

Policies Recommended for EMTALA Compliance

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The EMTALA statute and regulations require hospitals to adopt policies and procedures to ensure compliance with the requirements of EMTALA.

Hospital Board and Medical Staff Policies

It is recommended that the following policies be adopted by the hospital board and the medical staff as evidence of the hospital's commitment to comply with EMTALA:

- The hospital board should adopt a policy expressing its commitment to comply with the requirements of EMTALA and directing each department or service responsible for meeting the EMTALA obligations to adopt policies and procedures, in-service education and a quality management program to ensure compliance with EMTALA. A Model Hospital Policy on Compliance with EMTALA is included as *Appendix O*.
- The medical staff bylaws and rules and regulations should (i) reflect compliance with the requirements of EMTALA; (ii) establish requirements for on-call coverage for emergency services; and (iii) designate physicians and other categories of health care professionals who are authorized to perform medical screening examinations. The designations should be listed for each department that performs medical screening examinations, and include any limitations that are determined appropriate by the medical staff. *Appendix M* describes the process in California for certification of health care professionals to perform medical screening examinations.

Specific Policies and Procedures

The following types of policies should be incorporated in policies and procedures adopted by the hospital and/or, as applicable, by individual departments and services responsible for compliance with EMTALA. These policies may be adopted as stand-alone policies or combined into a series of policies. The policies should be supplemented by forms as determined appropriate by the hospital.

Medical Screening Examinations

- Triage and role of the triage nurse.
- Scope of an emergency medical screening exam.
- Standardized procedures for nonphysicians performing medical screening examinations.
- Role of a managed care plan in the screening process.
- Directing patients to a hospital-owned facility outside of the emergency department including what type of patients will be directed.

- Handling of telephone orders to the emergency department by members of the attending staff.
- Documentation of medical screening examinations.

Labor and Delivery Policies

- Performance of medical screening examinations.
- Standardized procedures for nonphysicians performing medical screening examinations.
- Documentation of medical screening examinations.
- Transfer/discharge of labor patients.
- Requirements for certifying and discharging a patient with false labor.

Psychiatric Patients

- Performance of medical screening examinations (including a psychiatric assessment).
- Transfer of psychiatric patients.
- Procedures for monitoring psychiatric patients on a custodial hold.
- Role of crisis teams or other outside personnel who may evaluate the patient, write an involuntary hold and assist in the placement of the patient in a regional psychiatric evaluation and treatment facility.

Other Dedicated Emergency Departments (On-Campus and Off-Campus)

- Performance of medical screening examinations.
- Transfer requirements.
- Requirements for hospital-based off-campus services are not routinely staffed by physicians and nurses (e.g., physical therapy center).

Hospital Property (Outside of the Dedicated Emergency Department)

- Description of hospital property.
- Description of response to emergency situations in the main facility building(s).
- Description of response to emergency situations in other facility buildings on the hospital campus.
- Description of response to emergency situations in parking lots, sidewalks and other public areas.
- Contact with 9-1-1 for emergency patient management and transport of an emergency patient.

- Documentation of emergency services provided to individual on hospital property who has a potential emergency condition.
- Documentation of refusal to accept emergency services by an individual on hospital property who has a potential emergency condition.

Off-Campus Hospital Departments (that are not Dedicated Emergency Departments)

- Appraisal of individuals who may have emergency medical conditions.
- Referrals of individuals who may have emergency medical conditions.
- Documentation of emergency services provided to individuals who present with potential emergency medical conditions.

Financial Considerations; Managed Care

- Registration process.
- Contacts with managed care plans for prior authorization.
- Resolution of disputes between the hospital and a managed care physician.
- Contacts with health plans (if required) for patient medical records.
- Collection of copayments.
- Issuance of advance beneficiary notices (ABNs).
- Discussions with emergency patients of hospital charges, insurance status and payment terms.

Transfer/Discharge of Emergency Patients

- Transfer of emergency patients with unstabilized emergency medical conditions.
- Transfer of emergency patients with stabilized emergency medical conditions.
- Patient request for a transfer.
- Requirements for physician certification for transfer.
- Transferring a patient by nonphysician qualified personnel.
- Procedures for an appropriate transfer including selection of receiving hospital, obtaining consent from receiving hospital and physician, sending medical records and selecting an appropriate mode, equipment and personnel for the transfer.
- Patient reassessment at the time of transfer or discharge.
- Transferring a patient in police custody.
- Transfer of a patient for off-site tests.
- Discharge of stable patients (follow-up instructions).
- Provider and referral agreements.

Patient Refusal of Treatment or Transfer

- Patient refusal of the medical screening examination.

- Patient refusal of further examination and treatment.
- Patient refusal of a transfer.
- Patient elopement.
- Patient departure for financial reasons.
- Patient departure for other stated reasons.

Acceptance of Patient Transfers

- Policies and procedures for accepting patient transfers from other hospitals.
- Defining hospital capacity and capability including reserved beds.

Central Logs

- Content of central logs.
- Maintenance of the central log(s).

Signage

- Location of signs.
- Content of signs.

Physician On-Call Responsibilities

- Establishment and maintenance of the on-call roster.
- Requirements for physician specialty coverage (including determination of part-time coverage when permitted by law).
- Requirements for when a physician is on-call.
- Physician on-call response time.
- Physician obligation to accept a transfer.
- Requirements for on-call physician with simultaneous coverage responsibilities.
- Requirements for on-call physicians performing elective surgery when on-call.
- Resolution of disputes between treating and on-call physicians.
- Hospital/medical staff chain of command in the event of an on-call crisis or dispute.
- Refusal or failure of an on-call physician to accept a patient or to come to the hospital.

Reporting Patient Dumping Violations

- Reporting an EMTALA violation.
- Non-retaliation policy for employees and physicians who report violations.
- Resolution of internal disputes regarding patient transfers and other EMTALA compliance concerns.

Maintenance and Retention of Emergency Records

- Retention of medical records.
- Retention of central logs.
- Retention of transfer records and other emergency records.
- Retention of on-call rosters.

Quality Improvement and Risk Management

- Quality improvement and risk management activities.
- In-service education.
- EMTALA activities conducted as part of the organization's internal compliance program activities.