National Council of State Boards of Examiners for Speech-Language Pathology and

Summer 2012

# SPECIAL POINTS OF INTEREST:

- > President's Corner
- > 2012 Fall Conference Williamsburg
- What Speech-Language Pathologists and Audiologists Need to Know About the Data Banks
- > Audiologists with Numbers of Reports
- > Register for the 2012 Annual Conference
- > NCSB Board of Directors

#### PRESIDENT'S CORNER BY: VIRGINIA BERRY

Welcome to the 2012 NCSB Annual Conference edition of our newsletter. This year's Conference, scheduled for October 11 – 13, 2012 in Williamsburg, VA at the Williamsburg Woodlands Hotel and Conference Center, promises to be one of our best ever. This year's venue is absolutely a perfect setting for this special 25th NCSB Annual Conference. This year celebrates our Conference Silver Anniversary, and each of us on the NCSB Board of Directors has planned a wonderful tribute to this significant moment in NCSB's history and accomplishments. The focus of this year's Conference is the very timely topic of Ethical Issues in Professional Regulation. Glenn Waguespack, 2012 President Elect and Conference Chair, has planned an outstanding program covering a variety of topics presented by nationally recognized professionals involved with ethical issues and conduct. Included in this newsletter is a detailed description of the exceptional topics to be covered during both the Pre-Conference Board Training on Thursday, October 11 and the entire Conference on Friday and Saturday, October 12 and 13. Also enclosed are all necessary registration materials and information. Glenn is to be applauded for this landmark event.

The Williamsburg Woodlands Hotel and Conference Center is probably one of the most inviting and beautiful settings NCSB could wish for as a Conference site. It is set near a gorgeous pine grove on several acres of beautifully landscaped grounds. October will be an outstanding setting with all of the fall colors in full development. The Conference site is a family haven that offers several activities that the

entire family can enjoy. Then, of course, there is the joy of all the history of Williamsburg which offers a vast array of colonial attractions, museums, galleries and revolutionary exhibits. In addition to the adventure of enjoying a trip back in time to the beginnings of our nation, Williamsburg also offers some of the best dining experiences for you to enjoy. Information on area restaurants, including menu offerings, will be available for attendees in the Conference registration area.

I invite each of you to visit the NCSB website (<a href="www.ncsb.info">www.ncsb.info</a>) to review detailed information on the Conference. On the Conference page there is also a link covering many Questions and Answers on various topics that you should find very helpful in planning for your visit to historical Williamsburg and attendance to the celebratory 25th Annual NCSB Conference. This Conference and its location would be a great opportunity to bring your family and extend your stay. I promise - You won't be disappointed!!

The NCSB Board of Directors has also been busy with other activities this year to improve our service to member boards, regulatory agencies and individuals. A very exciting new addition to the NCSB website is our newly created Member Discussion Forum. I encourage all members to register for this invaluable tool simply by entering your email address and creating a password to enter the Members Only link on the website. You will find the link for this in the upper right-hand corner of the NCSB home page (www.ncsb.info). This forum is a way for members to communicate with other members and opens the door to a wide variety of discussions on questions, issues and concerns affecting regulatory and licensure issues in their area. Also, earlier this year all member boards and individual members were sent the 2012 Membership Directory and Membership Certificates. I encourage everyone to submit any corrections or changes in Board contact individuals and contact information (board address, phone, fax, email, etc.) to the NCSB Management Firm, Prime Management, at 3416 Primm Lane, Birmingham, AL 35216 or 205-823-6106 or info@ncsb.info.

In closing, I want each of you to remember that NCSB is the only national organization that is dedicated to supporting the interests of licensing boards and regulatory agencies in our two professions of speech-language pathology and audiology. We need everyone's support to continue our mission and encourage all current state board and individual members to renew their commitment to membership in NCSB and to spread the word of the advantages of membership to colleagues and associates affiliated with other state boards and regulatory agencies.

I hope to see all of y'all in Williamsburg to join in the celebration of the 25th NCSB Annual Conference and the tribute to out Silver Anniversary.

Virginia Berry 2012 NCSB President

# NCSB 25TH ANNUAL CONFERENCE ETHICAL DECISION MAKING: AN EVOLUTIONARY AND REVOLUTIONARY PROCESS

October 11-13, 2012 - Williamsburg, Virginia

Registration brochures announcing the 25th annual NCSB Conference have been mailed. If you or your state board did not receive one of the brochures, the registration form and hotel information are included in this newsletter. As in past years, a pre-conference workshop on Training for Board Members will be held on Thursday, October 11, 2012, and the one and one-half day conference will follow on October3. NCSB invites boards to participate in both the board training and the conference. Following is a synopsis of the pre-conference activity and the conference.

