  |  |
| --- | --- |
| Ranking | Effect on Decision |
| 0 | Not Applicable |
| 1 | No Effect at All |
| 2 | Very Weak |
| 3 | Weak |
| 4 | Moderate |
| 5 | Strong |
| 6 | Very Strong |

**VAR: EFFECT\_PROAR**

Format: Character

Width: 1

Q86G. For each type of report listed below, please rate its effect on your organization’s decision to offer employment or clinical privileges to a practitioner, if the practitioner had such a report in the Data Bank: Peer Review Organization Action Report

|  |  |
| --- | --- |
| Ranking | Effect on Decision |
| 0 | Not Applicable |
| 1 | No Effect at All |
| 2 | Very Weak |
| 3 | Weak |
| 4 | Moderate |
| 5 | Strong |
| 6 | Very Strong |

**VAR: EFFECT\_AAR**

Format: Character

Width: 1

Q86H. For each type of report listed below, please rate its effect on your organization’s decision to offer employment or clinical privileges to a practitioner, if the practitioner had such a report in the Data Bank: Accreditation Action Report

|  |  |
| --- | --- |
| Ranking | Effect on Decision |
| 0 | Not Applicable |
| 1 | No Effect at All |
| 2 | Very Weak |
| 3 | Weak |
| 4 | Moderate |
| 5 | Strong |
| 6 | Very Strong |

**VAR: EFFECT\_GAAR**

Format: Character

Width: 1

Q86I. For each type of report listed below, please rate its effect on your organization’s decision to offer employment or clinical privileges to a practitioner, if the practitioner had such a report in the Data Bank: Government Administrative Action Report

|  |  |
| --- | --- |
| Ranking | Effect on Decision |
| 0 | Not Applicable |
| 1 | No Effect at All |
| 2 | Very Weak |
| 3 | Weak |
| 4 | Moderate |
| 5 | Strong |
| 6 | Very Strong |

**VAR: EFFECT\_RR**

Format: Character

Width: 1

Q86J. For each type of report listed below, please rate its effect on your organization’s decision to offer employment or clinical privileges to a practitioner, if the practitioner had such a report in the Data Bank: Reinstatement Report

|  |  |
| --- | --- |
| Ranking | Effect on Decision |
| 0 | Not Applicable |
| 1 | No Effect at All |
| 2 | Very Weak |
| 3 | Weak |
| 4 | Moderate |
| 5 | Strong |
| 6 | Very Strong |

**VAR: EFFECT\_CCR**

Format: Character

Width: 1

Q86K. For each type of report listed below, please rate its effect on your organization’s decision to offer employment or clinical privileges to a practitioner, if the practitioner had such a report in the Data Bank: Criminal Conviction Report

|  |  |
| --- | --- |
| Ranking | Effect on Decision |
| 0 | Not Applicable |
| 1 | No Effect at All |
| 2 | Very Weak |
| 3 | Weak |
| 4 | Moderate |
| 5 | Strong |
| 6 | Very Strong |

**VAR: EFFECT\_DCPTDR**

Format: Character

Width: 1

Q86L. For each type of report listed below, please rate its effect on your organization’s decision to offer employment or clinical privileges to a practitioner, if the practitioner had such a report in the Data Bank: Deferred Conviction or Pre-Trial Diversion Report

|  |  |
| --- | --- |
| Ranking | Effect on Decision |
| 0 | Not Applicable |
| 1 | No Effect at All |
| 2 | Very Weak |
| 3 | Weak |
| 4 | Moderate |
| 5 | Strong |
| 6 | Very Strong |

**VAR: EFFECT\_NCPR**

Format: Character

Width: 1

Q86M. For each type of report listed below, please rate its effect on your organization’s decision to offer employment or clinical privileges to a practitioner, if the practitioner had such a report in the Data Bank: Nolo Contendere (No Contest) Plea Report

|  |  |
| --- | --- |
| Ranking | Effect on Decision |
| 0 | Not Applicable |
| 1 | No Effect at All |
| 2 | Very Weak |
| 3 | Weak |
| 4 | Moderate |
| 5 | Strong |
| 6 | Very Strong |

**VAR: EFFECT\_CJR**

Format: Character

Width: 1

Q86N. For each type of report listed below, please rate its effect on your organization’s decision to offer employment or clinical privileges to a practitioner, if the practitioner had such a report in the Data Bank: Civil Judgment Report

|  |  |
| --- | --- |
| Ranking | Effect on Decision |
| 0 | Not Applicable |
| 1 | No Effect at All |
| 2 | Very Weak |
| 3 | Weak |
| 4 | Moderate |
| 5 | Strong |
| 6 | Very Strong |

**VAR: EFFECT\_IR**

Format: Character

Width: 1

Q86O. For each type of report listed below, please rate its effect on your organization’s decision to offer employment or clinical privileges to a practitioner, if the practitioner had such a report in the Data Bank: Injunction Report

|  |  |
| --- | --- |
| Ranking | Effect on Decision |
| 0 | Not Applicable |
| 1 | No Effect at All |
| 2 | Very Weak |
| 3 | Weak |
| 4 | Moderate |
| 5 | Strong |
| 6 | Very Strong |

**VAR: EFFECT\_MMPR**

Format: Character

Width: 1

Q86P. For each type of report listed below, please rate its effect on your organization’s decision to offer employment or clinical privileges to a practitioner, if the practitioner had such a report in the Data Bank: Medical Malpractice Payment Report

|  |  |
| --- | --- |
| Ranking | Effect on Decisions |
| 0 | Not Applicable |
| 1 | No Effect at All |
| 2 | Very Weak |
| 3 | Weak |
| 4 | Moderate |
| 5 | Strong |
| 6 | Very Strong |

**VAR: OFTEN\_IMPACT**

Format: Character

Width: 1

Q87. How often does a query response from the Data Bank impact the credentialing decisions of your organization for a practitioner?

|  |  |
| --- | --- |
| Ranking | How Often |
| 0 | All the Time |
| 1 | Most of the Time |
| 2 | More than Half the Time |
| 3 | About Half the Time |
| 4 | Less than Half the Time |
| 5 | Most of the Time |
| 6 | Rarely |
| 7 | Never |
| 9 | Other (Please Explain) |

**VAR: OFTEN\_CONTACT**

Format: Character

Width: 1

Q88. When your organization receives query responses from the Data Bank, how often does your organization contact the original reporters for additional information?

|  |  |
| --- | --- |
| Ranking | How Often |
| 0 | All the Time |
| 1 | Most of the Time |
| 2 | More than Half the Time |
| 3 | About Half the Time |
| 4 | Less than Half the Time |
| 5 | Most of the Time |
| 6 | Rarely |
| 7 | Never |
| 9 | Other (Please Explain) |

**VAR: OFTEN\_INVSTGT**

Format: Character

Width: 1

Q89. How often does information from the Data Bank lead to further investigation into additional sources of information?

