Register Your Organiza...

NATIONAL PRACTITIONER DATA BANK

PDB

What do you need to do?

- Become an NPDB administrato
- Register my organization
- Get help for an NPDB account
- Get a NPDB Self-Query report
- Something else

burden statement

tinue to Next Step

Public Burden Statement

✕

OMB # 0915-0126 expiration date MM/DD/YY

<u>Public Burden Statement:</u> An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0915-0126. Public reporting burden for this collection of information is estimated to average 1 hour to complete this form, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N-39, Rockville, Maryland, 20857.

Close

Register Your Organization

What do you need to do?

○ Become an NPDB administrator to replace the previous one

● Register my organization

   ○ Register for a new NPDB account for my organization

   ○ Renew or update my organization's NPDB registration

   ○ Request another DBID for my organization's NPDB account

○ Get help for an NPDB account

○ Get a NPDB Self-Query report

○ Something else

Exit   **Continue to Next Step**

Register Your Organization with the NPDB

Public burden statement

Registration Checklist

1. **Have you identified the person who will serve as the certifying official for your organization?**

   You are registering your organization, so you will be the NPDB administrator. The NPDB also requires someone to serve as the certifying official, someone that can certify that your organization is legitimate and eligible to register with the NPDB. In most cases, the administrator also serves as the certifying official. In some cases, the certifying official is someone other than the NPDB administrator, who is in a management or executive role. A certifying official who is not the NPDB administrator will not have access to the NPDB until the administrator creates an account for them.

   If you will not be the certifying official, you will need to know how that person's name is listed on their government-issued ID, such as their driver's license. This is important because you and the certifying official must complete a paper form in front of a notary public and show them the ID. The paper form will show the name you enter online and the notary must verify that it matches the name on their ID.

2. **Do you know the tax identification number for your organization?**

   You will need to know the Employer Identification Number (EIN) assigned to your organization by the IRS. If your organization is not required to have an EIN (e.g. a sole proprietorship) enter your Social Security Number (SSN) or Individual Tax Identification Number (ITIN) instead.

3. **Are there other identification numbers assigned to your organization?**

   If your organization has a National Provider Identification (NPI) you will need to provide it. Hospitals should also add their CMS Certification Number (CCN), the provider number assigned for Medicare.

   If you do not have this information, please Exit and return to registration later.

Exit   Continue to Next Step

Rules of Behavior

You are accessing a U.S. Government information system. This information system is provided for U.S. Government authorized use only. Unauthorized or improper use of this system may result in disciplinary action, as well as civil and criminal penalties. Only specific entities authorized by law may request the disclosure of information from (i.e., query) or submit reports to the National Practitioner Data Bank (NPDB). Any unauthorized individual or organization that attempts to query or file reports with the NPDB may be subject to fine and imprisonment under Federal statute. By using this system, you understand and consent to the following: At any time and for any lawful Government purpose, the government may monitor, intercept, and search and seize any communication or data transiting or stored on this information system. Any communication or data transiting or stored on this information system may be disclosed or used for any lawful Government purpose. All individuals that have access to obtain information from and report information to the NPDB system must comply with the following conditions:

All individuals that have access to obtain information from and report information to the National Practitioner Data Bank (NPDB) system must comply with the following conditions:

☐ **I acknowledge and understand my responsibilities and agree to comply with the Rules of Behavior for the NPDB system**

Subscriber Agreement

By checking the acceptance checkbox below, you agree to:

- Provide complete and accurate responses to requests for information during the National Practitioner Data Bank (NPDB) registration process;
- Keep your passwords and tokens (if applicable) secure;
- Refrain from sharing your account information with any other individual;
- Use your NPDB account only for authorized purposes; (maintaining account information, querying and/or reporting as authorized)
- Review the accuracy of account information;
- Request revocation of your NPDB account if you ever suspect that the security of your account may have been compromised; and promptly advise the NPDB of any changes in your registration information and respond to notices from NPDB, Health Resources And Services Administration (HRSA) or The Department Of Health And Human Services (HHS) concerning your account.