## Thursday, October 11

Pre-Conference Workshop - Training for Board Members (Additional Fee Required)

Friday, October 12

8:00 - 8:30 REGISTRATION

8:30 - 9:00

## Welcome and Introductory Remarks

Virginia Berry, NCSB President Glenn M. Waguespack, NCSB President-Elect Leslie Knachel, Administrator, Virginia Laura Purcell Verdun, Vice-Chair, Virginia Harold Sayles, Citizen Member, Virginia

9:00 - 10:15

KEYNOTE SPEAKER - Heather Bupp, J.D.

ASHA Director of Ethics

Professional Ethics: A Contemporary Look at Age-Old Issues

10:15 - 10:30 BREAK

10:30 - 11:30

Mandating Ethics CE: Expect a Little Rebellion

Sherry Sancibrian, SLP, Texas

Glenn M. Waguespack, AUD, Louisiana

11:30 - 1:00 LUNCH and CORPORATE BUSINESS MEETING

1:00 - 2:00

Use of Sanctioning Reference Points in the Imposition of Discipline

Leslie Knachel, Administrator, Virginia

2:00 - 3:00

Ethical Considerations in the Age of Social Media

Brian O'Riordan, Registrar, CASLPO

Carol Bock, Deputy Registrar, CASLPO

3:00 - 3:15 BREAK

3:15 - 4:45

State Information Exchange

## Doreen Oyadomari, Facilitator - SLP, Alabama

A state representative should come prepared to speak for 5-10 minutes on successes and challenges in the respective state.

## Saturday, October 13

8:30 - 9:30

## State Information Exchange: Lessons Learned

Amy Goldman, Facilitator - SLP, PA

9:30 - 10:15

## Update on SLP Certification Standards and the Audiology Praxis Examination

Judith Page, Chair, ASHA's CFCC George Purvis, Facilitator - AUD, KY

10:15 - 10:30 BREAK

10:30 - 12:00

#### **OPEN FORUM ON HOT TOPICS**

Gregg Givens, Facilitator - AUD, NC

## Ethical Considerations in the Internet Sale of Hearing Aids

Therese Walden, AAA Past President

## Regulation of Assistants: What You Need to Know

Susan Adams, J.D., ASHA Director of State Legislative and Regulatory Advocacy

## **Intergenerational Perspectives on Ethics**

Lawrence Molt - AUD/SLP, Alabama

## 2012 FALL CONFERENCE VENUE

## Williamsburg Woodlands Hotel

105 Visitor Center Drive Williamsburg, VA 23185 (757) 253-2277, (800) 447-8679

#### **Room Rates:**

Standard room, single or double occupancy, \$114.00 Suite, \$144.00

Taxes are 10% plus \$2.00 per night occupancy tax.

The special guest room rates will apply 3 days before and after the dates of the conference.

Complimentary Breakfast: A complimentary continental breakfast is offered daily in the main lobby of the hotel.

**Reservations:** Individual reservations must be made on or before Monday, September 10, 2012, by calling 800-261-9530 between the hours of 8:30 am to 5:00 pm EST, Monday through Friday. There is no charge for self parking.

You must provide the NCSB group name in order to obtain the group rates.

Check-in time is after 4:00 pm and check-out time is 11:00 am.

## **Airports:**

Newport News - 20 minutes Richmond - 45 minutes Norfolk - 50 minutes

**Ground Transportation:** Please note that prices quoted below are estimates and are subject to change and current prices should be requested when making reservations.

- Tidwater Coach (<u>www.tidewatercoach.com</u>) Order online or call (757) 218-9539 At least one day notice required. More notice is better. Newport News Airport \$35 single/\$45 couple Richmond/Norfolk Airports \$75 single/\$90 couple
- James River Transportation (<a href="www.jamesrivertrans.com">www.jamesrivertrans.com</a>) Reservations made online or call (866) 823-4626. Walk up airport shuttle is available at Norfolk Airport booth. Richmond/Norfolk Airports \$104.50 per person Group rates with a minimum of 4 passengers are available.
- Marrow Transportation, LLC (<u>www.marrowtransit.com</u>) Call for reservations at (757) 564-5466 Provides chauffeured limo service to all area airports

## **Hotel Location:**

105 Visitor Center Drive Williamsburg, Virginia 23185 757-253-2277 1-800-HISTORY

**Hotel Description:** Set near a pine grove adjacent to Colonial Williamsburg's Visitor Center, Williamsburg Woodlands Hotel & Suites is a family haven with recreational choices including miniature golf, shuffleboard, table tennis, bike rentals, and swimming. Plus, a continental breakfast buffet is included in the room rate. Walk or shuttle to the Historic Area.

