



Emergency Medical Treatment & Labor Act (EMTALA) Hospital Transfers

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Presented by:

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Agenda

1. Introductions
2. COVID Impact on Transfers
3. Scenarios
4. Questions and Group Discussion

Speaker Introduction



Christopher Adelman handles a broad range of health care issues including regulatory law and compliance by providing general counsel services to hospitals and other health care entities, including: hospital-physician relationships, medical staff bylaws and governance, credentialing, peer review and related hearings, corporate organization, compliance, patient care and consent issues, risk management and liability, fraud and abuse and Stark issues, HIPAA matters, employee issues, acting as bond counsel, drafting of employment, independent contractor and vendor agreements.

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Speaker Introduction



Traci Waugh

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Traci has been immersed in the healthcare industry with an assortment of responsibilities. She started her career as the director of medical records and eagerly took on additional roles including utilization review, risk management, medical staff services, discharge planning, quality improvement, contracting, privacy, and compliance. Traci's enthusiasm as not subsided; she is always willing to help her peers and serve as a resource.

Along with her initial certification as Registered Health Information Administrator (RHIA), she obtained her Certification in Healthcare Privacy and Security (CHPS) and Certification in Healthcare Compliance (CHC).

Currently as the Director of Outreach Services and Compliance, Traci assists partner critical access hospitals with their compliance programs and provides customized compliance education to staff and board or directors. In addition, she serves as a liaison for other contracted services provided by Kalispell Regional Healthcare.



COVID Impact on Transfers

EMTALA

- In 1986, Congress enacted the Emergency Medical Treatment & Labor Act (EMTALA) to ensure public access to emergency services regardless of ability to pay.
- Section 1867 of the Social Security Act imposes specific obligations on Medicare-participating hospitals that offer emergency services to provide a medical screening examination (MSE) when a request is made for examination or treatment for an emergency medical condition (EMC), including active labor, regardless of an individual's ability to pay.
- Hospitals are then required to provide stabilizing treatment for patients with EMCs. If a hospital is unable to stabilize a patient within its capability, or if the patient requests, an appropriate transfer should be implemented.