COMPLETE TERMS OF NPDB ACCOUNT AGREEMENT

☐ **I acknowledge and understand my responsibilities and agree to comply with the Subscriber Agreement for the NPDB system**

Exit

Continue to Next Step

Register Your Organization

Public burden statement

Organization **Description** > Statutory Authority > Organization Information > Administrator Account > Certifying Official > **Submit** > Registration Status

Select the best option for your organization

Who owns your organization?

◉ **A private sector organization, either for-profit or non-profit**
Includes organization receiving federal, state or municipal funding or operating under contract

○ **Federal government agency or entity**
e.g. Department of Veterans Affairs, FBI, HHS

○ **State government agency or entity**
e.g. a state Medicaid agency or Department of Health

○ **The District of Columbia or a U.S. Territory agency or entity**
e.g. Department of Health for D.C. or American Samoa

○ **Local government agency or entity**
e.g. Department of Health for a county, city or township

○ **An Indian Tribe or Nation or entity**
An organization under the direct ownership of an Indian tribe, band, nation or other group or community recognized by the Bureau of Indian Affairs (BIA) of the United States

Exit   Continue to Next Step

Register Your Organization

NATIONAL PRACTITIONER DATA BANK

NPDB

Public burden statement

Select the best option for your organization

Ownership Edit

A private sector organization, either for-profit or non-profit

Which category best fits your organization?

○ **Hospital** Show description

○ **Other health care entity** - a health care organization that is not a hospital Show description

○ **Health Plan** Show description

○ **Medical Malpractice Payer** Show description

◉ **An agent registering to query and/or report on behalf of another organization** Hide description

An agent does not have the authority to query or report to the NPDB on their own. An organization that is eligible to query and/or report to the NPDB (an "eligible entity") must designate the agent to interact with the NPDB on its behalf.   Agents must register with the NPDB and comply with all registration requirements before they can be designated by an eligible entity as an authorized agent.

○ **Professional Society** Show description

○ **Peer Review Organization** Show description

○ **Private Accreditation Organization** Show description

○ **Quality Improvement Organization under contract with the Centers for Medicare and Medicaid Services (CMS)**
Show description

○ **None of these**

Exit   Continue to Next Step

Register Your Organization

Organization > Statutor...   > Registration
Description   Authorit...   Status

Select the best optio...

Ownership Edit

A private sector organiza...

Which category best fit...

An agent may only access the NPDB if they are designated by a registered health care entity to act on their behalf.

X

An agent may register their organization with the NPDB but they have no independent authority to query or report. Health care organizations which are registered with the NPDB can give an agent the authority to query and/or report to the NPDB on their behalf. The health care organization designates (or "authorizes") the agent to query and/or report for them.

In most cases, an authorized agent is an independent contractor used for centralized credentialing, e.g. a credentials verification organization or hospital association.

Do you want to register your organization as an agent?

No   Yes

○ **Hospital**   Show descri...

○ **Other health care en...**

○ **Health Plan**   Show description

○ **Medical Malpractice Payer**   Show description

◉ **An agent registering to query and/or report on behalf of another organization**   Hide description

An agent does not have the authority to query or report to the NPDB on their own. An organization that is eligible to query and/or report to the NPDB (an "eligible entity") must designate the agent to interact with the NPDB on its behalf.   Agents must register with the NPDB and comply with all registration requirements before they can be designated by an eligible entity as an authorized agent.

○ **Professional Society**   Show description

○ **Peer Review Organization**   Show description

○ **Private Accreditation Organization**   Show description

○ **Quality Improvement Organization under contract with the Centers for Medicare and Medicaid Services (CMS)**   Show description

○ **None of these**

Exit   Continue to Next Step

Public burden statement

Register Your Organization

NATIONAL PRACTITIONER DATA BANK
NPDB

Organization Description > **Statutory Authority** > Organization Information > Administrator Account > Certifying Official > Review Summary > **Submit** > Registration Status

Statutory Authority and Requirements

You are registering your organization with the NPDB as an agent to act on behalf of an "eligible entity."

Three major statutes that govern NPDB operations:

- Title IV of Public Law 99- 660, the Health Care Quality Improvement Act of 1986 (Title IV);
- Section 1921 of the Social Security Act (Section 1921);
- Section 1128E of the Social Security Act (Section 1128E); and their implementing regulations found at 45 CFR Part 60.