|  |  |
| --- | --- |
| Ranking | How Often |
| 0 | All the Time |
| 1 | Most of the Time |
| 2 | More than Half the Time |
| 3 | About Half the Time |
| 4 | Less than Half the Time |
| 5 | Most of the Time |
| 6 | Rarely |
| 7 | Never |
| 9 | Other (Please Explain) |

**VAR: CONFDNT\_DCSNS**

Format: Character

Width: 1

Q90. Information received from the Data Bank makes my organization confident about the decisions it makes concerning its practitioners.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: NEW\_INFO**

Format: Character

Width: 1

Q91. How often does your query from the Data Bank provide you with new information about practitioners that you did not receive from other sources?

|  |  |
| --- | --- |
| Ranking | How Often |
| 0 | All the Time |
| 1 | Most of the Time |
| 2 | More than Half the Time |
| 3 | About Half the Time |
| 4 | Less than Half the Time |
| 5 | Most of the Time |
| 6 | Rarely |
| 7 | Never |
| 9 | Other (Please explain) |

**VAR: QUERY\_CONFIRM2**

Format: Character

Width: 1

Q92. Does your organization use information from the Data Bank as confirmation of the information that you receive from other sources?

|  |  |
| --- | --- |
| Ranking | Confirmation |
| 0 | No |
| 1 | Yes |
| 9 | Other (Please Explain) |

Similar to Q70. QUERY\_CONFIRM

**VAR: RELATED\_QUERY**

Format: Character

Width: 1

Q93. Related query response is an enhancement that groups together an initial report and any subsequent revision reports related to the same event submitted by a reporter. How would you rate your level of overall satisfaction with related query response?

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 0 | Not Applicable |
| 1 | Very Dissatisfied |
| 2 | Dissatisfied |
| 3 | Neither Satisfied nor Dissatisfied |
| 4 | Satisfied |
| 5 | Very Satisfied |

**VAR: PRDCT\_SRVCE\_WEBINAR**

Format: Numeric Indicator

Width: 1

Q94A. Are there any products or services that the Data Bank could offer that would enable your organization to make decisions with greater confidence?

0 Not Selected

1 Webinars

**VAR: PRDCT\_SRVCE\_SEMINAR**

Format: Numeric Indicator

Width: 1

Q94B. Are there any products or services that the Data Bank could offer that would enable your organization to make decisions with greater confidence?

0 Not Selected

1 Seminars

**VAR: PRDCT\_SRVCE\_FS**

Format: Numeric Indicator

Width: 1

Q94C. Are there any products or services that the Data Bank could offer that would enable your organization to make decisions with greater confidence?

0 Not Selected

1 Fact Sheets

**VAR: PRDCT\_SRVCE\_HG**

Format: Numeric Indicator

Width: 1

Q94D. Are there any products or services that the Data Bank could offer that would enable your organization to make decisions with greater confidence?

0 Not Selected

1 Help Guides

**VAR: PRDCT\_SRVCE\_BRCHR**

Format: Numeric Indicator

Width: 1

Q94E. Are there any products or services that the Data Bank could offer that would enable your organization to make decisions with greater confidence?

0 Not Selected

1 Brochures

**VAR: PRDCT\_SRVCE\_TUTORIAL**

Format: Numeric Indicator

Width: 1

Q94F. Are there any products or services that the Data Bank could offer that would enable your organization to make decisions with greater confidence?

0 Not Selected

1 Tutorials

**VAR: PRDCT\_SRVCE\_NEWSLTR**

Format: Numeric Indicator

Width: 1

Q94G. Are there any products or services that the Data Bank could offer that would enable your organization to make decisions with greater confidence?

0 Not Selected

1 Newsletter Articles

**VAR: PRDCT\_SRVCE\_OTHR**

Format: Numeric Indicator

Width: 1

Q94H. Are there any products or services that the Data Bank could offer that would enable your organization to make decisions with greater confidence?

0 Not Selected

1 Other (Please Explain)

**VAR: QUERY\_CMNT**

Format: Character

Width: 250

Q95. Please share any other comments that you have about your experience with querying the Data Bank.

* Open Comment Box

**VAR: REPORT\_IND**

Format: Character

Width: 1

Q96. Has your organization reported to the Data Bank between January 2010 and December 2012?

|  |  |
| --- | --- |
| Response | Type of Query |
| 0 | No |
| 1 | Yes, the NPDB (National Practitioner Data Bank) |
| 2 | Yes, the HIPDB (Healthcare Integrity and Protection Data Bank) |
| 3 | Yes, both the NPDB and the HIPDB |
| 9 | Other (Please Explain) |

**APPLIED SKIP LOGIC**

* If Item 96 is any “Yes” then go to Item 97
* Otherwise go to Item 130

**VAR: REPORT\_REQUIRE\_IND**

Format: Character

Width: 1

Q97. Does your organization report to the Data Bank due to legal or regulatory requirements either from a governing body or a national accreditation organization?

|  |  |
| --- | --- |
| Response | Query for Legal or Regulatory Requirements |
| 0 | No |
| 1 | Yes |
| 9 | Other (Please Explain) |

**VAR: REPORT\_AGENT\_IND**

Format: Character

Width: 1

Q98. Does your organization contract with an authorized agent to report to the Data Bank?

|  |  |
| --- | --- |
| Response | Contract Authorized Agent |
| 0 | No |
| 1 | Yes |
| 9 | Other (Please Explain) |

**APPLIED SKIP LOGIC**

* If Item 98 is “Yes” then go to Item 99
* Otherwise go to Item 100

**VAR: AGENT\_ VERIFY\_RPT**

Format: Numeric Indicator

Width: 1

Q99A. What are the reasons that your organization uses an authorized agent to report to the Data Bank?

0 Not Selected

1 Credentialing Verification Organization Does All Primary Source Verification

**VAR: AGENT\_CENTRALCRED\_RPT**

Format: Numeric Indicator

Width: 1

Q99B. What are the reasons that your organization uses an authorized agent to report to the Data Bank?

0 Not Selected

1 Result of Centralized Credentialing

**VAR: AGENT\_VOLUME\_RPT**

Format: Numeric Indicator

Width: 1

Q99C. What are the reasons that your organization uses an authorized agent to report to the Data Bank?

0 Not Selected

1 High Volume Processing Efficiency

**VAR: AGENT\_RESOURCES\_RPT**

Format: Numeric Indicator

Width: 1

Q99D. What are the reasons that your organization uses an authorized agent to report to the Data Bank?

0 Not Selected

1 Not Enough Resources

**VAR: AGENT\_COST\_RPT**

Format: Numeric Indicator

Width: 1

Q99E. What are the reasons that your organization uses an authorized agent to report to the Data Bank?

0 Not Selected

1 Cost Effective

**VAR: AGENT\_OTHER\_RPT**

Format: Numeric Indicator

Width: 1

Q99F. What are the reasons that your organization uses an authorized agent to report to the Data Bank?

