

To: SISNEROS, ALICE

134 E DE VARGAS ST

SANTA FE, NM 87501-2702

From: National Practitioner Data Bank**Re:** Response to Your Self-Query

The enclosed information is released by the National Practitioner Data Bank (NPDB) for restricted use under the provisions of Title IV of Public Law 99-660, the Health Care Quality Improvement Act of 1986, as amended; Section 1921 of the Social Security Act; and Section 1128E of the Social Security Act.

Title IV established the NPDB as an information clearinghouse to collect and release certain information related to malpractice payment history and professional competence or conduct of physicians, dentists, and other licensed health care practitioners.

Section 1921 of the Social Security Act expanded the scope of the NPDB. Section 1921 was enacted to protect program beneficiaries from unfit health care practitioners, and to improve the anti-fraud provisions of federal and state health care programs. Section 1921 authorizes the NPDB to collect certain adverse actions taken by state licensing and certification authorities, peer review organizations, and private accreditation organizations, as well as final adverse actions taken by state law or fraud enforcement agencies (including, but not limited to, state law enforcement agencies, state Medicaid Fraud Control Units, and state agencies administering or supervising the administration of a state health care program), against health care practitioners, health care entities, providers and suppliers.

Section 1128E of the Social Security Act was added by Section 221(a) of Public Law 104-191, the Health Insurance Portability and Accountability Act of 1996. The statute established a national data collection program (formerly known as the Healthcare Integrity and Protection Data Bank) to combat fraud and abuse in health care delivery and to improve the quality of patient care. Section 1128E information is now collected and disclosed by the NPDB as a result of amendments made by Section 6403 of the Affordable Care Act of 2010, Public Law 111-148. Section 1128E information includes certain final adverse actions taken by federal agencies and health plans against health care practitioners, providers, and suppliers.

Regulations governing the NPDB are codified at 45 CFR part 60. Responsibility for operating the NPDB resides with the Secretary of the U.S. Department of Health and Human Services (HHS), and HRSA, Division of Practitioner Data Banks.

Reports from the NPDB contain limited summary information and should be used in conjunction with information from other sources in granting privileges, or in making employment, affiliation, contracting or licensure decisions. NPDB responses may contain more than one report on a particular incident, if two or more actions were taken as a result of a single incident (e.g., an exclusion from a federal or state health care program and an adverse licensure action). The NPDB is a flagging system, and a report may be included for a variety of reasons that do not necessarily reflect adversely on the professional competence or conduct of the subject named in the report.

The response received from a self-query belongs to the subject of the self-query. Subjects may share the information contained in their own self-query responses with whomever they choose.

If you require additional assistance, visit the NPDB web site (<https://www.npdb.hrsa.gov>) or contact the NPDB Customer Service Center at 1-800-767-6732 (TDD: 1-703-802-9395). Information Specialists are available to speak with you weekdays from 8:30 a.m. to 6:00 p.m. (5:30 p.m. on Fridays) Eastern Time. The NPDB Customer Service Center is closed on all Federal holidays.

NPDBP.O. Box 10832
Chantilly, VA 20153-0832<https://www.npdb.hrsa.gov>

5500000162601705

Process Date: 07/01/2020

Page: 1 of 1

SISNEROS, ALICE - SELF-QUERY RESPONSE**A. SUBJECT IDENTIFICATION INFORMATION** (Recipients should verify that subject identified is, in fact, the subject of interest.)

Practitioner Name: SISNEROS, ALICE
Date of Birth: 09/30/1954 **Gender:** FEMALE
Delivery Address: 134 E DE VARGAS ST, SANTA FE, NM 87501-2702
Social Security Number: ***-**-6441 **DEA:** MS0247937
NPI: 1780676700
License: NURSE PRACTITIONER, Cnp00292, NM
Professional School(s): UNIVERSITY OF NEW MEXICO (1996)

B. PAYMENT INFORMATION

Credit Card Information: XXXXXXXXXXXX2711 (12/2023)
NPDB Charge: \$4.00 **NPDB Bill Reference Number:** N69960859
Transaction Date: 07/01/2020 **Additional Paper Copies Requested:** 0

C. SUMMARY OF REPORTS ON FILE WITH THE DATA BANK AS OF 07/01/2020**The following report types have been searched:**

Medical Malpractice Payment Report(s):	Yes, See Below	Health Plan Action(s):	No Reports
State Licensure Action(s):	No Reports	Professional Society Action(s):	No Reports
Exclusion or Debarment Action(s):	No Reports	DEA/Federal Licensure Action(s):	No Reports
Government Administrative Action(s):	No Reports	Judgment or Conviction Report(s):	No Reports
Clinical Privileges Action(s):	No Reports	Peer Review Organization Action(s):	No Reports

Copies of these reports are enclosed for restricted/limited use as prescribed by statutes listed on the preceding cover page.