Information from the NPDB is only available to entities specified as "eligible" in the statutes and regulations.

Organizations which are not eligible under the statutes may only register as an agent. Agents may only access the NPDB on behalf of eligible entities and may only perform the functions designated to them by each entity.

Agents are responsible for adhering to the regulations regarding the confidentiality of NPDB information.

- Agents are subject to the same regulations as eligible entities regarding confidentiality and disclosure of NPDB information, as detailed in the statutes.

- Persons and entities receiving information from the NPDB, either directly or from another party, must use it solely with respect to the purpose for which it was provided. Any person who violates the confidentiality provisions is subject to a civil money penalty. The penalty will be imposed pursuant to procedures at 45 CFR Part 1003. The penalty amounts in this section are adjusted for inflation annually. Adjusted amounts are published at 45 CFR Part 102.

- Agents that are designated by multiple eligible entities to query on their behalf may not share NPDB information across those entities. Each entity must direct to agent to process a query on their behalf. The agent must only provide the results from the query to the entity on whose behalf it was processed.

- Persons and entities are responsible for the accuracy of information which they report to the NPDB. If your organization submits a report on behalf of an eligible entity and and discovers an error or omission after the report is submitted, your organization must submit a correction on the entity's behalf.

Your descriptions of your organization

- **Ownership -** A private sector organization, either for-profit or non-profit
- **Type(s) -** An agent registering to query and/or report on behalf of another organization

☐ **The descriptions for my organization are accurate. My organization will comply with all NPDB requirements .**

Exit   Continue to Next Step

Register Your Organization

Organization Description > Statutory Authority > **Organization Information** > Administrator Account > Certifying Official > Review Summary > Submit > Registration Status

Organization Information

Organization Name

- Include a store number or other identifier for a location in the organization name (e.g. XYZ Pharmacy # 123)
- Add any other names used by the organization, such as a "doing business as" name (dba).

Organization Name

+ Additional name

Department (required for hospitals)

Select one

Country

United States

Street Address

Street Address

Street Address Line 2

Street Address Line 2

City

City

State

ZIP

ZIP ✓

Phone Number

Phone

EIN (Employer Identification Number) What is an EIN?

EIN

Don't have an EIN?

Company or Organization Website Address

http://www.

Exit   Continue to Next Step

Register Your Organization

NATIONAL PRACTITIONER DATA BANK
NPDB

Public burden statement

Create Your Administrator Account

Your Information

Enter your name as it appears on one of your government-issued identifications, such as a driver's license or passport.

First Name	Middle Name	Last Name	Suffix (Jr, III)
First Name	Middle Name	Last Name	Suffix

Title

Title

Phone Number

Phone

Mobile Phone (Optional)

We will send you a code to sign in if you forget your password.

Mobile Phone

Email Address

Email

Employee ID (Optional)

Create Your Account

Create a User ID (8 to 14 characters)

User ID

Create a Password

Password

Type Password Again

Password

Password Requirements

Passwords *must* have:
- ⓘ Between 8 and 14 characters
- ⓘ At least one number
- ⓘ At least one lower case letter
- ⓘ At least one upper case letter
- ⓘ At least 1 of these characters:
  ! @ # $ ^ & * ( ) - _ = + [ ] { } | ; : , . < > ?
- ⓘ At least 5 different characters
- ⓘ No repeated characters, such as 'aaaa'
- ⓘ New and Confirm Passwords must match

Passwords *must not* be:
- Similar to a word in the dictionary
- Similar to your user ID
- A simple sequence, such as 'abcd1234'
- One of your last 24 passwords

Select and Answer Challenge Questions

If you forget your password you will need to enter the correct answer for your challenge questions. Answers are case sensitive.

Question 1

Select a question ▾

Your Answer

Your Answer

Question 2

Select a question ▾

Your Answer

Your Answer

Question 3

Select a question ▾

Your Answer

Your Answer

Question 4

Select a question ▾

Your Answer

Your Answer

Question 5

Select a question ▾

Your Answer

Your Answer

Exit   **Continue to Next Step**

Register Your Organization

Organization Description > Statutory Authority > Organization Information > Administrator Account > **Certifying Official** > Review Summary > Submit > Registration Status

Certifying Official

The certifying official is the individual selected and empowered by your organization to certify the legitimacy of the NPDB registration. One person may be both the account administrator and certifying official.

