

Focused Professional Practice Evaluations: What Should Physicians Know?

Physicians who apply for privileges at a new healthcare facility—or who seek to expand their existing scope of practice—may be required to complete a Focused Professional Practice Evaluation, commonly called an FPPE. In its routine form, an FPPE is a credentialing and privileging tool used to confirm a practitioner’s competence for specific clinical privileges. For experienced physicians, however, an FPPE may carry broader professional significance depending on why it was imposed, how it is implemented, and whether it is being used as a neutral evaluation process or as a vehicle for discipline, retaliation, or [sham peer review](#). This article explains what an FPPE is, how it differs from OPPE and a performance improvement plan, when it may implicate NPDB reporting concerns, and when a physician should consider seeking legal guidance.

What Is an FPPE?

The Joint Commission requires accredited hospitals and healthcare organizations to maintain a defined FPPE process as part of the medical staff’s credentialing and privileging system. The Joint Commission defines FPPE as “a process whereby the medical staff evaluates the privilege-specific competence of the practitioner that lacks documented evidence of competently performing the requested privilege(s) at the organization. This process may also be used when a question arises of a currently

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privileged practitioner's ability to provide safe, high-quality patient care.”¹

FPPE vs. OPPE vs. PIP: Similar Acronyms, Different Purposes

Physicians often encounter several overlapping evaluation processes during their careers, and hospitals do not always explain the differences clearly. FPPE, OPPE, and PIP may all involve performance review, but they serve distinct functions and can carry very different professional consequences.

- **Focused Professional Practice Evaluation (FPPE)** is a focused, privilege-specific review. It is commonly used when a physician is granted new privileges at an institution or when a question arises about an already privileged physician's ability to provide safe, high-quality patient care.
- **Ongoing Professional Practice Evaluation (OPPE)** is a continuing process used to evaluate a practitioner's professional performance after privileges have been granted. OPPE is generally ongoing and routine, while FPPE is focused and triggered by new privileges or a specific concern about competence or patient care.
- **Performance Improvement Plan (PIP)** is typically an employment or corrective-action tool used to address identified performance concerns. Unlike FPPE, a PIP is not necessarily privilege-specific and may be framed as remedial, disciplinary, or employment-related depending on the circumstances.

Is FPPE Reportable to the NPDB?

The National Practitioner Data Bank ([NPDB](#)) is a federal database that collects

¹ See THE JOINT COMMISSION, [What are the key elements organizations need to understand regarding the Focused Professional Practice Evaluation requirements?](#)

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certain information related to the competence and conduct of healthcare practitioners. In most cases, a routine FPPE—particularly one tied to newly requested privileges—is treated as part of ordinary credentialing and peer review and does not automatically require an NPDB report.² The analysis changes, however, if the FPPE is connected to a professional review action that adversely affects clinical privileges for more than 30 days, or if a physician surrenders or restricts privileges while under investigation.³ Not every facility treats an FPPE as an investigation, but the NPDB gives healthcare entities broad discretion to determine whether an investigation exists, even where the physician disputes that characterization or was not clearly placed on notice.⁴

When Should a Physician Consider Legal Guidance?

Although FPPEs can be routine and can be completed without dispute, it can also be the first step toward taking adverse action against a physician. A physician should take the process seriously, however. Common red flags physicians should be aware

² See NPDB Guidebook, Ch. E; [NPDB Reporting Q&A](#) (stating that “[a] routine, formal peer review process under which a health care entity evaluates, against clearly defined measures, the privilege-specific competence of all practitioners is not considered an investigation for the purposes of reporting to the NPDB.”).

³ See 42 U.S.C. § 11133(a)(1); 45 C.F.R. § 60.12(a) (requiring health care entities to report professional review actions that adversely affect a physician’s clinical privileges for more than 30 days, as well as certain surrenders or restrictions of privileges made while the physician is under investigation).

⁴ See [NPDB Guidebook](#), U.S. Dep’t of Health & Human Services.

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of in the context of FPPEs include:

- when the stated basis for the FPPE is unclear
- when the evaluation appears inconsistent with medical staff bylaws or past practice;
- when the physician is told the FPPE is “for cause”; or
- when the outcome could affect clinical privileges, reappointment, credentialing, employment, or NPDB reporting.

In those circumstances, early guidance can help the physician understand the applicable bylaws and accreditation standards, preserve a clear record, and respond appropriately before the process creates avoidable professional consequences.

If you are a physician facing an FPPE or medical staff investigation, experienced legal guidance can help you assess the risks and determine an appropriate response. Athan Papailiou regularly advises physicians and surgeons on matters involving physician employment, credentialing, privileging, peer review, and related regulatory issues. Reach out at (509) 215-4679 or by e-mail at contact@athan-law.com.

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