

Applies to:**Commercial Products**

- Harvard Pilgrim Health Care Commercial products
- Tufts Health Plan Commercial products

Public Plans Products

- Tufts Health Direct – A Massachusetts Qualified Health Plan (QHP) (a commercial product)
- Tufts Health Together – MassHealth MCO Plan and Accountable Care Partnership Plans
- Tufts Health RITogether – A Rhode Island Medicaid Plan
- Tufts Health One Care – A dual-eligible product

Senior Products

- Tufts Health Plan Senior Care Options (SCO) (a dual-eligible product)
- Tufts Medicare Preferred HMO/PPO (Medicare Advantage products)

Policy¹

Consistent with state and federal guidelines, Point32Health does not reimburse services associated with Serious Reportable Events (SRE) and Provider Preventable Conditions (PPC). Providers are not permitted to bill members related to these events and/or conditions. This policy applies to services performed in all settings and across all provider types. The list of PPCs and SREs in this policy is subject to change. Point32Health monitors, investigates, and responds to these quality of care events in an effort to identify and act on opportunities for improvement.

Definitions

Serious Reportable Event (SRE): An SRE is an event that is designated as such by state and federal agencies, including through its Department of Public Health (DPH) and EOHHS (Executive Office of Health and Human Services). An SRE may also be referred to as Adverse Events or Sentinel Events. These are events that are clearly identifiable and measurable, usually preventable, and which are serious in their consequences (e.g., resulting in death or loss of a body part, injury more than transient loss of a body function). These events are also characterized as adverse in nature, represent a clear indication of a health care provider's lack of safety systems, and/ or are events that are important measures for public credibility or public accountability.

Provider Preventable Condition (PPC): A condition that meets the definition of a "Health Care Acquired Condition (HCAC)", or an "Other Provider Preventable Condition (OPPC)" as defined by the Centers for Medicare & Medicare Services (CMS) in federal regulations at 42 CFR 447.26(b).

Health Care Acquired Condition (HCAC): Any condition occurring in the inpatient hospital setting identified in the CMS full list of hospital-acquired conditions (HACs) pursuant to Section 1886(d)(4)(D)(iv) of the Social Security Act (SSA).

Other Provider-Preventable Condition (OPPC): A condition occurring in any health care setting as defined in CMS federal regulations at 42 CFR 447.26(b). The three Medicare National Coverage Determinations (NCD) are:

- Surgical or other invasive procedure performed on the wrong body part
- Surgical or other invasive procedure performed on the wrong patient
- Wrong surgical or other invasive procedure performed on a patient

¹ This policy is applicable to any Point32Health network provider, regardless of the member's plan of enrollment. In other words, it applies to affiliates or subsidiaries that, through contract, utilizes the Point32Health provider network.

Point32Health Reimburses²

Point32Health reimburses physicians who treat/repair a member for an SRE, PPC, HCAC, or OPPC caused by another provider, subject to all billing and payment guidelines and policies.

Refer to [Appendix A](#) for a list of conditions and events subject to this policy. This Appendix is informed by federal and state regulations in collaboration with the National Quality Forum (NQF), and is subject to change. Examples of SREs and PPCs include:

- Any patient death or serious injury determined to be preventable by our Quality of Care Committee, State, or Federal Agency
- Blood incompatibility
- Catheter-associated urinary tract infection (UTI)
- Deep vein thrombosis following a total knee replacement or hip replacement (not applicable to patients under 21 years of age or obstetric patients)
- Discharge or release of a patient/resident of any age, who is unable to make decisions, to anyone other than an authorized person
- Falls and trauma, including those related to fractures, dislocations, intracranial injuries, crushing injuries or burns
- Manifestations of poor glycemic control
- Pressure ulcers (stage III or IV), or unstageable pressure ulcers acquired after admission/presentation to a healthcare setting
- Surgical site infections

Provider Billing and Reporting Requirements

Reporting

In addition to applicable federal and state reporting obligations, providers are required to notify Point32Health of SREs and PPCs that occur when providing services to Point32Health members (including members of affiliates or subsidiaries that utilize Point32Health provider networks). Providers should submit notification, including all appropriate diagnosis codes, procedure codes, and reports submitted to the state department of public health and/or CMS, including but not limited to, 7-day and 30-day SRE reports, to the **Point32Health Quality Management Department via fax at 617-673-0973 or via email to adverse_events_submission@point32health.org**. Providers should indicate all event types being reported. Notifications must be submitted within 30 calendar days of the date the SRE and/or PPC event occurred. For events designated in more than one event type category or on multiple dates, providers are required to separately report the event for each event type category and date.

Billing

Providers should include the appropriate diagnosis code and present on admission (POA) indicator, where applicable, on claims submitted to Point32Health.