☐ **I am authorized by my organization to serve as the certifying official**

Certifying Official's Information

Enter this person's name as it appears on their government-issued identification, such as a driver's license or passport.

First Name	**Middle Name**	**Last Name**	**Suffix (Jr, III)**
First Name	Middle Name	Last Name	Suffix

Title

Title

Phone Number

Phone

Email Address

Email

Employee ID (Optional)

The certifying official will not have an online account at first. After your organization's registration is approved, you may create a user account for them.

Exit   **Continue to Next Step**

Register Your Organization

Organization Description > Statutory Authority > Organization Information > Administrator Account > Certifying Official > **Review Summary** > Submit > Registration Status

Review Your Information

Please verify your information is correct. Select the Edit link if you need to change information in a section.

Organization Description   Edit

Ownership:	**A private sector organization, either for-profit or non-profit**
Type(s):	**An agent registering to query and/or report on behalf of another organization**

Organization Information   Edit

Organization Name:	**Test Entity**
Department:	*None/NA*
Address:	**555 Cabin Rd**
	Chantilly, VA 20111
Phone Number:	**111-111-1111**
EIN:	**55-555555**
Website:	*None/NA*

Account Administrator   Edit

Name:	**John Jones**
Title:	**Administrator**
Phone Number:	**111-111-1111**
Mobile Phone:	*None/NA*
Email Address:	**admin@org.org**
Employee ID:	*None/NA*

Certifying Official   Edit

Name:	**John Jones**
Title:	**Administrator**
Phone Number:	**111-111-1111**
Email Address:	**admin@org.org**
Employee ID:	*None/NA*

☐ **The registration information is true, complete and correct**

Exit   **Continue to Next Step**

Register Your Organization

Organization Description > Statutory Authority > Organization Information > Administrator Account > Certifying Official > Review Summary > **Submit** > Registration Status

Submit Your Registration

The certfying official is the individual selected and empowered by an agent to certify the legitimacy of registration for participation in the NPDB and is responsible for notifying the NPDB of any change in eligibility.

By completing this registration, the certifying official agrees to the following:

• The agent is qualified to register with the NPDB.

• He or she is authorized to submit this registration information to the NPDB and that the information provided is true, correct and complete.

• Any omission, misrepresentation, or falsification of any information contained in this form or contained in any communication supplying information to the NPDB to complete or clarify this form may be punishable by criminal, civil, or other administrative actions including fines, penalties, and/or imprisonment under federal law.

• The agent's NPDB registration may be suspended revoked for failure to comply with the requirements.

Certifying Official

TEST USER

Title

TEST TITLE

Phone

0005551111

Extension

Ext.

WARNING:

Any person who knowingly makes a false statement or misrepresentation to the National Practitioner Data Bank (NPDB) is subject to a fine and imprisonment under federal statute.

18 U.S.C. §1001 authorizes criminal penalties against whomever in any matter within the jurisdiction of the executive, legislative, or judicial branch of the government, knowinly and willfully falsifies, conceals, or covers-up by any trick, scheme, or writing or document knowing the same to contain any materially false, fictitious, or fraudulent statement or entry.

Individual offenders are subject to fines of up to $250,000 and imprisonment for up to 5 years. Offenders that are organizations are subject to fines of up to $500,000. 18 U.S.C.§3571, Section 3571 (d) also authorizes fines of up to the greater of twice the gross gain derived by the offender or twice the gross loss sustained by another as a result of the offense.

Exit   Submit to the NPDB

Register Your Organization

Organization Description	>	Statutory Authority	>	Organization Information	>	Administrator Account	>	Certifying Official	>	Review Summary	>	Submit	>	Registration Status

Registration Status

You have submitted the online registration form. Please review and complete all of the steps listed on this page.

1. **Print out 2 copies of your registration documents.** The documents contain the DBID and user ID which you must have to sign in to your account, so keep a copy for your files.