Suites offer a lounging room with queen sofa bed, desk, and a convenience counter with small refrigerator, microwave, sink, and coffeemaker plus a separate master bedroom with a king-size bed and second TV. Standard Rooms feature two full-size beds, a sitting area with desk, and a comfortable lounge chair (convertible to a single bed).

Convenient, on-site laundry facilities include coin-operated machines and same-day valet service (for requests made by 9 a.m.).

## WHAT SPEECH-LANGUAGE PATHOLOGISTS AND AUDIOLOGISTS NEED TO KNOW ABOUT THE DATA BANKS

BY DONALD ILLICH, DIANE ERLANDSON, AND JIAYING HUA

As of March 1, 2010, Section 1921 of the Social Security Act authorized the expansion of the National Practitioner Data Bank (NPDB) to include the reporting of any negative state licensing actions and findings on all health care practitioners, not just physicians and dentists. Section 1921 also extended the reporting of such actions and findings against health care practitioners to peer review organizations and private accreditation organizations. These reports, referred to as Adverse Action Reports (AARs), and reports on medical malpractice payments (MMPRs) are available to hospitals, licensing boards and other health care organizations for the purpose of credentialing and making decisions about employment, privileging, and licensing. An additional Data Bank, the Healthcare Integrity and Protection Data Bank (HIPDB), is a national data collection program for reporting and disclosure of certain final adverse actions taken against health care practitioners, providers, and suppliers.

This article explains how Section 1921 impacts speech-language pathologists and audiologists. It discusses overarching reporting and querying requirements of the Data Banks and presents data on AARs and MMPRs regarding speech-language pathologists (SLPs) and audiologists.

#### The Data Banks

The three laws governing the NPDB and the HIPDB are:

- 1. The Health Care Quality Improvement Act of 1986 (HCQIA), as amended;
- 2. Section 5(b) of the Medicare and Medicaid Patient and Program Protection Act of 1987, Public Law 100-93, (Section 1921 of the Social Security Act, as amended), and

3. Section 221(a) of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Public Law 104-191, (Section 1128E of the Social Security Act, as amended).

Section 5(b) of the Medicare and Medicaid Patient and Program Protection Act of 1987, Public Law 100-93, (Section 1921 of the Social Security Act, as amended), and Section 221(a) of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Public Law 104-191, (Section 1128E of the Social Security Act, as amended).

#### The NPDB

The NPDB was established under HCQIA, as amended; it is an information clearinghouse that collects and releases information related to the professional competence and conduct of physicians, dentists, and other health care practitioners. In 1987 Congress passed Public Law 100-93, Section 5 of the Medicare and Medicaid Patient and Program Protection Act of 1987 (Section 1921 of the Social Security Act), authorizing the Government to collect information concerning sanctions taken by State licensing authorities against all health care practitioners and entities. Congress later amended Section 1921 with the Omnibus Budget Reconciliation Act of 1990, Public Law 101-508, to add "any negative action or finding by such authority, organization, or entity regarding the practitioner or entity. The NPDB is responsible for implementing this act.

The U.S. Department of Health and Human Services (HHS), Health Resources and Services Administration (HRSA), Bureau of Health Professions (BHPr), Division of Practitioner Data Banks (DPDB) administers the NPDB, which was implemented for both reporting and querying on September 1, 1990. The NPDB aims to restrict unprofessional or incompetent practitioners from moving across state lines to prevent disclosure or discovery of previous damaging or incompetent performance. The intent of Section 1921 of the Social Security Act (SSA) is to protect beneficiaries participating in the health care programs authorized under the SSA from unfit health care practitioners and to improve the anti-fraud provisions of these programs.

## Who Reports to the NPDB and What Is Reported?

Under Section 1921, state licensing and certification agencies, hospitals and other health care organizations, health plans, professional societies with formal peer review, the HHS Office of Inspector General, peer review organizations, private accreditation organizations, and the Drug Enforcement Administration (DEA) are all required to report certain adverse actions to the NPDB. These adverse actions include:

- licensure actions,
- clinical privileges actions,
- professional society actions,
- exclusions/debarments, or
- other negative actions or findings.