Providers should report PPCs to Point32Health by billing for services or procedures rendered as follows:

- **Inpatient hospitals:**
 - Services not directly related to the PPC: submit a reimbursable claim
 - Services directly related to the PPC: submit a no-pay claim on bill type 110, including appropriate modifiers, reason code 11, and Present on Admission (POA) indicator for reporting purposes only
- **Outpatient hospitals and freestanding ambulatory surgery centers:**
 - Services not directly related to the PPC: submit a reimbursable claim
 - Services directly related to the PPC: submit a no-pay claim on bill type 130, including appropriate modifiers and reason code 11 for reporting purposes only
- **All other providers:**
 - Services not directly related to a National Coverage Determination (NCD): submit a reimbursable claim
 - Services directly related to an NCD: submit a no-pay claim for reporting purposes only

² In accordance to 105 CMR 130.332, a hospital that provides services resulting from an SRE (treating facility) occurring on the premises of a separately licensed hospital or an ambulatory surgery center licensed pursuant to 105 CMR 140.000 (responsible facility), may not charge or seek reimbursement for those services if the treating facility and the responsible facility have common ownership or a common corporate parent.

Present on Admission (POA) Indicators

POA Indicator	Description
Y	Yes (present at the time of inpatient admission)
N	No (not present at the time of inpatient admission)
U	Unknown (documentation is insufficient to determine if condition was present on admission)
W	Clinically undetermined (provider is unable to determine whether condition was present on admission)
1 or Blank	1 (on electric claims) or blank (for paper claims) = exempt from POA indicator

Modifiers

Modifier	Description
PA	Surgery on wrong body part
PB	Surgery on wrong patient
PC	Wrong surgery on patient

Other Information

- Providers cannot bill Point32Health, the member, the member's next of kin, authorized representative, or any other payer for care directly related to an SRE or PPC, correction or remediation of an SRE or PPC, or subsequent complications arising from an SRE or PPC. Such nonpayment will not prevent member access to health care services.
- Providers may not charge member cost sharing for admissions during which an SRE or PPC occurred. Point32Health does not compensate for readmission or follow-up care at the same facility within 30 days of discovery of the event when the same provider, or a provider owned by the same parent organization, provides care related to an SRE or PPC, correction or remediation of an SRE or PPC, or subsequent complications arising from an SRE or PPC.
- The Quality Management Department may request additional clinical documentation after reviewing the reported SRE, HCAC, or PPC. Providers must comply with requests for additional information from the Quality Management Department within 5 business days via phone, fax, or secure email.
- Point32Health may review provider medical records at any time regarding discovered SRE, HCAC, or PPCs if it is determined there are incidents of non-reporting. Upon discovery, the facility is required to submit all related reports, investigations, and medical records related to the event. At the conclusion of review, related payments to the preventable SRE, HCAC, or PPC may be retracted.
- Since HCACs and OPPCs are applicable only to hospitals and freestanding ambulatory surgery centers, all other providers should submit no-pay claims only for services directly related to NCDs.
- Compensation will be adjusted according to Present on Admission (POA) indicator guidelines as well as federal CMS requirements. Adjustments will be made based on provider health services payment contracts. To determine whether an event may meet one of the definitions above and therefore would be subject to nonpayment, licensed health care providers should check federal web sites for a comprehensive listing.
 - **Tufts Health Together:** For contracted non-APR DRG facilities, there will be a 25% reduction in the payment.
- When provider payments are denied or retracted, in accordance with SREs and PPCs, an explanatory notification will be included on the claim Explanation of Payment (EOP).

Additional Resources

- [CMS ICD-10 HAC List](#)
- [CMS POA Indicator Options and Definitions](#)
- [Commonwealth of Massachusetts, Chapter 305](#)
- [Department of Public Health, 105 CMR 130.331, 130.332, 140.307, 140.308](#)
- [Federal Regulations: 42 C.F.R. 447.26\(b\)](#)
- [Maine Statute: MRS 22§1721](#)
- [Maine Statute: MRS 22§8752](#)
- [Maine Statute: MRS 22§8753](#)
- [National Quality Forum: Serious Reportable Events](#)
- [New Hampshire Department of Health and Human Services: Serious Adverse Events](#)
- [Rhode Island Gen. Laws § 23-17-40](#)

Publication History

- 06/01/2026: Added clarification and details of existing processes to enhance reference support
- 12/01/2025: Annual policy review: administrative updates

11/29/2024: Annual policy review; no changes
01/02/2024: Policy moved to new template; includes all lines of business

Background and Disclaimer Information

This policy applies to the products of Harvard Pilgrim Health Care and Tufts Health Plan and their affiliates, as identified in the check boxes on the first page for services performed by contracted providers.

Payment is based on member benefits and eligibility on the date of service, medical necessity review, where applicable, and the provider's network participation agreement with the Plan. As every claim is unique, this policy is neither a guarantee of payment, nor a final indication of how specific claim(s) will be adjudicated. Claims payment is subject to member eligibility and benefits on the date of service, coordination of benefits, referral/authorization and utilization management requirements (when applicable), adherence to Plan policies and procedures, and claims editing logic. An authorization is not a guarantee of payment.

