

EMTALA Reporting Policy

Purpose:

To provide a process for identification of EMTALA violations. The hospital prohibits any actions that would discourage individuals from seeking emergency medical care, including demanding that emergency department patients pay before receiving treatment for emergency medical conditions or permitting debt collection activities that interfere with the provision, without discrimination, of emergency medical care.

Policy:

It is the policy of Weeks Medical Center to report when it has a reason to believe that it received an individual who has been transferred in an unstable condition from another hospital in violation of the requirements of 42 C.F.R § 489.24(d) (federal transfer regulations concerning the transfer of a patient with an emergency medical condition that had not been stabilized.)

Procedure:

- The Quality Improvement Committee has designated the Risk Manager as the individual responsible for investigating alleged improper transfers from other hospitals.
- Any employee or member of the medical staff who believes that Weeks Medical Center may have received an improperly transferred individual from another hospital must report that information to the Risk Manager.
- The Risk Manager will review the patient records and the records received from the transferring hospital. If necessary, the Risk Manager may consult with members of the medical staff and nursing staff to evaluate information in the record to determine whether the patient was transferred in compliance with federal transfer law (Emergency Medical Treatment and Active Labor Act (EMTALA), 42 U.S.C. § 1395dd).
- The Risk Manager will contact Director of the Emergency Department, the Chief Nurse Executive and the Administrator, to obtain the status of the patient at time of transfer and other information relevant to determining whether the patient was transferred in violation of EMTALA. The transferring hospital should be informed that the information is being requested to determine whether Weeks Medical Center is required to report the transferring hospital and to give the transferring hospital an opportunity to provide information concerning the patient's situation at the time of transfer. If the transferring hospital refuses to provide information, the investigation should be completed using records and information available at Weeks Medical Center.

Internal Form for EMTALA Audit

Questions to use for evaluation

- a. Did the transferring hospital identify that the patient had an emergency medical condition at the time of transfer from the transferring hospital?
(If no, EMTALA does not apply – reporting not required, do not answer remaining questions.)
 - b. Was the patient stabilized such that no material deterioration of the patient's condition was likely to result from or during transfer?
 - c. Was Weeks Medical Center contacted and requested to accept patient?
 - d. Did Weeks Medical Center accept patient?
(If no, report.)
 - e. Did transferring hospital send medical records available at the time of transfer?
(If no, report.)
 - f. Did transferring hospital provide medical treatment within its capacity to minimize the risks of transfer to the individual's health, or in the case of a woman in labor, the health of the unborn child?

(If no, report.)
 - g. If applicable and if this caused the need for transfer, did the transferring hospital provide the name of an on-call physician who failed or refused to appear within a reasonable time to provide stabilizing treatment?

(If no, report.)
 - h. Was the transfer affected through qualified personnel and transportation, including the use of necessary and medically appropriate life support measures and equipment during transfer?

(If no, report.)
- The investigation will be completed within a reasonable period of time (preferably within 72 hours after receiving the report of the possible violation.)
 - If, after investigation, it is determined that reporting is required, the incident should be reported to the State Health Department 1-800-852-3345 ext. 4592 within two working days (48 hours) after completion of investigation.
 - At the conclusion of the investigation, forward the results of the investigation to the Quality Improvement Committee for review and further action if necessary.

Title: EMTALA Reporting Policy

Owner: Corporate Compliance Officer

Approved by: Corporate Compliance Committee; Senior Staff 8/2016; CQI (9/26/16)

Accrediting/Lic Body: CMS

Standard/Rule #: EMTALA

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