

EPStaffCheck NPDB/HIPDB Query Service

Thank you for requesting enrollment in the EPStaffCheck NPDB/HIPDB service. In order to activate your service, you must take the following three steps.

STEP ONE. If you have not already done so, go to <http://www.npdb-hipdb.hrsa.gov> and enroll as a healthcare organization to certify that your organization is eligible to receive these reports.

Database	NPDB	HIPDB
Eligible Organizations (see page 2 for definitions)	Hospitals State Licensing Boards Healthcare Organizations with formal peer review Professional Societies with formal peer review Quality Improvement Organizations (QIO) Peer Review Organizations (PRO) Medicaid Fraud Control units Law Enforcement Agencies Federal/State healthcare program administrators State healthcare entity licensing agencies US Comptroller General	Federal/State Government Agencies Health Plans

STEP TWO. Designate YEI as An Authorized Agent, following these instructions:

- Sign into the your NPDB/HIPDB account and click **Continue**.
- From the Administrator Options page, select **Maintain Agent Information**, and then click **Add**.
- Complete the Designate Authorized Agent web form, and click Continue.
 - Last 4 digits of agent's DBID: **7857**
 - Agent organization name: **Yost Engineering Inc**
 - Agent organization city/state/zip: **Portsmouth, OH 45662**
 - Agent allowed to: **QUERY**
 - Route query reports to: **AGENT**
 - Bill query costs to: **AGENT**
- Review the Agent Designation Status page and click **Continue**.
- Save a copy of the Agent Designation Request for your records.

STEP THREE. Read the authorization below and **fax this page back to 888-565-1170**.

As an extension of my organization's EPStaffCheck agreement, please add NPDB/HIPDB querying to our service. I understand that the costs of NPDB/HIPDB is \$130 per year, plus \$3.50 per year per physician which includes updates throughout the subscription year. I understand we will be billed \$130 to start the service, and we will then be billed monthly for any new physicians we have added to our batch, as well as for annual renewals of the physicians in our NPDB/HIPDB batches. I certify that I am authorized to request this service on behalf of my organization, and am authorized to approve billing in accordance with these fees.

Signature: _____ Date: _____ Email: _____

Printed Name: _____ Phone: _____ Organization: _____

Definitions

NPDB

Hospitals – A hospital is defined as an institution primarily engaged in providing, by or under the supervision of physicians, to inpatients: diagnostic and therapeutic services; rehabilitation services for medical diagnosis, treatment, and care; or rehabilitation of injured, disabled, or sick persons. Hospitals must be licensed or approved as meeting the standard established for licensing by the State or applicable local licensing authorities (Section 1861(e) (1) and (7) of the Social Security Act.

State Licensing Boards – State Licensing Board is a generic term used to refer to State medical, dental and nursing boards, as well as those bodies responsible for licensing other health care practitioners and entities. This also includes Boards of Medical and Dental examiners, designated by a State for licensing, monitoring, and disciplining physicians or dentists. This term includes boards of allopathic or osteopathic examiners or its subdivision, a board of Dentistry or its subdivision, a composite board, or an equivalent body as determined by the State.

Health Care Organizations – A health care entity must provide health care services and follow a formal peer review process to further quality health care. The phrase "provides health care services" means the delivery of health care services through any of a broad array of coverage arrangements or other relationships with practitioners either by employing them directly, or through contractual or other arrangements. This definition specifically excludes indemnity insurers that have no contractual or other arrangement with physicians, dentists, or other health care practitioners.

Professional Societies – A professional society is a membership association of physicians, dentists, or other health care practitioners that follows a formal peer review process for the purpose of furthering quality health care. Examples of professional membership societies include State, county, and district medical and dental societies and academies of medicine and dentistry.

Quality Improvement Organizations and Peer Review Organizations (QIO/PRO) – Groups of physicians who are paid by the Federal Government to conduct pre-admission, continued stay and service reviews provided to Medicare patients by Medicare approved hospitals. QIOs - utilization and quality control peer review organizations under contract with the Centers for Medicare and Medicaid Services.

HIPDB

Federal and State Government Agencies – Federal and State Government agencies include, but are not limited to, the following: U.S. Department of Justice, Federal Bureau of Investigation, U.S. Attorney, Drug Enforcement Administration, U.S. Department of Health and Human Services, Food and Drug Administration, Centers for Medicare and Medicaid Services, Office of Inspector General, U.S. Department of Defense, U.S. Department of Veterans Affairs, Federal and State law enforcement agencies, State Attorneys General, law enforcement investigators, district attorneys, State Medicaid Fraud Control Units, Federal and State agencies responsible for the licensing or certification of health care practitioners, providers, and suppliers, Departments of Professional Regulation, Health, Social Services, State Survey and Certification, Medicaid Single State agencies, Commerce, and Insurance.

Health Plans – The term health plan refers to a plan, program, or organization that provides health care benefits, whether directly or through insurance, reimbursement, or otherwise. Health care organizations may be recognized as "health plans" if they meet the basic definition of "providing health benefits." Health plans include, but are not limited to, the following: a policy of health insurance, a contract of a service benefit organization, a membership agreement with a health maintenance organization or other prepaid health plan, a plan, program, or agreement established, maintained, or made available by an employer or group of self-insured employers; a practitioner, provider, or supplier group; a third-party administrator; an integrated health care delivery system; an employee welfare association; a public service group or organization; or a professional association, an insurance company, insurance service, or insurance organization that is licensed to engage in the business of selling health care insurance in a State, and that is subject to State law which regulates health insurance. Health plans may include those plans funded by Federal and State governments, including: Medicare, Medicaid, U.S. Department of Defense, U.S. Department of Veterans Affairs, Bureau of Indian Affairs program.