Point32Health reserves the right to amend a payment policy at its discretion. CPT and HCPCS codes are updated as applicable; please adhere to the most recent CPT and HCPCS coding guidelines.

We reserve the right to conduct audits on any provider and/or facility to ensure accuracy and compliance with the guidelines stated in this payment policy. If such an audit determines that a provider/facility did not comply with this payment policy, Harvard Pilgrim Health Care and Tufts Health Plan will expect the provider/facility to refund all payments related to noncompliance.

Appendix A: Serious Reportable Events and Provider Preventable Conditions List

Crosswalk of PPC HCAC, PPC OPPC, and SRE

Note: Point32Health recommends providers review state and federal guidelines to ensure the most up to date information.

Condition or Event	PPC HCAC	PPC OPPC (NCD)	SRE
Surgery or other invasive procedure performed on the wrong site		X	X
Surgery or other invasive procedure performed on the wrong patient		X	X
Wrong surgical or other invasive procedure performed on a patient		X	X
Unintended retention of a foreign object in a patient after surgery or other invasive procedure	X		X
Intraoperative or immediately postoperative/post procedure death in an ASA Class I patient			X
Patient death or serious injury associated with intravascular air embolism that occurs while being cared for in a healthcare setting	X		X
Patient death or serious injury associated with the use of contaminated drugs, devices, or biologics provided by the healthcare setting			X
Patient death or serious injury associated with the use or function of a device in patient care in which the device is used for functions other than as intended			X
Death or serious injury of a patient or staff associated with the introduction of a metallic object into the MRI area			X
Patient death or serious injury associated with unsafe administration of blood products			X
Patient death or serious injury associated with a fall while being cared for in a healthcare setting			X
Artificial insemination with the wrong donor sperm or wrong egg			X
Patient death or serious injury resulting from the irretrievable loss of an irreplaceable biological specimen			X
Maternal death or serious injury associated with labor or delivery in a low-risk pregnancy while being cared for in a healthcare setting			X
Death or serious injury of a neonate associated with labor or delivery in a low-risk pregnancy			X
Pressure ulcers — stage III or IV	X		X
Unstageable pressure ulcers acquired after admission/presentation to a healthcare setting			X
Patient death or serious injury resulting from failure to follow up or communicate laboratory, pathology, or radiology test results			X
Blood incompatibility	X		
Manifestations of poor glycemic control, including the following: <ul style="list-style-type: none"> Diabetic ketoacidosis Nonketotic hyperosmolar coma Hypoglycemic coma Secondary diabetes with ketoacidosis Secondary diabetes with hyperosmolality 	X		
Iatrogenic pneumothorax with venous catheterization	X		
Catheter-associated urinary tract infection (UTI)	X		
Vascular catheter-associated infection	X		
Deep vein thrombosis following a total knee replacement or hip replacement <i>Not applicable to pediatric (under 21 years of age) or obstetric patients.</i>	X		
Falls and trauma, including those related to fractures, dislocations, or intracranial injuries, crushing injuries or burns	X		
Surgical site infection, mediastinitis, following coronary artery bypass graft (CABG)	X		
Surgical site infection following certain orthopedic procedures: <ul style="list-style-type: none"> Spine Neck Shoulder Elbow 	X		
Surgical site infection following bariatric surgery for obesity: <ul style="list-style-type: none"> Laparoscopic gastric bypass Gastroenterostomy Laparoscopic gastric restrictive surgery 	X		
Surgical site infection following Cardiac Implantable Electronic Device (CIED) procedures	X		

Condition or Event	PPC HCAC	PPC OPPC (NCD)	SRE
Patient death or serious 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)			X
Patient or staff death or serious injury associated with an electric shock in the course of a patient care process in a healthcare setting			X
Patient or staff death or serious injury associated with a burn incurred from any source in the course of a patient care process in a healthcare setting			X
Any incident in which systems designated for oxygen or other gas to be delivered to a patient contains no gas, the wrong gas or are contaminated by toxic substances			X
Patient death or serious injury associated with the use of physical restraints or bedrails while being cared for in a healthcare setting			X
Any instance of care ordered by or provided by someone impersonating a physician, nurse, pharmacist, or other licensed healthcare provider			X
Abduction of a patient/resident of any age			X
Sexual abuse/assault on a patient or staff within or on the grounds of a healthcare setting			X
Death or serious injury of a patient or staff resulting from a physical assault (i.e., battery) that occurs within or on the grounds of a healthcare setting			X
Patient suicide, attempted suicide, or self-harm that results in serious injury while being cared for in a healthcare setting			X
Discharge or release of a patient/resident of any age, who is unable to make decisions, to other than an authorized person			X
Patient death or serious injury associated with patient elopement (disappearance)			X