0 Not Selected

1 Other (Please Explain)

**APPLIED SKIP LOGIC**

* All responses in Item 99 go to Item 102

**VAR: REPORT\_TIME\_NUM**

Format: Character

Width: 1

Q100. How long has your work responsibilities included having to report to the Data Bank?

|  |  |
| --- | --- |
| Response | Length of Time |
| 0 | Less than 1 year |
| 1 | At least 1 year but less than 2 years |
| 2 | At least 2 years but less than 3 years |
| 3 | At least 3 years but less than 4 years |
| 4 | At least 4 years but less than 5 years |
| 5 | 5 years or more |

**VAR: REPORT\_EASY\_RANK**

Format: Character

Width: 1

Q101A. Please rate your level of agreement with the following statements concerning reporting to the Data Bank?

The first time that I reported to the Data Bank; I found it easy to do.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_INTUITIVE\_RANK**

Format: Character

Width: 1

Q101B. Please rate your level of agreement with the following statements concerning reporting to the Data Bank?

Reporting to the Data Bank is very intuitive; I was able to do it with little to no instruction.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_CONFIDENT\_RANK**

Format: Character

Width: 1

Q101C. Please rate your level of agreement with the following statements concerning reporting to the Data Bank?

I feel confident that I can teach a fellow co-worker how to report to the Data Bank.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_TIMELY\_RANK**

Format: Character

Width: 1

Q101D. Please rate your level of agreement with the following statements concerning reporting to the Data Bank?

I am able to complete all of the tasks of reporting to the Data Bank in a timely manner.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_COMPLEX\_RANK**

Format: Character

Width: 1

Q101E. Please rate your level of agreement with the following statements concerning reporting to the Data Bank?

Reporting to the Data Bank is too complex; it can be simplified for users.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_INSTRUCTION\_RANK**

Format: Character

Width: 1

Q101F. Please rate your level of agreement with the following statements concerning reporting to the Data Bank?

Whenever I report to the Data Bank, I can do it with little to no instruction.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_TASK\_RANK2**

Format: Character

Width: 1

Q101G. Please rate your level of agreement with the following statements concerning reporting to the Data Bank?

I find it hard to remember all of the tasks required to report to the Data Bank.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_DFCLT\_RANK**

Format: Character

Width: 1

Q101H. Please rate your level of agreement with the following statements concerning reporting to the Data Bank?

I have difficulties in completing all of the tasks of reporting to the Data Bank.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_HELP\_RANK**

Format: Character

Width: 1

Q101I. Please rate your level of agreement with the following statements concerning reporting to the Data Bank?

I usually have to ask for help when I report to the Data Bank.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_LEARN\_RANK**

Format: Character

Width: 1

Q101J. Please rate your level of agreement with the following statements concerning reporting to the Data Bank?

I needed to learn a lot of things before I could get going with reporting to the Data Bank.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_PASSWORD**

Format: Numeric Indicator

Width: 1

Q102A. What aspects of reporting to the Data Bank do you consider the most difficult?

0 Not Selected

1 Recalling the password

**VAR: REPORT\_WEBSITE**

Format: Numeric Indicator

Width: 1

Q102B. What aspects of reporting to the Data Bank do you consider the most difficult?

0 Not Selected

1 Locating the website

**VAR: REPORT\_NAVIGATE**

Format: Numeric Indicator

Width: 1

Q102C. What aspects of reporting to the Data Bank do you consider the most difficult?

0 Not Selected

1 Navigating the website

**VAR: REPORT\_INPUT**

Format: Numeric Indicator

Width: 1

Q102D. What aspects of reporting to the Data Bank do you consider the most difficult?

0 Not Selected

1 Collecting all the required input

**VAR: REPORT\_DBASE**

Format: Numeric Indicator

Width: 1

Q102E. What aspects of reporting to the Data Bank do you consider the most difficult?

0 Not Selected

1 Managing a Practitioner (Subject) Database

**VAR: REPORT\_ACCNTS**

Format: Numeric Indicator

Width: 1

Q102F. What aspects of reporting to the Data Bank do you consider the most difficult?

0 Not Selected

1 Managing User Accounts

**VAR: REPORT\_PMTS**

Format: Numeric Indicator

Width: 1

Q102G. What aspects of reporting to the Data Bank do you consider the most difficult?

0 Not Selected

1 Making payments

**VAR: REPORT\_OTHER**

Format: Numeric Indicator

Width: 1

Q102H. What aspects of reporting to the Data Bank do you consider the most difficult?

0 Not Selected

1 Other (Please Explain)

**VAR: REPORT\_FORWARDING**

Format: Character

Width: 1

Q103. When making a report to the Data Bank, does your organization utilize report forwarding in order to send an electronic report to the appropriate state authority?

|  |  |
| --- | --- |
| Response | Report Forwarding |
| 0 | No |
| 1 | Yes |
| 8 | Not Applicable |
| 9 | Other (Please Explain) |

**APPLIED SKIP LOGIC**

* If Item 103 is “Yes” then go to Item 104
* Otherwise go to Item 105

**VAR: REPORT\_FORWARD\_SATISFY**

Format: Character

Width: 1

Q104. How would you rate your level of overall satisfaction with report forwarding?

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 0 | Not Applicable |
| 1 | Very Dissatisfied |
| 2 | Dissatisfied |
| 3 | Neither Satisfied nor Dissatisfied |
| 4 | Satisfied |
| 5 | Very Satisfied |

**VAR: REPORT\_UNDERSTANDING**

Format: Character

Width: 1

Q105. My organization understands all of the circumstances in which a report must be sent to the Data Bank.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_IMPACT**

Format: Character

Width: 1

Q106. Do the reporting requirements to the Data Bank have an impact on how your organization takes action on practitioners??

|  |  |
| --- | --- |
| Response | Report Forwarding |
| 0 | No |
| 1 | Yes |
| 8 | Not Applicable |
| 9 | Other (Please Explain) |

**APPLIED SKIP LOGIC**

* If Item 106 is “Yes” then go to Item 107
* Otherwise go to Item 108

**VAR: REPORT\_REQRMNT\_CMNT**

Format: Character

Width: 250

Q107. Please explain how the reporting requirements to the Data Bank impact how your organization takes action on practitioners.

* Open Comment Box

**VAR: REPORT\_ALLACTIONS**

Format: Character

Width: 1

Q108. During the past calendar year, my organization has reported all reportable actions to the Data Bank.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: CIVIL\_LAWSUIT**

Format: Character

Width: 1

Q109. Has your organization ever been named in a civil lawsuit action by a practitioner due to reporting the practitioner to the Data Bank?

|  |  |
| --- | --- |
| Response | Report Forwarding |
| 0 | No |
| 1 | Yes |
| 9 | Other (Please Explain) |

**VAR: REPORT\_CMNT**

Format: Character

Width: 250

Q110. Please share any other comments that you have considering your experiences with reporting to the Data Bank.

