February 18, 2008: Oregon hospitals are committed to patient safety and delivering high quality care to every patient in the state. Accordingly, the OAHHS Board of Trustees hereby resolves to adopt the following Guidelines for Non-payment for Serious Adverse Events:

**Guidelines:**
Oregon hospitals are committed to delivering safe care. In recognition of this commitment, Oregon hospitals agree to not seek payment for costs associated with the occurrence of a serious adverse event if an investigation by the hospital determines that the event was preventable and was within the control of the hospital. The list included in these guidelines details the serious adverse events for which hospitals will not seek payment if the hospital determines them to be preventable and within the hospital’s control.

Pursuant to these guidelines, hospitals 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, level of care or significant intervention.
- An additional procedure is required to correct an event in the previous procedure.
- An unintended procedure is performed.
- Re-admission is required as a result of an event that occurred in that same facility.

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

**Serious Adverse Events:**
Pursuant to the above guidelines, 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. 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 health care facility.

**3. Patient Protection Events**
A. Infant discharged to the wrong person
B. Patient death or serious physical injury associated with patient elopement (disappearance) 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 rate, 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. Patient death or serious physical injury associated with hypoglycemia, the onset of which occurs while the patient is being cared for in a healthcare facility.

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

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

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

H. Any perinatal death or serious physical injury unrelated to a congenital condition in an infant having a birth weight greater than 2500 grams.

5. Environmental Events

A. Patient death or serious physical injury associated with an electric shock 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.

This list of events is drawn from the work of the Oregon Patient Safety Commission.

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