

Reporting Potential Malpractice Claims

Current carrier: Preferred Physicians Medical Risk Retention Group, Inc. (PPM)
11880 College Blvd, Suite 300
Overland Park, KS 66210

Potential Malpractice Claims

Contact Bruce Donald at (804) 594-1381 or via email at bdonald@resultperformance.net

All potential malpractice claims including dental injuries should be reported to Bruce. If readily available, please include the patient's name, DOB, DOS and location. After review, Bruce will have Alisha obtain the anesthesia record and report the incident to PPM.

Please refer to the attached flyer from PPM for additional information on reporting events and claim handling guidelines.

What Events Should be Reported to Preferred Physicians Medical?

Coverage under your Preferred Physicians Medical (PPM) insurance policy is initiated by the Policyholder reporting adverse medical outcomes to PPM. Your prompt notification of any adverse medical outcome also enables us to provide you with specific risk management advice that may help minimize the possibility of a claim or lawsuit. We encourage our policyholders to seek our assistance regardless of the severity of the injury. In fact, our most frequently reported adverse medical outcomes involve dental injuries. Regardless of whether you are reporting a dental claim or a claim involving brain damage or death, you can be confident our staff of claims attorneys and claims specialists have experience handling every type of anesthesia claim.

WHEN TO REPORT

The Policyholder **must** immediately report to PPM when any demand for compensation, notice, summons, petition, complaint, deposition request, medical board investigation or other legal paper is received.

The Policyholder **should** report to PPM any unexpected or adverse outcome. An unexpected or adverse outcome includes, but is not limited to, the following:

- Unexpected death
- Anoxic/hypoxic injury
- Burn
- Intra-operative fire
- Nerve injury
- Wrong site surgery or block
- Airway difficulty
- Dental damage, per PPM's dental claims handling guidelines

Other events the Policyholder **should** report to PPM include:

- Patient complaint or threat suggesting medical negligence or litigation - verbal or written
- Meetings requested by hospital/facility administration or risk management
- Meetings requested by patient or patient's family
- QA/Peer Review/Sentinel Event involving your care
- Telephone call or letter from an attorney representing the patient or patient's family
- Billing disputes
- Accusatory comments or notes regarding anesthesia care by other healthcare providers
- Any event that could lead to a medical board inquiry

WHO TO CONTACT

In order to protect confidentiality and discoverability of the incident report and to provide timely risk management advice, initial contact should be by telephone. **The Policyholder may call 800-562-5589 or 913-262-2585 and ask to speak with the Claims Department.** The Policyholder will be connected with a claims attorney or claims specialist. PPM's claims attorneys and claims specialists are available 24 hours a day, 7 days a week via our automated after-hours answering service.

WHAT INFORMATION IS NEEDED

The following initial information is typically requested:

- Date of the treatment/incident
- Patient's name
- Patient's date of birth or age
- Name of hospital/facility
- Type of anesthesia provided
- Type of procedure/surgery
- Other anesthesia personnel involved
- Other healthcare providers/witnesses
- ASA status
- Description of the events related to the incident

Claim Handling Guidelines: Instructions and Recommendations In the Event of an Adverse Medical Outcome, Malpractice Claim or Lawsuit

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A Preferred Physicians Medical Claims Professional is available 24 hours per day at:

1-800-562-5589

What Can I do to Avoid or Minimize a Claim or Lawsuit

In general, you should follow the steps outlined below. Of course, every situation is unique and that is why we encourage our policyholders to contact a Preferred Physicians Medical Claims Professional at the earliest opportunity.