* Open Comment Box

**APPLIED SKIP LOGIC**

* All responses in Item 110 go to Item 130

**VAR: REPORT\_IND2**

Format: Character

Width: 1

Q111. Has your organization reported to the Data Bank between January 2010 and December 2012?

|  |  |
| --- | --- |
| Response | Type of Query |
| 0 | No |
| 1 | Yes, the NPDB (National Practitioner Data Bank) |
| 2 | Yes, the HIPDB (Healthcare Integrity and Protection Data Bank) |
| 3 | Yes, both the NPDB and the HIPDB |
| 9 | Other (Please Explain) |

**Similar to Q96. REPORT\_IND**

**APPLIED SKIP LOGIC**

* If Item 111 is any “Yes” then go to Item 112
* Otherwise go to Item 126

**VAR: REPORT\_REQUIRE\_IND2**

Format: Character

Width: 1

Q112. Does your organization report to the Data Bank due to legal or regulatory requirements either from a governing body or a national accreditation organization?

|  |  |
| --- | --- |
| Response | Query for Legal or Regulatory Requirements |
| 0 | No |
| 1 | Yes |
| 9 | Other (Please Explain) |

**VAR: REPORT\_AGENT\_IND2**

Format: Character

Width: 1

Q113. Does your organization contract with an authorized agent to report to the Data Bank?

|  |  |
| --- | --- |
| Response | Contract Authorized Agent |
| 0 | No |
| 1 | Yes |
| 9 | Other (Please Explain) |

**APPLIED SKIP LOGIC**

* If Item 113 is “Yes” then go to Item 114
* Otherwise go to Item 115

**VAR: AGENT\_ VERIFY\_RPT2**

Format: Numeric Indicator

Width: 1

Q114A. What are the reasons that your organization uses an authorized agent to report to the Data Bank?

0 Not Selected

1 Credentialing Verification Organization Does All Primary Source Verification

**VAR: AGENT\_CENTRALCRED\_RPT2**

Format: Numeric Indicator

Width: 1

Q114B. What are the reasons that your organization uses an authorized agent to report to the Data Bank?

0 Not Selected

1 Result of Centralized Credentialing

**VAR: AGENT\_VOLUME\_RPT2**

Format: Numeric Indicator

Width: 1

Q114C. What are the reasons that your organization uses an authorized agent to report to the Data Bank?

0 Not Selected

1 High Volume Processing Efficiency

**VAR: AGENT\_RESOURCES\_RPT2**

Format: Numeric Indicator

Width: 1

Q114D. What are the reasons that your organization uses an authorized agent to report to the Data Bank?

0 Not Selected

1 Not Enough Resources

**VAR: AGENT\_COST\_RPT2**

Format: Numeric Indicator

Width: 1

Q114E. What are the reasons that your organization uses an authorized agent to report to the Data Bank?

0 Not Selected

1 Cost Effective

**VAR: AGENT\_OTHER\_RPT2**

Format: Numeric Indicator

Width: 1

Q114F. What are the reasons that your organization uses an authorized agent to report to the Data Bank?

0 Not Selected

1 Other (Please Explain)

**APPLIED SKIP LOGIC**

* All responses in Item 114 go to Item 117

**VAR: REPORT\_TIME\_NUM**

Format: Character

Width: 1

Q115. How long has your work responsibilities included having to report to the Data Bank?

|  |  |
| --- | --- |
| Response | Length of Time |
| 0 | Less than 1 year |
| 1 | At least 1 year but less than 2 years |
| 2 | At least 2 years but less than 3 years |
| 3 | At least 3 years but less than 4 years |
| 4 | At least 4 years but less than 5 years |
| 5 | 5 years or more |

**VAR: REPORT\_EASY\_RANK2**

Format: Character

Width: 1

Q116A. Please rate your level of agreement with the following statements concerning reporting to the Data Bank?

The first time that I reported to the Data Bank; I found it easy to do.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_INTUITIVE\_RANK2**

Format: Character

Width: 1

Q116B. Please rate your level of agreement with the following statements concerning reporting to the Data Bank?

Reporting to the Data Bank is very intuitive; I was able to do it with little to no instruction.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_CONFIDENT\_RANK2**

Format: Character

Width: 1

Q116C. Please rate your level of agreement with the following statements concerning reporting to the Data Bank?

I feel confident that I can teach a fellow co-worker how to report to the Data Bank.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_TIMELY\_RANK2**

Format: Character

Width: 1

Q116D. Please rate your level of agreement with the following statements concerning reporting to the Data Bank?

I am able to complete all of the tasks of reporting to the Data Bank in a timely manner.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_COMPLEX\_RANK2**

Format: Character

Width: 1

Q116E. Please rate your level of agreement with the following statements concerning reporting to the Data Bank?

Reporting to the Data Bank is too complex; it can be simplified for users.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_INSTRUCTION\_RANK2**

Format: Character

Width: 1

Q116F. Please rate your level of agreement with the following statements concerning reporting to the Data Bank?

Whenever I report to the Data Bank, I can do it with little to no instruction.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_TASK\_RANK2**

Format: Character

Width: 1

Q116G. Please rate your level of agreement with the following statements concerning reporting to the Data Bank?

I find it hard to remember all of the tasks required to report to the Data Bank.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_DFCLT\_RANK2**

Format: Character

Width: 1

Q116H. Please rate your level of agreement with the following statements concerning reporting to the Data Bank?

I have difficulties in completing all of the tasks of reporting to the Data Bank.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_HELP\_RANK2**

Format: Character

Width: 1

Q116I. Please rate your level of agreement with the following statements concerning reporting to the Data Bank?

I usually have to ask for help when I report to the Data Bank.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_LEARN\_RANK2**

Format: Character

Width: 1

Q116J. Please rate your level of agreement with the following statements concerning reporting to the Data Bank?

I needed to learn a lot of things before I could get going with reporting to the Data Bank.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_PASSWORD2**

Format: Numeric Indicator

Width: 1

Q117A. What aspects of reporting to the Data Bank do you consider the most difficult?

0 Not Selected

1 Recalling the password

**VAR: REPORT\_WEBSITE2**

Format: Numeric Indicator

Width: 1

Q117B. What aspects of reporting to the Data Bank do you consider the most difficult?

0 Not Selected

1 Locating the website

**VAR: REPORT\_NAVIGATE2**

Format: Numeric Indicator

Width: 1

Q117C. What aspects of reporting to the Data Bank do you consider the most difficult?

0 Not Selected

1 Navigating the website

**VAR: REPORT\_INPUT2**

Format: Numeric Indicator

Width: 1

Q117D. What aspects of reporting to the Data Bank do you consider the most difficult?

0 Not Selected

1 Collecting all the required input

**VAR: REPORT\_DBASE2**

Format: Numeric Indicator

Width: 1

Q117E. What aspects of reporting to the Data Bank do you consider the most difficult?

0 Not Selected

1 Managing a Practitioner (Subject) Database

**VAR: REPORT\_ACCNTS2**

Format: Numeric Indicator

Width: 1

Q117F. What aspects of reporting to the Data Bank do you consider the most difficult?

0 Not Selected

1 Managing User Accounts

**VAR: REPORT\_PMTS2**

Format: Numeric Indicator

Width: 1

Q117G. What aspects of reporting to the Data Bank do you consider the most difficult?

0 Not Selected

1 Making payments

**VAR: REPORT\_OTHER2**

Format: Numeric Indicator

Width: 1

Q117H. What aspects of reporting to the Data Bank do you consider the most difficult?