2. **Review all of the documents to be sure they are correct.** If revisions are needed, sign into your account, revise the forms, then reprint the corrected documents. **Do not mark corrections on the paper documents. They will be rejected by the NPDB.**

3. **Read the Summary of Terms on your administrator registration document.**   You must agree to abide by these terms.

4. **Take the administrator registration document to a notary public and sign it in their presence.** You will need to bring a government-issued photo identification with you for the notary as proof of your identity. (e.g., drivers license, valid passport).

5. **Obtain one of these documents as proof of your affiliation with your organization.**

   • A photocopy of your work badge issued by your organization that has your name, photo, and the name of the organization printed on it.

   • A signed letter from a duly authorized representative in your organization who can attest to your affiliation, such as a representative in your organization's human resources (HR) department.

6. **Obtain one of these documents as proof of your organization's identity.** This is required because you stated that your organization has been in business for less than one year. **The document you provide as proof must match the organization name and address on the NPDB registration.**

   • A photocopy of your organization's license to conduct business in your state.

   • A photocopy of your organization's articles of incorporation.

7. **Provide the entity registration document and certifying official registration document to the certifying official.**
   They must also:
   • Agree to the terms and conditions listed on their registration document.
   • Sign their registration document in the presence of a notary public and provide a government-issued photo identification to the notary that matches the information on their registration form.
   • Sign the entity registration document.
   • Provide proof of their affiliation with your organization.

8. **Upload all required documents to the NPDB.** The NPDB will not process your registration until all documents are received. A checklist is included in the registration documents. You may sign into your account and upload the documents or mail them to the address listed on the document. **Faxed or emailed copies are not accepted.**

9. **Check the status of your registration online.**
   Use your DBID, user name, and password to sign into your NPDB account to check the registration status after you have submitted all required documents. The NPDB will send you an email once your registration is approved. Please allow (7) business days to process your registration.

🖶 Print   Exit

Non-visible Questions

Label	PDF Name (step)	Location	Response Input Item	Visibility Trigger	Other
Register for a new NPDB account for my organization	Agent Registration	Below "Register my organization"	Radio Button	The field is displayed if the user selects the option "Register my organization."	Selecting the radio button "Register my organization" displays three options: "Register for a new NPDB account for my organization," "Renew or update my organization's NPDB registration," and "Request another DBID for my organization's NPDB account."
Renew or update my organization's NPDB registration	Agent Registration	Below "Register my organization"	Radio Button	The field is displayed if the user selects the option "Register my organization."	Selecting the radio button "Register my organization" displays three options: "Register for a new NPDB account for my organization," "Renew or update my organization's NPDB registration," and "Request another DBID for my organization's NPDB account."

Request another DBID for my organization's NPDB account	Agent Registration – What do you need to do?	Below "Register my organization"	Radio Button	The field is displayed if the user selects the option "Register my organization."	Selecting the radio button "Register my organization" displays three options: "Register for a new NPDB account for my organization," "Renew or update my organization's NPDB registration," and "Request another DBID for my organization's NPDB account."
DBID Number	Agent Registration – Select the best option for your organization	Below "Do you know the current DBID for your organization?"	Text Entry	The field is displayed if the user selects the "Yes" option.	

State Changes

Label	PDF Name	Item Type	Trigger
Public Burden Statement	Agent Registration	Modal	When the user selects the Public Burden Statement link the modal is displayed.
Is your organization already registered with the NPDB?	Entity Registration	Modal	When the user selects "Request another DBID my organization's NPDB account" for "Register my organization"
Register as an agent	Agent Registration	Modal	When the user submits their selection for a category and the radio button "An agent registering to query and/or report on behalf of another organization" is selected, then the modal is displayed.
I am authorized by my organization to serve as the certifying official	Agent Registration	Check Box	Selecting the checkbox hides the fields for the Certifying Official's Information (First Name, Middle Name, Last Name, Suffix, Title, Phone, Extension, Email Address, Employee ID).
Password Requirements	Agent Registration	Info box	When the user sets focus on the "Create a new password" text entry, the info box is displayed. The state of each rule changes to indicate whether or the rule is met as the user enters their text.