AMERICAN CASUALTY CO OF READING PA**MEDICAL MALPRACTICE PAYMENT****Basis for Action:** - FAILURE TO RECOGNIZE A COMPLICATION - FAILURE TO DIAGNOSE

Initial Action: - SETTLEMENT
DCN: 5500000056293123

Date of Action: 04/08/2009

----- Unabridged Report(s) Follow -----

NPDBP.O. Box 10832
Chantilly, VA 20153-0832<https://www.npdb.hrsa.gov>DCN: 5500000056293123
Process Date: 04/29/2009
Page: 1 of 3
SISNEROS, ALICE**SISNEROS, ALICE****AMERICAN CASUALTY CO OF READING PENNSYLVANIA****MEDICAL MALPRACTICE PAYMENT REPORT****Date of Action: 04/08/2009****Initial Action**

- SETTLEMENT

Basis for Initial Action- FAILURE TO RECOGNIZE A COMPLICATION
- FAILURE TO DIAGNOSE**A. REPORTING
ENTITY****Entity Name:** AMERICAN CASUALTY CO OF READING PA ***Address:** 333 S. WABASH AVE., 26 SOUTH**City, State, Zip:** CHICAGO, IL 60604**Country:****Name or Office:** YVETTE WHITTIER**Title or Department:** CLAIM COMPLIANCE MANAGER**Telephone:** (312) 822-5946**Entity Internal Report Reference:** HM103899**Type of Report:** INITIAL

*The reporting entity has changed its name or address on file with the NPDB. The following is the entity's most recent contact information reported to the NPDB on 10/29/2019:

Entity Name: AMERICAN CASUALTY CO OF READING PENNSYLVANIA**Address:** 151 N FRANKLIN ST**City, State, Zip:** CHICAGO, IL 60606-1821**Country:****B. SUBJECT
IDENTIFICATION
INFORMATION
(INDIVIDUAL)****Subject Name:** SISNEROS, ALICE**Other Name(s) Used:****Gender:** FEMALE**Date of Birth:** 09/30/1954**Organization Name:****Work Address:****City, State, ZIP:****Home Address:** 114 SPRUCE STREET**City, State, ZIP:** SANTA FE, NM 87501-1622**Deceased:** NO**Social Security Numbers (SSN):****National Provider Identifiers (NPI):****Professional School(s) & Year(s) of Graduation:** UNKNOWN (2003)**Occupation/Field of Licensure:** NURSE PRACTITIONER**State License Number, State of Licensure:** R19344, NM**Drug Enforcement Administration (DEA) Numbers:** MS0247937**Hospital Affiliation(s):****C. INFORMATION
REPORTED****Date of Report:** 04/29/2009**Relationship of Entity to****This Practitioner:** INSURANCE COMPANY - PRIMARY INSURER**PAYMENTS BY THIS PAYER FOR THIS PRACTITIONER****Amount of This Payment****for This Practitioner:** \$ 1,000,000.00

NPDBP.O. Box 10832
Chantilly, VA 20153-0832<https://www.npdb.hrsa.gov>DCN: 5500000056293123
Process Date: 04/29/2009
Page: 2 of 3
SISNEROS, ALICE

Date of This Payment: 04/08/2009

This Payment Represents: A SINGLE FINAL PAYMENT

Total Amount Paid or to Be Paid by

This Payer for This Practitioner: \$ 1,000,000.00

Payment Result of: SETTLEMENT

Date of Judgment or Settlement, if Any: 04/08/2009

Adjudicative Body Case Number: D-117-CV-2008-00319

Adjudicative Body Name: FIRST JUDICIAL DISTRICT COURT, COUNTY OF RIO ARriba, NM

Court File Number:

Description of Judgment or Settlement and Any

Conditions, Including Terms of Payment: FULL AND FINAL SETTLEMENT OF ALL CLAIMS WITH LIABILITY
DENIED. SETTLEMENT ACCOMPLISHED TO AVOID RISKS AND
VAGARIES OF LITIGATION VENUE VERY UNFAVORABLE**PAYMENTS BY THIS PAYER FOR OTHER PRACTITIONERS IN THIS CASE**

Total Amount Paid or to Be Paid by This Payer for All

Practitioners in This Case: \$ 1,000,000.00

Number of Practitioners for Whom This Payer Has Paid

or Will Pay in This Case: 1

PAYMENTS BY OTHERS FOR THIS PRACTITIONERHas a State Guaranty Fund or State Excess Judgment Fund
Made a Payment for This Practitioner in This Case, or Is Such a

Payment Expected to Be Made?: NO

Amount Paid or Expected to Be Paid by the State Fund:

Has a Self-Insured Organization and/or Other Insurance
Company/Companies Made Payment(s) for This Practitioner in
This Case, or Is/Are Such Payment(s) Expected to Be Made?: NOAmount Paid or Expected to Be Paid by Self-Insured
Organization(s) and/or Other Insurance Company/Companies:**CLASSIFICATION OF ACT(S) OR OMISSION(S)**

Patient's Age at Time of Initial Event: 38 YEARS

Patient's Gender: FEMALE

Patient's Type: INPATIENT

Description of the Medical Condition With Which the Patient

Presented for Treatment: CHEST PAIN, NUMBNESS IN HANDS AND SHORTNESS OF BREATH

Description of the Procedure Performed: URGENT CARE EVALUATION OF PATIENT'S COMPLAINTS

Nature of Allegation: TREATMENT RELATED (060)

Specific Allegation: FAILURE TO RECOGNIZE A COMPLICATION (112)

Date of Event Associated With Allegation or Incident: 10/28/2007

Specific Allegation: FAILURE TO DIAGNOSE (101)

Date of Event Associated With Allegation or Incident: 10/28/2007

Outcome: DEATH (09)

Description of the Allegations and Injuries or Illnesses Upon
Which the Action or Claim Was Based:ALLEGATIONS ARE THAT INSURED FAILED TO ADEQUATELY ASSESS
AND REFER PATIENT TO EMERGENCY TREATMENT RESULTING IN
PATIENT'S DEATH DUE TO PULMONARY EMBOLISM AFTER BEING
DISCHARGED FROM URGENT CARE FACILITY AS HAVING ASTHMA
AND INSTRUCTED TO FOLLOW UP WITH PRIMARY CARE PHYSICIAN.**D. SUBJECT
STATEMENT**

If the subject identified in Section B of this report has submitted a statement, it appears in this section.