0 Not Selected

1 Other (Please Explain)

**VAR: REPORT\_FORWARDING2**

Format: Character

Width: 1

Q118. When making a report to the Data Bank, does your organization utilize report forwarding in order to send an electronic report to the appropriate state authority?

|  |  |
| --- | --- |
| Response | Report Forwarding |
| 0 | No |
| 1 | Yes |
| 8 | Not Applicable |
| 9 | Other (Please Explain) |

**APPLIED SKIP LOGIC**

* If Item 118 is “Yes” then go to Item 119

Otherwise go to Item 120

**VAR: REPORT\_FORWARD\_SATISFY2**

Format: Character

Width: 1

Q119. How would you rate your level of overall satisfaction with report forwarding?

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 0 | Not Applicable |
| 1 | Very Dissatisfied |
| 2 | Dissatisfied |
| 3 | Neither Satisfied nor Dissatisfied |
| 4 | Satisfied |
| 5 | Very Satisfied |

**VAR: REPORT\_UNDERSTANDING2**

Format: Character

Width: 1

Q120. My organization understands all of the circumstances in which a report must be sent to the Data Bank.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: REPORT\_IMPACT2**

Format: Character

Width: 1

Q121. Do the reporting requirements to the Data Bank have an impact on how your organization takes action on practitioners??

|  |  |
| --- | --- |
| Response | Report Forwarding |
| 0 | No |
| 1 | Yes |
| 8 | Not Applicable |
| 9 | Other (Please Explain) |

**APPLIED SKIP LOGIC**

* If Item 121 is “Yes” then go to Item 122
* Otherwise go to Item 123

**VAR: REPORT\_REQRMNT\_CMNT2**

Format: Character

Width: 250

Q122. Please explain how the reporting requirements to the Data Bank impact how your organization takes action on practitioners.

* Open Comment Box

Similar to Q107 **REPORT\_REQRMNT\_CMNT**

**VAR: REPORT\_ALLACTIONS2**

Format: Character

Width: 1

Q123. During the past calendar year, my organization has reported all reportable actions to the Data Bank.

|  |  |
| --- | --- |
| Ranking | Level of Agreement |
| 1 | Completely Disagree |
| 2 | Disagree |
| 3 | Neither Agree Nor Disagree |
| 4 | Agree |
| 5 | Completely Agree |

**VAR: CIVIL\_LAWSUIT2**

Format: Character

Width: 1

Q124. Has your organization ever been named in a civil lawsuit action by a practitioner due to reporting the practitioner to the Data Bank?

|  |  |
| --- | --- |
| Response | Report Forwarding |
| 0 | No |
| 1 | Yes |
| 9 | Other (Please Explain) |

**VAR: REPORT\_CMNT2**

Format: Character

Width: 250

Q125. Please share any other comments that you have considering your experiences with reporting to the Data Bank.

* Open Comment Box

**APPLIED SKIP LOGIC**

* All responses in Item 125 go to Item 130

**VAR: HEARD\_OF\_NPDB**

Format: Character

Width: 1

Q126. Prior to this survey, has your organization ever heard of the National Practitioner Data Bank or the NPDB?

|  |  |
| --- | --- |
| Response | Heard of the NPDB |
| 0 | No |
| 1 | Yes |
| 9 | Other (Please Explain) |

**VAR: AWARENESS\_SERVICES**

Format: Character

Width: 1

Q127. Is your organization aware of the services that the Health Resources and Services Administration (HRSA) provide organizations related to issues in the health care industry?

|  |  |
| --- | --- |
| Response | Awareness of HRSA Services |
| 0 | No |
| 1 | Yes |
| 9 | Other (Please Explain) |

**VAR: SOUGHT\_DHHS\_SERVICES**

Format: Character

Width: 1

Q128. Has your organization ever sought services from the Department of Health and Human Services (DHHS) of the United States of America?

|  |  |
| --- | --- |
| Response | Sought DHHS Services |
| 0 | No |
| 1 | Yes |
| 9 | Other (Please Explain) |

**VAR: USEFUL\_CMNT**

Format: Character

Width: 250

Q129. How can the Data Bank be more useful to you?

* Open Comment Box

**APPLIED SKIP LOGIC**

* All responses in Item 129 go to END

Item 130. Please rate your level of satisfaction with each of the following resources. *(Only one answer per row.)*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Resource** | **Very Satisfied** | **Satisfied** | **Neither Satisfied Nor Dissatisfied** | **Dissatisfied** | **Very Dissatisfied** | **Not Applicable** |
| Data Bank Newsletters |  |  |  |  |  |  |
| Fact Sheets |  |  |  |  |  |  |
| Informational Brochures |  |  |  |  |  |  |
| NPDB Guidebook |  |  |  |  |  |  |
| Customer Service Center (800-767-6732) |  |  |  |  |  |  |
| Health Resources and Services Administration |  |  |  |  |  |  |

Item 131. Every time I contact the Customer Service Center, they are effective in resolving all of my issues and concerns.

* Completely Agree
* Agree
* Neither Agree Nor Disagree
* Disagree
* Completely Disagree
* Not Applicable

Item 132. If you have had any experiences where the Customer Service Center has failed in meeting your needs, please list the issues you sought assistance for and failed to receive.

* Open Comment Box

Item 133. Customer service hours are: Monday – Thursday 8:30am – 6:00pm, Friday 8:30am – 5:30pm. Are the customer service hours sufficient?

* Yes
* No
* Other (Please Explain)

Item 134. Has the Guidebook, the hard copy or the web version, been a helpful resource in reporting to the Data Bank?

* Yes
* No
* Not Applicable
* Other (Please Explain)

**APPLIED SKIP LOGIC**

* If Item 134 is “No” then go to Item 135
* Otherwise go to Item 136

**VAR: GUIDEBOOK\_CMNT**

Format: Character

Width: 250

Q135. Concerning the Guidebook, what was not helpful?

* Open Comment Box

Item 136. Please rate your organization’s level of overall satisfaction with the Data Bank.

* Very Satisfied
* Satisfied
* Neither Satisfied Nor Dissatisfied
* Dissatisfied
* Very Dissatisfied

**VAR: COMMENT\_SHARE**

Format: Character

Width: 250

Q137. Please share any other comments that you have regarding your experiences with the Data Bank.?

* Open Comment Box

**END**

**Thank you for your participation with the Eligible Users of the National Practitioner Data Bank Survey!**

*If you have time for just three more optional items, your participation would be greatly appreciated.*

*Optional Survey Items:*

**VAR: SPECIAL\_ITEM1**

Format: Character

Width: 1

SI1. Prior to taking this survey, were you aware of the merge of the National Practitioner Data Bank (NPDB) and the Health Integrity and Protection Data Bank (HIPDB)?

|  |  |
| --- | --- |
| Ranking | Different Actions If No Matched Response |
| 0 | No |
| 1 | Yes |
| 9 | Other (Please Explain) |

**VAR: SPECIAL\_ITEM2**

Format: Character

Width: 250

SI2. Have you experienced any benefits by the merge of the NPDB and the HIPDB?