- Attempt to maintain a good rapport with the patient and/or patient’s family. In most circumstances, you should participate in the initial discussions about an adverse medical event. Do **NOT** rely on other health care providers to explain a mishap. All too often their explanation will blame you. Do not attempt to assign blame to others. A careful investigation often leads to a different conclusion. If threats of legal action have already arisen, or a claim has already been asserted, contact the company before discussing the situation further.
- Preserve all evidence. In the event of an adverse medical outcome, the most important evidence is the medical record. You should verify that the medical records are both complete and accurate. The medical records should contain objective information. You should not speculate or attempt to assign blame. Self-serving statements or comments rarely help and often subject you to criticism. Once a medical record is complete, do **NOT** alter the record without clearly indicating that it is a correction. Corrections should be clearly marked, initialed and dated.
- Preserve other relevant evidence including: medication vials, equipment that may be responsible, etc.
- Help to preserve the availability of defenses to a claim by limiting your discussions regarding the adverse outcome. You should not give a statement without first contacting Preferred Physicians Medical. Any statement or investigation by the hospital should be conducted in accordance with formal Peer Review or Quality Assurance protocols.
- Avoid any contact with attorneys involved on behalf of the patient or other health care providers until you contact Preferred Physicians Medical.
- Do **NOT** include notations about reporting a claim or incident in a medical record. Keep the incident report and any related information sent by the company or attorney in a separate file to preserve its confidential nature and the attorney-client privilege.
- Do **NOT** admit liability and never assume responsibility for an injury without first consulting Preferred Physicians Medical. Further reflection and investigation may uncover other explanations for a medical problem or mishap.

Risk Management: Minimizing Dental Losses

The following information is provided by Preferred Physicians Medical to its policyholders. These guidelines were developed to respond to a significant number of questions and concerns regarding dental injuries and their handling.

Before a Dental Injury Occurs

In order to minimize losses caused by dental injuries, it is recommended that the risk of dental injury be discussed with all patients undergoing general anesthesia and that this risk be included on anesthesia consent forms. During the pre-anesthesia evaluation, attention should be directed to the condition of the patient's teeth. Any existing damage should be noted on the record. Patients with existing dental problems should be advised that they are at increased risk for dental injury. Patients with existing bridges are particularly susceptible to injuries, which frequently require expensive repairs.

After a Dental Injury Occurs

In the event dental injury occurs, the patient should be notified and advised to consult with a dentist. During these discussions, the patient will often ask, "who is going to pay my dental bill?" Unless the anesthesiologist has previously discussed the manner in which dental claims are handled, please contact Preferred Physicians Medical before assuming responsibility for a patient's dental bill. This provides Preferred Physicians Medical with an opportunity to review and discuss the options for handling such claims.

It is extremely important to avoid an assumption of responsibility. First, dental injuries, especially those involving bridges, may be more expensive than expected. Assuming responsibility in advance may contractually obligate the anesthesiologist to pay damages that did not result from the anesthesia. In a large percentage of the dental injuries reported,

Preferred Physicians Medical discovers that the patient has significant pre-existing dental disease or conditions, which caused or contributed to the injury. Assuming liability before the patient's dental history is known may obligate the anesthesiologist to take responsibility for years of dental neglect. Second, assuming responsibility may prevent Preferred Physicians Medical from handling the claim appropriately.

Preferred Physicians Medical recommends that patients be referred to their own dentist. If the patient does not have a dentist, the anesthesiologist may suggest a known dentist. Again, because the anesthesiologist wants to avoid an assumption of responsibility for the dentist's bill, Preferred Physicians Medical recommends having the patient schedule the appointment.

If pressed by the patient to assume the cost associated with the dental consult and injury, the anesthesiologist should instead advise the patient to forward the dental bills to the anesthesia office for review. If the anesthesiologist has an office administrator, Preferred Physicians Medical recommends that this individual be given responsibility for gathering information regarding a patient's dental claim. By utilizing an office administrator, the anesthesiologist is often able to avoid an immediate assumption of responsibility for the dental bills. The anesthesiologist or office administrator should then contact Preferred Physicians Medical to report the dental claim and to discuss the options for handling the claim.

OPTIONS FOR HANDLING DENTAL CLAIMS

Direct Handling by Policyholder

In order to avoid a blemish on their credentialing report or just the additional paperwork, many anesthesiologists prefer to handle dental claims without reporting them to Preferred Physicians

Medical. Under this scenario, dental claims are commonly resolved by a direct payment to the patient's dentist or by discounting the patient's anesthesia bill to cover any dental charges that are not reimbursed by the patient's insurance. This option avoids the National Practitioners Data Bank reporting

requirement, most state reporting requirements, and does not appear on credentialing reports provided on the policyholder's behalf to hospital and insurance organizations.