Other negative actions or findings include any negative action or finding that is publicly available information under state law and is rendered by a licensing or certification authority, such as limitations on the scope of practice, liquidations, injunctions and forfeitures.

Adjudicated actions or decisions against health care practitioners, providers, and suppliers must be reported by federal and state government agencies and health plans. Other adjudicated actions or decisions are formal or official actions that include the availability of a due process mechanism and are based on acts or omissions that affect or could affect the payment, provision, or delivery of a health care item or service. An example includes a personnel-related action such as a contract termination or reductions in grade for cause.

## **QUERYING: WHO CAN QUERY THE DATA BANKS?**

Certain entities can query the NPDB. State licensing boards may query the NPDB. Additionally, hospitals are required by law to query the NPDB:

- When a physician, dentist, or other health care practitioner applies for a position on a hospital's medical staff (courtesy or otherwise) or for clinical privileges at the hospital;
- Every 2 years (biennially) on all physicians, dentists, and other health care practitioners who are on the hospital's medical staff (courtesy or otherwise) or who hold clinical privileges; and
- When a practitioner wishes to add to or expand existing privileges and when a practitioner submits an application for temporary privileges.

Under Section 1921, hospitals' human resource departments and recruitment offices now have access to the NPDB. This information is valuable to human resource departments and nurse recruitment offices when performing pre-employment background checks and making hiring decisions.

Authorized health care organizations, including professional societies, may request information from the NPDB when entering into an employment or affiliation relationship with a health care practitioner or in conjunction with peer review activities. Authorization to query requires that these organizations be engaged in a formal peer review process.

Some state and federal agencies and health plans may only query NPDB reports submitted under Section 1921. These agencies include State Medicaid Fraud Control Units, the U.S. Comptroller, law enforcement officials, agencies or contractors administering Federal health care programs, state boards that license entities, state agencies administering state health care programs, health maintenance organizations and other health plans.

Plaintiffs' attorneys or plaintiffs that represent themselves may query the NPDB in rare circumstances. Information about individual practitioners is not available to the general public, and medical malpractice insurers do not have access to information in the Data Banks. Researchers can access a public use file that offers aggregated, de-identified data from the NPDB.

Recently, the Division of Practitioner Data Banks has expanded its research offerings to include additional data analysis and output capabilities. These tools include a map-based reporting tool and a data analysis tool that facilitates independent analysis of the more than 800,000 reports contained in the NPDB. Located on the Data Bank's website, the new statistical application permits users to perform specific data analyses and create their own customized data tables.

As well as NPDB queriers, there are specific HIPDB queriers. Health plans, federal or state government agencies, including prosecutors and investigators, may query the HIPDB to further investigations of practitioners, providers, and suppliers. They may also query when credentialing, licensing, or certifying practitioners, providers, or suppliers. Authorized entities are not required to query the HIPDB.

All health care practitioners and entities may self-query the Data Banks for a small fee, and at any time.

#### NPDB and HIPDB Merger

On February 15, 2012, HRSA published the Notice of Proposed Rule Making (NPRM) in the Federal Register to implement Section 6403 of the Affordable Care Act of 2010. The purpose of Section 6403 is to eliminate duplicative data reporting and access requirements between the NPDB and HIPDB, and to streamline Data Banks operations. At the close of the public comment period on April 16, 2012, 11 submissions had been received. HRSA is reviewing those comments and will address them in the Final Rule.

Section 6403 requires the Secretary of HHS to establish a transition period to transfer all data in the HIPDB to the NPDB and, once completed, to cease HIPDB operations. Information previously collected and disclosed through the HIPDB will then be collected and disclosed through the NPDB. The statute's intent is to transition HIPDB operations to the NPDB while maintaining reporting and querying requirements.

The Division of Practitioner Data Banks will be revising and consolidating the NPDB and HIPDB Guidebooks into one that reflects the changes mandated by Section 6403 and the Final Rule.

## Reports in the Data Bank

Between September 1, 1990 and December 31, 2011, 863,355 reports were filed on 486,499 practitioners of all types in the NPDB. About 43 percent were for malpractice payments (N=367,851), 49.1 percent for licensure actions (N=423,519), and 5.9 percent for Medicare and Medicaid exclusions (N=50,603). The remaining 2.4 percent were for clinical privileges/panel membership, professional society membership, and DEA actions.