* Open Comment Box

**VAR: SPECIAL\_ITEM3**

Format: Character

Width: 250

SI3. Have you experienced any drawbacks due to the merge of the NPDB and the HIPDB?

* Open Comment Box

*Thank you for your participation in the optional survey concerning the NPDB and HIPDB!*

**\*\* Under development\*\***

**Index to the Data Set: Self-Query Survey Component**

|  |  |  |
| --- | --- | --- |
| Column Number | Variable Name | Question Number |
|  | ID | Q1 |
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**Survey of the Eligible Users of the National Practitioner Data Bank**

**Self-Query Component**

Internet-Based Survey Conducted by Cherry Tree BSC

**Directions:** For each of the following items, please select the response that best represents your experiences. Please note that the National Practitioner Data Bank will be referred to as the “Data Bank” in items throughout the survey.

**\*\* Under Development\*\***

Item 1. Which category best describes the work you perform?

* Health Care Practitioner (Individual)
* Medical Service Provider Organization
* Medical Supplier Organization

**(SKIP LOGIC)**

* If Item 1 is “Health Care Practitioner” then go to Item 2
* If Item 1 is “Medical Service Provider” then go to Item 48
* Otherwise go to Item 49

Item 2. Have you self-queried the Data Bank?

* Yes
* No
* Other (Please Explain)

**(SKIP LOGIC)**

* If Item 2 is “Yes” then go to Item 3
* Otherwise go to END

Item 3. Are you involved in a dispute process with the Data Bank? (Also known as Secretarial Review)

* Yes
* No
* Other (Please Explain)

**(SKIP LOGIC)**

* If Item 3 is “No” then go to Item 4
* Otherwise go to END

Item 4. Which category best describes your work status in the health care industry?

* Full-time position for at least one health care organization
* Not full-time but part-time at one or more health care organizations
* Retired but working part-time for one or more health care organizations
* Retired and not working for any health care organization
* Currently not employed at any health care organization

**(SKIP LOGIC)**

* If Item 4 is “Full-time position…” then go to Item 5
* If Item 4 is “Not full-time but part-time…” then go to Item 5
* If Item 4 is “Retired but working part-time…” then go to Item 5
* Otherwise go to Item 10

Item 5. Please select your current primary practicing position held as a health care practitioner.

* Physician (Doctor of Medicine)
* Physician (Doctor of Osteopathy)
* Physician Assistant
* Dentist
* Dental Hygienist
* Advance Practice Nurse
* Licensed Practice Nurse
* Para-Professional Nurse
* Chiropractor
* Pharmacist
* Other (Please Explain)

Item 6. Do you currently practice at more than one facility?

* Yes
* No
* Other (Please Explain)

Item 7. Do you work for any health care organization as locum tenens?

* Yes
* No
* Other (Please Explain)

Item 8. Please select the jurisdiction(s) in which you practice the majority of the time. You may select up to five.

List of States & Territories

Item 9. Please select the jurisdiction(s) in which you are currently licensed or certified to practice. You may select up to five.

List of States & Territories

**(SKIP LOGIC)**

* All responses in Item 9 go to Item 16

Item 10. Have you ever held a position as a health care practitioner?

* Yes
* No
* Other (Please Explain)

**(SKIP LOGIC)**

* If Item 10 is “Yes” then go to Item 11
* Otherwise go to Item 16

Item 11. Please select your last primary practicing position held as a health care practitioner.

* Physician (Doctor of Medicine)
* Physician (Doctor of Osteopathy)
* Physician Assistant
* Dentist
* Dental Hygienist
* Advance Practice Nurse
* Licensed Practical Nurse
* Para-Professional Nurse
* Chiropractor
* Pharmacist
* Other (Please Explain)

Item 12. Did you practice at more than one facility simultaneously while you held your last primary practicing position?

* Yes
* No
* Other (Please Explain)

Item 13. Did you work as locum tenens at any facility while you held your last primary practicing position?

* Yes
* No
* Other (Please Explain)

Item 14. Please select the jurisdiction(s) in which you practiced the majority of the time. You may select up to five.

List of States & Territories

Item 15. Please select the jurisdiction(s) in which you were licensed or certified to practice while you held your last primary practicing position. You may select up to five.

List of States & Territories

Item 16. Are you currently seeking employment?

* Yes
* No
* Other (Please Explain)

**(SKIP LOGIC)**

* If Item 16 is “Yes” then go to Item 17
* Otherwise go to Item 20

Item 17. In what field are you seeking employment?

* Seeking Employment as a Health Care Practitioner
* Seeking Employment in Another Field (Please Explain)

**(SKIP LOGIC)**

* If Item 17 is “Seeking Employment as a Health Care Practitioner” then go to Item 18
* Otherwise go to Item 20

Item 18. Please select that health care practitioner position that you are seeking to obtain.

* Physician (Doctor of Medicine)
* Physician (Doctor of Osteopathy)
* Physician Assistant
* Dentist
* Dental Hygienist
* Advance Practice Nurse
* Licensed Practical Nurse
* Para-Professional Nurse
* Chiropractor
* Pharmacist
* Other (Please Explain)

Item 19. Please select the jurisdiction(s) in which you are seeking licensure, certification, and/or employment. You may select up to five.

List of States & Territories

Item 20. Please rate your level of overall satisfaction with self-query.

* Very Satisfied
* Satisfied
* Neither Satisfied Nor Dissatisfied
* Dissatisfied
* Very Dissatisfied

Item 21. How many times have you performed a self-query?

* 1
* 2
* 3 or more

Item 22. What was the purpose of your self-query? *(Please select all that apply.)*

* I was notified that I was the subject of a report in the Data Bank
* I voluntarily self-queried for resume purposes
* I voluntarily self-queried for personal status check
* Required by potential employer – Hospital
* Required by potential employer – Managed Care Organization
* Required by potential employer – Group Practice
* Required by potential employer – Clinic or Urgent Care Facility
* Required by the State Licensing Board
* Required by Insurance Agency
* Required by Professional Society
* Required by Other State Agency
* Required by Federal Agency
* Other (Please Explain)

Item 23. Have you requested multiple copies of the results of the self-query?

* I have never requested multiple copies
* I requested the Data Bank to provide a report to someone other than myself
* I requested multiple copies to provide with my resume
* I requested multiple copies for the State Licensing Board
* I requested multiple copies for another entity (Please Provide Entity)
* Other reasons for requesting multiple copies (Please Explain)
* Not Applicable

Item 24. If you requested a response to be mailed, were there any difficulties?

* Yes
* No
* Unknown
* Not Applicable
* Other (Please Explain)

**(SKIP LOGIC)**

* If Item 24 is “Yes” then go to Item 25
* Otherwise go to Item 26

Item 25. Please explain the difficulties that you experienced.

* Open Comment

Item 26. Have you ever not finished the process of self-query?

* Yes
* No
* Unknown
* Other (Please Explain)

**(SKIP LOGIC)**

* If Item 26 is “Yes” then go to Item 27
* Otherwise go to Item 28

Item 27. Please select the reasons for not completing the self-query process. *(Please select all that apply.)*

* Process Complexity
* The Notary Process
* Paper Copy Requirement
* Other (Please Explain)

Item 28. I feel that the information I received from the Data Bank is accurate.