In the event the anesthesiologist decides to make a direct payment to the patient or to the patient's dentist, the anesthesiologist should ask the patient to sign a general release. Preferred Physicians Medical can assist you by providing a sample documents form.

Note: In the event you require assistance, PPM will establish an incident file. Such reports, however, are not reflected on your credentialing report.

PPM Claims Handling

In situations where the anesthesiologist wishes to turn over responsibility to Preferred Physicians Medical, you should do so prior to assuming responsibility for payment. This provides Preferred Physicians Medical with an opportunity to review the claim and make recommendations for its resolution. In the event the patient presses for a commitment, Preferred Physicians Medical suggests that the patient be informed, "we are referring your claim to our insurance carrier, Preferred Physicians Medical." Preferred Physicians Medical will then assume the responsibility of interacting with the patient.

As a general rule, Preferred Physicians Medical recommends payment of dental claims only in cases where the injury results from a failure to meet the appropriate standard of care. Preferred Physicians Medical believes it is appropriate to defend dental claims when there is no evidence to suggest a breach of the standard of care. In order to maintain low premiums, Preferred Physicians Medical does not pay dental claims under a no-fault provision. At the same time, Preferred Physicians Medical is committed to evaluating dental claims on a case by case basis consistent with our policy.

As an example, Preferred Physicians Medical may recommend payment for dental injuries that result

from multiple intubation attempts if there is no anatomical structure or condition to explain the difficulty with intubation. On the other hand, Preferred Physicians Medical would typically recommend denying a dental claim that cannot be reasonably prevented, e.g., patients who bite down on the oral airway in the recovery room.

Note: In order for PPM to handle your dental claim, PPM is required to establish a claim file. This file will be reflected on your credentialing report and you may need to disclose it on applications for hospital or insurance company privileges.

Other Options

Preferred Physicians Medical recognizes that it has been customary in some communities for the anesthesia group to reimburse patients for dental injuries on a strict liability basis. Preferred Physicians Medical recommends discussing this and other options with us. Increasing dental costs and fewer patients with dental insurance have led a number of anesthesia groups to re-evaluate the cost effectiveness of this approach.

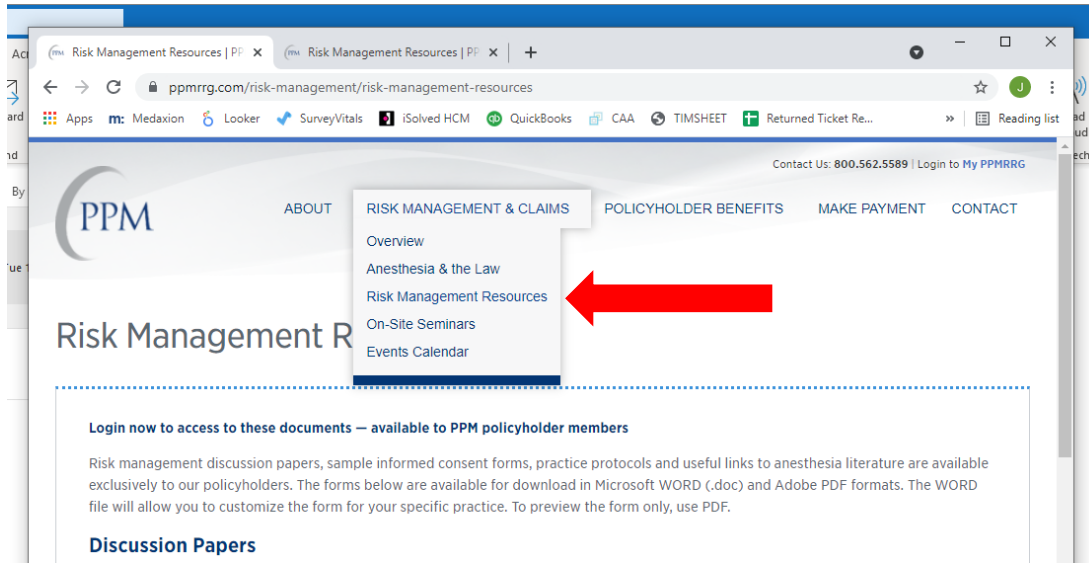
After selecting the appropriate claims handling option for a particular situation, Preferred Physicians Medical will continue to be available to assist the anesthesiologist in resolving the dental claim in an expedient manner.

