

UHA, Utah Hospitals & Health Systems Association
Guidelines for Non-Payment for Serious Events

Utah Hospitals are committed to patient safety and delivering high quality care to every patient in the state. Accordingly, the UHA Board of Trustees hereby recommends that Utah hospitals adopt the following Guidelines for Non-payment for Serious Events:

Guidelines:

Utah hospitals are committed to delivering safe care. In recognition of this commitment, ***Utah hospitals agree not to seek payment for costs associated with the occurrence of a serious event if an investigation by the hospital determines that the event was reasonably preventable and was within the control of the hospital.*** A hospital's decision to waive charges is not necessarily a determination of a serious event. A hospital may waive charges even if no serious event occurred.

The list included in these guidelines details the serious events for which a hospital will not seek payment if the hospital determines them to be preventable and within the hospital's control.

Pursuant to these guidelines, a hospital will not seek payment from patients or payers for additional hospital charges directly resulting from the occurrence of an event if:

- The event results in an increased length of stay, increased level of care or significant intervention.
- An additional procedure is required to correct an event caused by a previous procedure.
- An unintended procedure is performed.
- Re-admission is required as a result of an event that occurred in that same facility.

Hospitals will collaborate with other providers to the extent possible to minimize the financial impact to patients and payers resulting from a serious event.

These guidelines do not apply to the entire episode of care-only the care made necessary by the serious event.

Serious Events:

Pursuant to the above guidelines, ***if the hospital determines an episode to be preventable and within its exclusive control***, hospitals will not seek payment for costs directly resulting from the occurrence of the following events:

1. Surgical Events

- A. Surgery performed on the wrong body part.
- B. Surgery performed on the wrong patient.
- C. Wrong surgical procedure performed on a patient.
- D. Unintended retention of a foreign object in a patient after surgery or other procedure.

E. Intraoperative or immediately post-operative death in an ASA class I patient. (ASA is the American Society of Anesthesiologists. Class I means a healthy patient, no medical problems.)

2. Product or Device Events

A. Patient death or serious physical injury associated with the use of contaminated drugs, devices, or biologics provided by the healthcare facility.

B. Patient death or serious physical injury associated with the use or function of a device in patient care in which the device is used or functions other than as intended or is difficult to use as intended.

C. Patient death or serious physical injury associated with intravascular air embolism that occurs while being cared for in a healthcare facility.

3. Patient Protection Events

A. Infant discharge to the wrong person.

B. Patient death or serious physical injury associated with patient elopement (disappearance), from a secure area, unless patient has left without permission for more than four hours.

C. Patient suicide or attempted suicide resulting in serious physical injury, while being cared for in a healthcare facility.

4. Care Management Events

A. Patient death or serious physical injury associated with a medication error (e.g., errors involving the wrong drug, wrong dose, wrong patient, wrong time, wrong date, wrong preparation or wrong route of administration).

B. Patient death or serious physical injury associated with a hemolytic reaction due to the administration of ABO-incompatible blood or blood products.

C. Maternal death or serious physical injury associated with labor or delivery in a low-risk pregnancy while being cared for in a healthcare facility.

D. Death or serious physical injury (kernicterus) associated with failure to identify and treat hyperbilirubinemia in neonates.

E. Stage 3 or 4 pressure ulcers acquired after admission to a healthcare facility.

F. Patient death or serious physical injury due to spinal manipulative therapy.

G. Unanticipated death of a full-term newborn

H. Prolonged fluoroscopy with cumulative dose greater than 1500 rad to a single field

I. Radiotherapy to the wrong body region

J. Radiotherapy greater than 25% above the prescribed radiotherapy dose

K. Death or major permanent loss of function related to a healthcare acquired infection

5. Environmental Events

A. Patient death or serious physical injury associated with an electric shock or elective cardioversion while being cared for in a healthcare facility.

B. Any incident in which a line designated for oxygen or other gas to be delivered to a patient contains the wrong gas or is contaminated by toxic substances.

C. Patient death or serious physical injury associated with a burn incurred from any source while being cared for in a healthcare facility.

D. Patient death or serious physical injury associated with a fall while being cared for in a healthcare facility.

E. Patient death or serious physical injury associated with the use of restraints or bedrails while being cared for in a healthcare facility.

6. Criminal Events

A. Abduction of a patient of any age.

B. Sexual assault on a patient within or on the grounds of the health care facility.

C. Any instance of care ordered by or provided by someone impersonating a physician, nurse, pharmacist, or other licensed health care provider.

D. Death or significant injury of a patient or staff member resulting from a physical assault (ie.,battery) that occurs within or on the grounds of the health care facility.