* Completely Agree
* Agree
* Neither Agree Nor Disagree
* Disagree
* Completely Disagree

Item 29. I feel that the information that I received from the Data Bank is complete.

* Completely Agree
* Agree
* Neither Agree Nor Disagree
* Disagree
* Completely Disagree

Item 30. I feel that I have received information from the self-query in a timely manner.

* Completely Agree
* Agree
* Neither Agree Nor Disagree
* Disagree
* Completely Disagree

Item 31. How would you rate the cost of self-query?

* Very Expensive
* Expensive
* Fair Cost
* Inexpensive
* Very Inexpensive

Item 32. Have you ever been the subject of a report in the Data Bank?

* Yes
* No
* Other (Please Explain)

**(SKIP LOGIC)**

* If Item 32 is “Yes” then go to Item 33
* Otherwise go to Item 43

Item 33. What types of reports does the Data Bank contain in which you are a subject? *(Please select all that apply.)*

* State Licensure Action Report
* DEA/Federal Licensure Action Report
* Title IV Clinical Privileges Action Report
* Health Plan Action Report
* Exclusion/Debarment Action Report
* Professional Society Action Report
* Peer Review Organization Action Report
* Accreditation Action Report
* Government Administrative Action Report
* Reinstatement Report
* Criminal Conviction Report
* Deferred Conviction or Pre-Trial Diversion Report
* Nolo Contendere (No Contest) Plea Report
* Civil Judgment Report
* Injunction Report
* Medical Malpractice Payment Report
* Other (Please Explain)

Item 34. If you have suffered loss of employment or loss of clinical privileges due to having a Data Bank report, have you been able to remain or return to the same position?

* Yes
* No
* Other (Please Explain)

**(SKIP LOGIC)**

* If Item 34 is “No” then go to Item 35
* Otherwise go to Item 36

Item 35. Have you been able or will you be able to obtain a similar position in the health care industry?

* Yes
* No
* Other (Please Explain)

Item 36. Do you feel that your career opportunities are affected by having a report in the Data Bank?

* Yes
* No
* Other (Please Explain)

Item 37. When you were first notified of being a subject of a report in the Data Bank, did you work at or have clinical privileges at two or more facilities simultaneously?

* Yes
* No
* Other (Please Explain)

**(SKIP LOGIC)**

* If Item 37 is “Yes” then go to Item 38
* Otherwise go to Item 40

**Directions:** For Item 38 and Item 39, we are interested in gathering your experiences in the case you have held several positions simultaneously. In order to aid in your understanding of the items, several definitions must be made prior to your selection of responses.

Item 38 and Item 39 are not limited to your primary or secondary employer.

The first employer is defined as the employer that was first to have knowledge of the report in the Data Bank. This may or may not be your primary employer.

The second employer is defined as the subsequent employer who may or may not have gained knowledge from the Data Bank.

Item 38. If you held positions in more than one facility at the same time, how long did it take the second employer to contact you regarding a report in the Data Bank that was previously known by the first employer?

* Less than 1 year
* At least 1 year but less than 2 years
* At least 2 years but less than 3 years
* 3 or more years
* Never
* Unknown
* Not Applicable
* Other (Please Explain)

Item 39. If you held positions in more than one facility at the same time, what type of actions were taken by the second employer as a result of you having a report in the Data Bank? *(Please select all that apply.)*

* No Action Taken
* Declined as a Candidate
* Restricted Clinical Privileges
* Probation
* Suspension
* License Revocation
* Membership Revocation
* Membership Restrictions
* Employment or Contract Termination
* Legal Actions
* Not Applicable
* Unknown
* Other (Please Explain)

Item 40. Have you provided a copy of a report containing adverse action information from a self-query which ultimately resulted in an organization denying licensure, certification, clinical privileges, or some other action?

* Yes
* No
* Not Applicable
* Other (Please Explain)

Item 41. Have you provided a copy of a report containing medical malpractice payment information from a self-query which ultimately resulted in an organization denying licensure, certification, clinical privileges, or some other action?

* Yes
* No
* Not Applicable
* Other (Please Explain)

Item 42. Please explain how you feel about being the subject of a report in the Data Bank.

* Open Comment

**Directions:** Consider the Data Bank reports listed below. Please rate the effect of having such a report in the Data Bank on your ability to find employment or acquire clinical privileges if you were to have such a report in the Data Bank.

Item 43. Consideration: Please rate the effect on your ability to find employment or acquire clinical privileges if you were to have such a report in the Data Bank. *(Only one answer per row.)*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Action Report Type** | **Very Strong** | **Strong** | **Moderate** | **Weak** | **Very Weak** | **None** | **N/A** |
| State Licensure |  |  |  |  |  |  |  |
| DEA/Federal Licensure |  |  |  |  |  |  |  |
| Title IV Clinical Privileges |  |  |  |  |  |  |  |
| Health Plan |  |  |  |  |  |  |  |
| Exclusion/Debarment |  |  |  |  |  |  |  |
| Professional Society |  |  |  |  |  |  |  |
| Peer Review Organization |  |  |  |  |  |  |  |
| Accreditation |  |  |  |  |  |  |  |
| Government Administrative |  |  |  |  |  |  |  |
| Reinstatement |  |  |  |  |  |  |  |
| Criminal Conviction |  |  |  |  |  |  |  |
| Deferred Conviction or Pre-Trial Diversion |  |  |  |  |  |  |  |
| Nolo Contendere (No Contest) Plea |  |  |  |  |  |  |  |
| Civil Judgment |  |  |  |  |  |  |  |
| Injunction |  |  |  |  |  |  |  |
| Medical Malpractice Payment |  |  |  |  |  |  |  |

Item 44. Please rate your level of satisfaction with each of the following resources. *(Only one answer per row.)*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Resource** | **Very Satisfied** | **Satisfied** | **Neither Satisfied Nor Dissatisfied** | **Dissatisfied** | **Very Dissatisfied** | **Not Applicable** |
| Data Bank Newsletters |  |  |  |  |  |  |
| Fact Sheets |  |  |  |  |  |  |
| Informational Brochures |  |  |  |  |  |  |
| NPDB Guidebook |  |  |  |  |  |  |
| Customer Service Center (800-767-6732) |  |  |  |  |  |  |
| Health Resources and Services Administration |  |  |  |  |  |  |

Item 45. The Customer Service Center has been effective in resolving my issues and concerns.

* Completely Agree
* Agree
* Neither Agree Nor Disagree
* Disagree
* Completely Disagree
* Not Applicable

Item 46. Please list the issues involved where you sought assistance and the Customer Service Center failed meeting your needs.