Based on the options discussed above, Preferred Physicians Medical has resolved or assisted our policyholders in resolving dental claims quickly and efficiently. The majority of claims turned over to Preferred Physicians Medical are resolved without litigation or payment. Our experience in this regard indicates that the majority of dental claims are defensible.

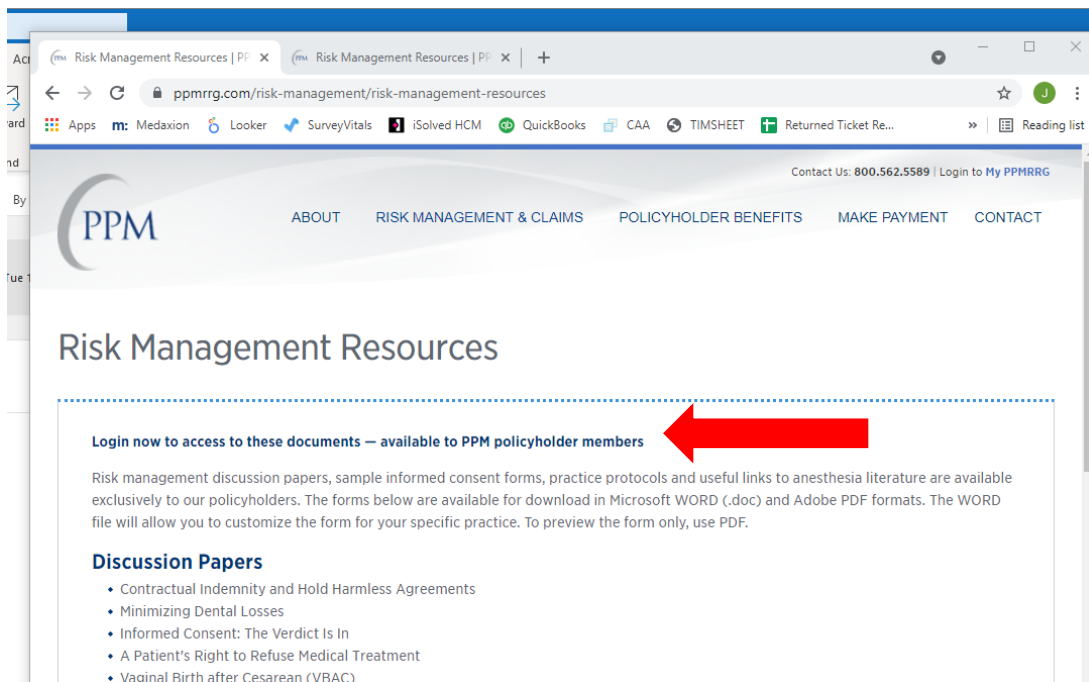
How to Access PPM Online Resources

Go to ppmrrg.com

Put your cursor over 'RISK MANAGEMENT & CLAIMS' at the top and click on 'Risk Management Resources'