As of December 31, 2011, cumulatively, there were 512,742 reports in the HIPDB, representing 292,030 individual practitioners of all types. About 79 percent (N= 402,965) of the reports were based on state licensure actions, and 15.1 percent were based on Federal and state health care program exclusion actions (77,375). The remaining 6.3 percent of the reports comprised health care-related judgments or convictions, government administrative actions, and health plan actions (e.g., contract terminations).

The following two tables show that some audiologists and speech-language pathologists have multiple reports in the NPDB or HIPDB. Some have reports in both Data Banks. Additionally, the tables show the data as of the end of the years of 2009 and 2011, clearly comparing the difference between reporting prior to and following implementation of Section 1921.

## **AUDIOLOGISTS WITH NUMBERS OF REPORTS**

by Data Bank Type, December 31, 2009 and December 31, 2011

Audiologists and speech-language pathologists interested in learning more about the NPDB and HIPDB should visit <a href="www.npdb-hipdb.hrsa.gov">www.npdb-hipdb.hrsa.gov</a>. The site includes interactive training on reporting to the Data Banks; information about the public use file; research data analysis tools that allows users to perform specific data analyses and create their own customized data tables; data on reports, including NPDB and HIPDB reports submitted by state agencies and health plans (under Statistical Information, Data by Profession and state); annual reports; information on Continuous Query; and instructions for reporting and querying. For specific questions, please contact the Customer Service Center at 1-800-767-6732.

Number of Adverse Action and Medical Malpractice Reports by Practitioner Type See table 1 & 2 at end of document

NPDB<sup>1</sup> Reasons for Adverse Action Reports (AARs) by Practitioner Type See table 3

The following tables show the fifteen most frequently reported reasons or bases for actions reported to the NPDB and HIPDB for audiologists and speech-language pathologists.

Speech-Language Pathologists With Number of Reports by Data Bank Type December 31, 2009 and December 31, 2011

See table 4

## 2012 FALL CONFERENCE REGISTRATION

To register for the 2012 Fall Conference, visit <a href="http://www.ncsb.info/register">http://www.ncsb.info/register</a> or link directly to:

http://www.ncsb.info/Resources/conference/2012/register2012.pdf and download a PDF registration form.

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Table 1

Report Type	Audiologist	Speech/Language Pathologist	Row Total
NPDB			
Medical Malpractice Payment	39	13	52
State Licensure Action	205	873	1,078
Clinical Privileges / Panel Membership Action	1	1	2
Exclusion Action	21	0	21
Total NPDB Reports	266	887	1,153
HIPDB			
State Licensure Action	205	873	1,078
Health Plan Action	6	0	6
Government Administrative Action	3	1	4
Exclusion Action	40	37	77
Judgment or Conviction	11	40	51
Total HIPDB Reports	265	951	1,216
Total NPDB and HIPDB Reports	531	1,838	2,369

Table 2

Number of Reports	As Of December 31, 2009		As Of December 31, 2011	
	Practitioners w/Reports in HIPDB	Practitioners DB w/Reports in NPDB w/Reports in HIPDB	Practitioners w/Reports in HIPDI	Practitioners w/Reports in NPDB
One		40	140	173
Two		9	40	
Three		0	4	
Four		0	က	Т
Five		0	m	1
Total		46	190	

Table 3

Major 15 Reasons for AARs	Audiologists	Speech-Language Pathologists
Unprofessional Conduct	29	50
Violation of federal or State Statutes, Regulations or Rules	22	104
Criminal Conviction	18	35
Failure to comply with continuing education or competency requirements	18	112
Practicing Without a Valid License	18	97
Negligence	11	17
License Action by Federal, State, or Local Licensing Authority	11	18
Incompetence	10	10
Submitting False Claims	8	4
Practicing With an Expired License	6	69
Fraud (Unspecified)	5	17
Misrepresentation of Credentials	5	14
Improper or Inadequate Supervision or Delegation	5	35
Improper or Abusive Billing Practices	4	18
Other (Not Classified)	34	64

1. Data in this table is as of December 31, 2011.

Table 4

Number of Reports	As Of December 31, 2009		As Of December 31, 2011	
	Practitioners w/Reports in HIPDB	Practitioners w/Reports in NPDB	Practitioners w/Reports in HIPDB	Practitioners w/Reports in NPDB
One	23	9 8	554	582
Two	9	6 0	142	2 125
Three		9 0	23	3 14
Four		3 0	5	3
Five		1 0	5	0
Total	34	8 8	729	724