* Open Comment

Item 47. Please rate your level of agreement with the following statements concerning the NPDB website. *(Only one answer per row.)*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Statement** | **Completely Agree** | **Agree** | **Neither Agree Nor Disagree** | **Disagree** | **Completely Disagree** |
| The NPDB website is easy to navigate. |  |  |  |  |  |
| The NPDB website is well organized. |  |  |  |  |  |
| I am able to quickly find what I need on the NPDB website. |  |  |  |  |  |
| The NPDB website content is easy to understand. |  |  |  |  |  |

**(SKIP LOGIC)**

* All responses in Item 47 go to Item 72

Item 48. What types of health care services does your organization provide?

* Open Comment

**(SKIP LOGIC)**

* All responses in Item 48 go to Item 50

Item 49. What types of health care products does your organization produce or distribute?

* Open Comment

Item 50. Has your organization self-queried the Data Bank?

* Yes
* No
* Other (Please Explain)

**(SKIP LOGIC)**

* If Item 50 is “Yes” then go to Item 51
* Otherwise go to END

Item 51. Is your organization involved in a dispute process with the Data Bank? (Also known as Secretarial Review)

* Yes
* No
* Other (Please Explain)

**(SKIP LOGIC)**

* If Item 51 is “Yes” then go to END
* Otherwise go to Item 52

Item 52. In which jurisdiction is your organization located?

* List of States & Territories

Item 53. Please rate your organization’s level of overall satisfaction with self-query.

* Very Satisfied
* Satisfied
* Neither Satisfied Nor Dissatisfied
* Dissatisfied
* Very Dissatisfied

Item 54. How many times has your organization performed a self-query?

* 1
* 2
* 3 or more

Item 55. What was the purpose of your organization’s self-query? *(Please select all that apply.)*

* Required by a State Agency
* Required by a Federal Agency
* My organization was notified of being the subject of a Data Bank report
* My organization voluntarily performed self-query as a status check
* Required by Insurance Agency
* Other (Please Explain)

Item 56. If your organization has requested a response to be mailed, were there any difficulties?

* Yes
* No
* Unknown
* Not Applicable
* Other (Please Explain)

**(SKIP LOGIC)**

* If Item 56 is “Yes” then go to Item 57
* Otherwise go to Item 58

Item 57. Please explain the difficulties that your organization experienced.

* Open Comment

Item 58. Has your organization ever not finished the process of a self-query?

* Yes
* No
* Other (Please Explain)

**(SKIP LOGIC)**

* If Item 58 is “Yes” then go to Item 59
* Otherwise go to Item 60

Item 59. Please select the reasons for not completing the self-query process. *(Select all that apply.)*

* Process Complexity
* The Notary Process
* Paper Copy Requirement
* Other (Please Explain)

Item 60. My organization feels that the information we received from the Data Bank is accurate.

* Completely Agree
* Agree
* Neither Agree Nor Disagree
* Disagree
* Completely Disagree

Item 61. My organization feels that the information that we received from the Data Bank is complete.

* Completely Agree
* Agree
* Neither Agree Nor Disagree
* Disagree
* Completely Disagree

Item 62. My organization feels that we have received information from the self-query in a timely manner.

* Completely Agree
* Agree
* Neither Agree Nor Disagree
* Disagree
* Completely Disagree

Item 63. How would your organization rate the cost of the self-query?

* Very Expensive
* Expensive
* Fair Cost
* Inexpensive
* Very Inexpensive

Item 64. Has your organization ever been the subject of a report in the Data Bank?

* Yes
* No
* Other (Please Explain)

**(SKIP LOGIC)**

* If Item 64 is “Yes” then go to Item 65
* Otherwise go to Item 68

Item 65. What type of report does the Data Bank contain regarding your organization? *(Please select all that apply.)*

* State Licensure Action Report
* DEA/Federal Licensure Action Report
* Title IV Clinical Privileges Action Report
* Health Plan Action Report
* Exclusion/Debarment Action Report
* Professional Society Action Report
* Peer Review Organization Action Report
* Accreditation Action Report
* Government Administrative Action Report
* Reinstatement Report
* Criminal Conviction Report
* Deferred Conviction or Pre-Trial Diversion Report
* Nolo Contendere (No Contest) Plea Report
* Civil Judgment Report
* Injunction Report
* Medical Malpractice Payment Report
* Other (Please Explain)

Item 66. Does having a report in the Data Bank have an impact on your business?

* Yes
* No
* Other (Please Explain)

**(SKIP LOGIC)**

* If Item 66 is “Yes” then go to Item 67
* Otherwise go to Item 68

Item 67. Please explain how having a Data Bank report impacts your business.

* Open Comment

Item 68. Please rate your organization’s level of satisfaction with the following resources. *(Only one answer per row.)*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Resource** | **Very Satisfied** | **Satisfied** | **Neither Satisfied Nor Dissatisfied** | **Dissatisfied** | **Very Dissatisfied** | **Not Applicable** |
| Data Bank Newsletters |  |  |  |  |  |  |
| Fact Sheets |  |  |  |  |  |  |
| Informational Brochures |  |  |  |  |  |  |
| NPDB Guidebook |  |  |  |  |  |  |
| Customer Service Center (800-767-6732) |  |  |  |  |  |  |
| Health Resources and Services Administration |  |  |  |  |  |  |

Item 69. The Customer Service Center has been effective in resolving our organization’s issues and concerns.

* Completely Agree
* Agree
* Neither Agree Nor Disagree
* Disagree
* Completely Disagree
* Not Applicable

Item 70. Please list issues involved where you sought assistance and the Customer Service Center failed in meeting your organization’s needs.

* Open Comment

Item 71. Please rate your organization’s level of agreement with the following statements concerning the Data Bank website. *(Only one answer per row.)*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Statement** | **Completely Agree** | **Agree** | **Neither Agree Nor Disagree** | **Disagree** | **Completely Disagree** |
| The NPDB website is easy to navigate. |  |  |  |  |  |
| The NPDB website is well organized. |  |  |  |  |  |
| I am able to quickly find what I need on the NPDB website. |  |  |  |  |  |
| The NPDB website content is easy to understand. |  |  |  |  |  |

Item 72. Please share any comments regarding experiences with self-querying the Data Bank.

* Open Comment

**END**

**Thank you for your participation with the Eligible Users of the National Practitioner Data Bank Survey!**

*If you have time for just three more optional items, your participation would be greatly appreciated.*

*Optional Survey Items:*

**VAR: SPECIAL\_ITEM1**

Format: Character

Width: 1

SI1. Prior to taking this survey, were you aware of the merge of the National Practitioner Data Bank (NPDB) and the Health Integrity and Protection Data Bank (HIPDB)?

|  |  |
| --- | --- |
| Ranking | Different Actions if no matched response |
| 0 | No |
| 1 | Yes |
| 9 | Other (Please Explain) |

**VAR: SPECIAL\_ITEM2**

Format: Character

Width: 250

SI2. Have you experienced any benefits by the merge of the NPDB and the HIPDB?

* Open Comment Box

**VAR: SPECIAL\_ITEM3**

Format: Character

Width: 250

SI3. Have you experienced any drawbacks due to the merge of the NPDB and the HIPDB?

* Open Comment Box

*Thank you for your participation in the optional survey concerning the NPDB and HIPDB!*