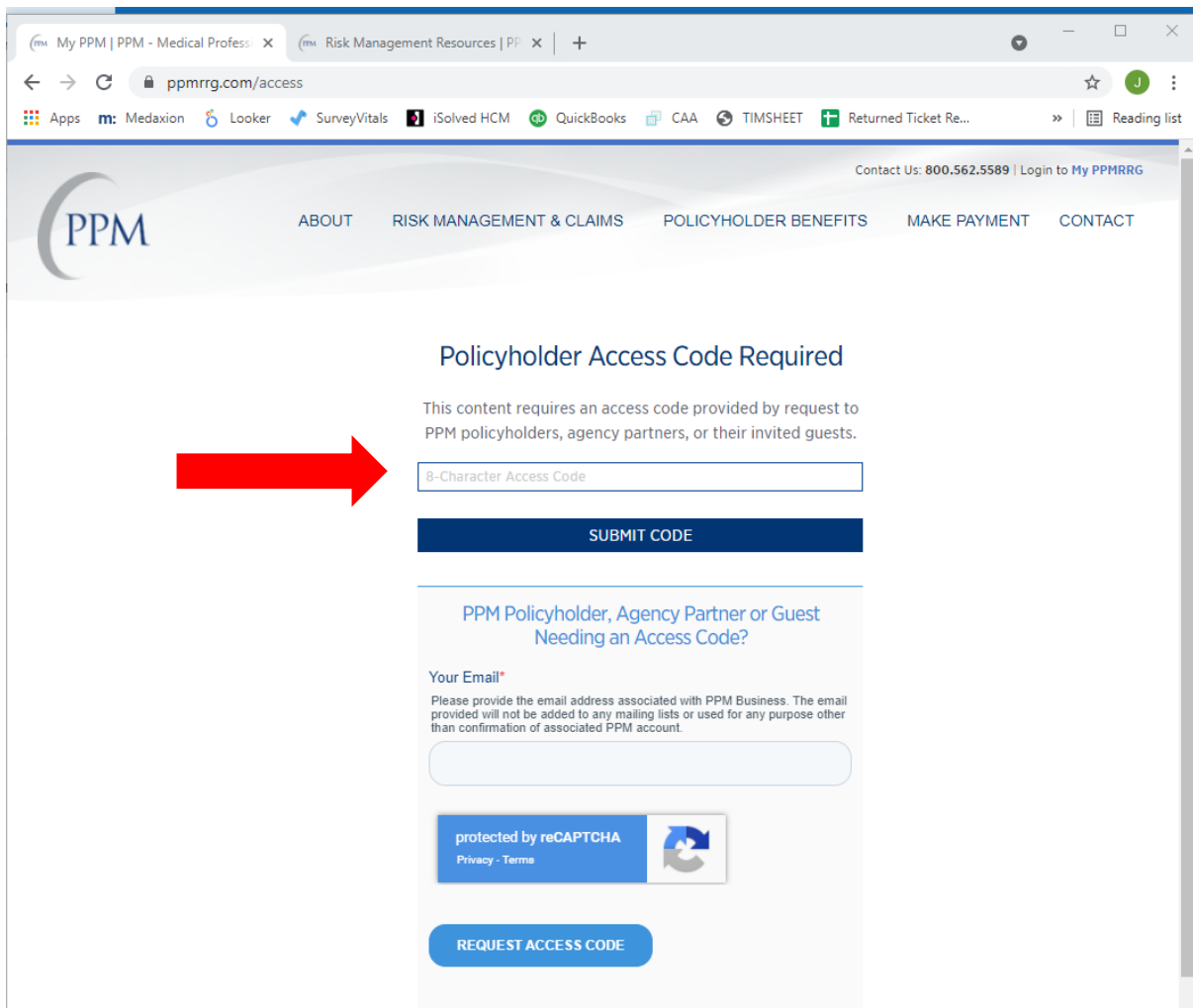


Click on 'Login now to access these documents- available to PPM policyholder members'



Enter the member access code: **ppmexclusive**

(all lowercase)



The screenshot shows a web browser window with the URL ppmrrg.com/access. The page features the PPM logo and a navigation menu with links for ABOUT, RISK MANAGEMENT & CLAIMS, POLICYHOLDER BENEFITS, MAKE PAYMENT, and CONTACT. The main heading is "Policyholder Access Code Required". Below this, a message states: "This content requires an access code provided by request to PPM policyholders, agency partners, or their invited guests." A red arrow points to an input field labeled "8-Character Access Code". Below the input field is a dark blue button labeled "SUBMIT CODE". Further down, there is a section titled "PPM Policyholder, Agency Partner or Guest Needing an Access Code?" with a "Your Email*" field and a note: "Please provide the email address associated with PPM Business. The email provided will not be added to any mailing lists or used for any purpose other than confirmation of associated PPM account." Below the email field is a reCAPTCHA widget with a "protected by reCAPTCHA" label and a "Privacy - Terms" link. At the bottom of this section is a blue button labeled "REQUEST ACCESS CODE".

You should now have access to PPM's online resources including:

- Discussion Papers
- Resources for various policies and protocols
- Self-Study Courses
- Useful links