<https://www.cms.gov/Regulations-and-Guidance/Legislation/EMTALA>

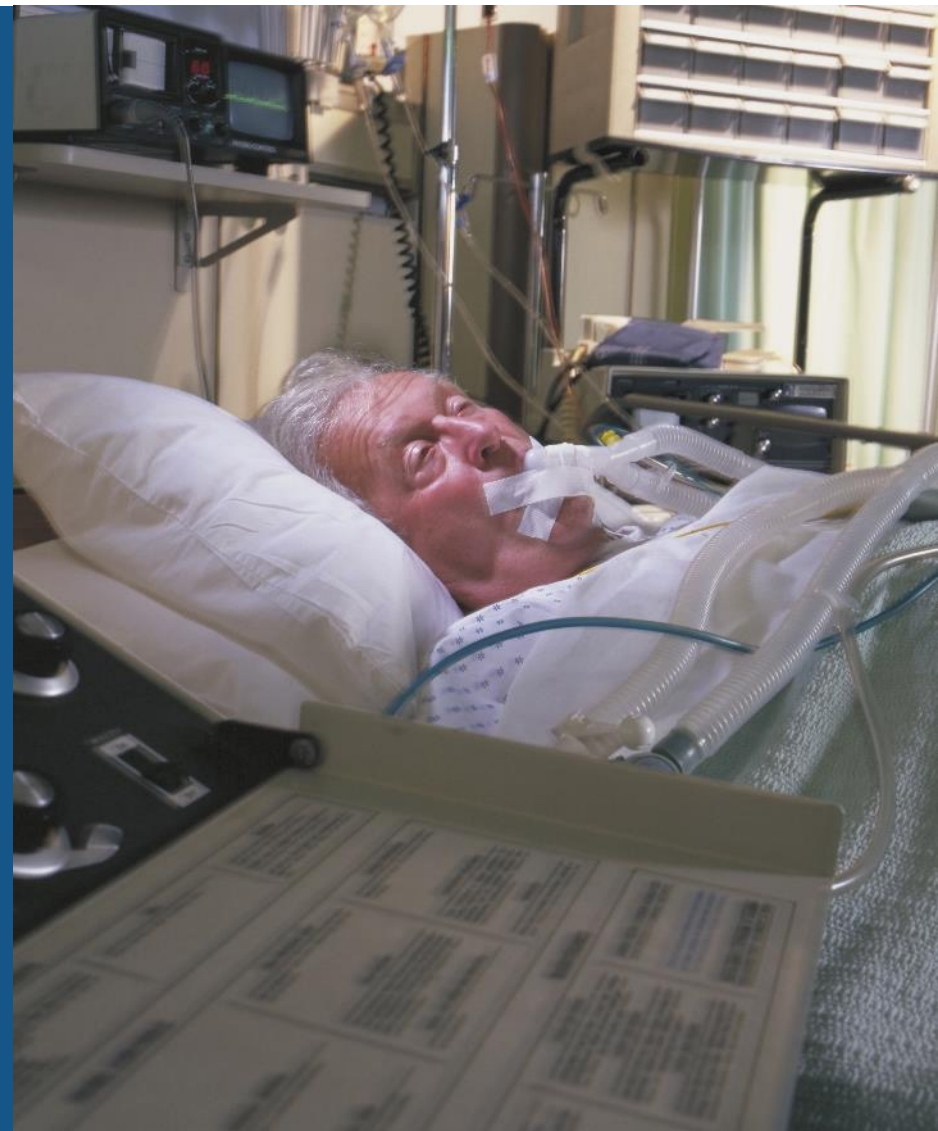


Scenarios

Scenario 1



- ED patient requires transfer to higher level of care.
- An extensive length of time is needed to find an accepting facility.
- Many receiving sites are at capacity.
- Patient reports delay in transfer as an EMTALA violation.
- DISCUSSION – Is there risk for EMTALA violation?




Scenario 2



- Patient presents to ED complaining of a possible blood clot in leg.
 - ED is very busy.
 - Hospital is at capacity.
 - Ultrasound tech on-call.
 - ED informs the patient it will be a long wait until he is seen.
 - ED suggests the patient try another hospital.
- DISCUSSION – Is there risk for EMTALA violation?



Scenario 3

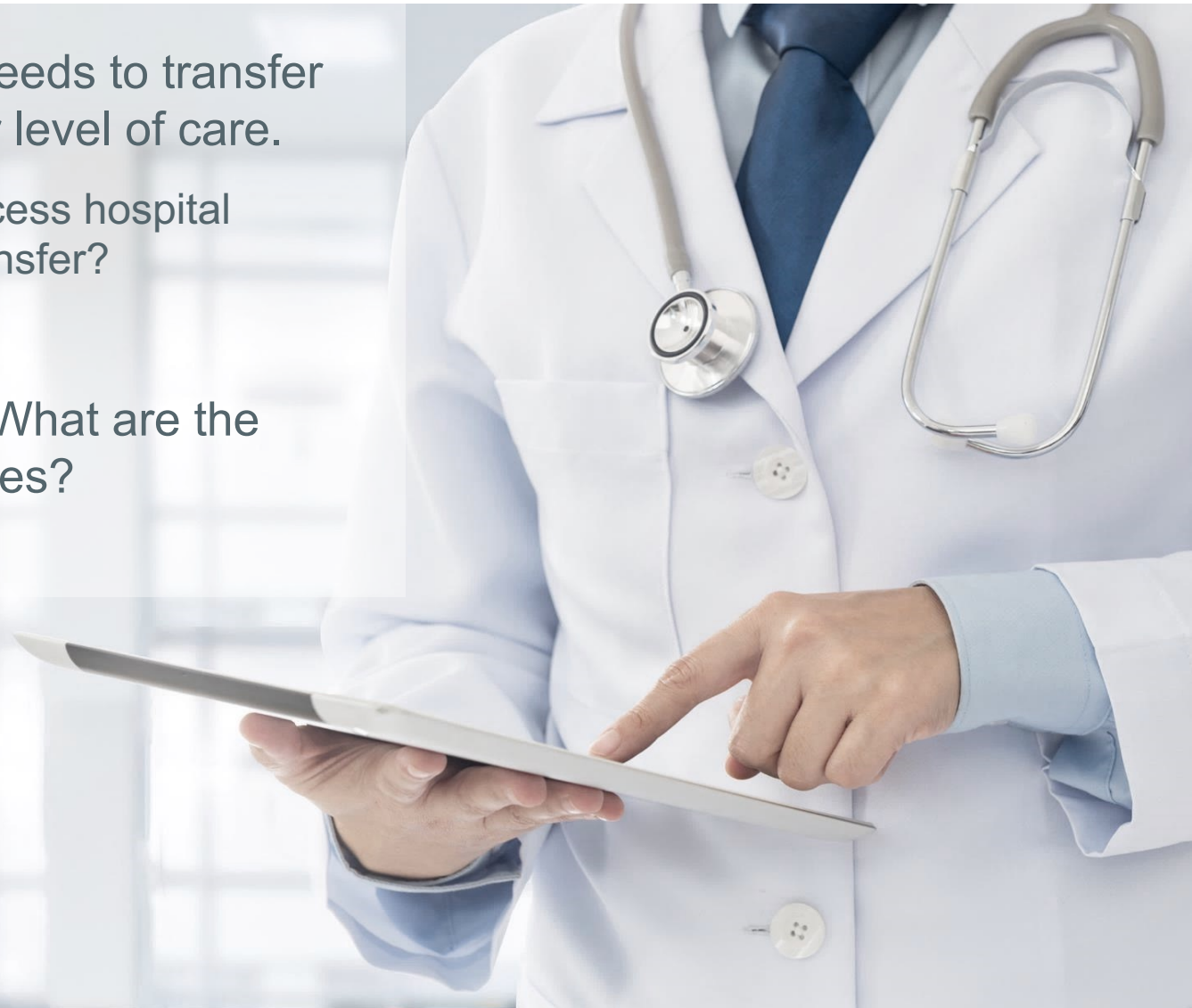
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- Alternate site set up for drive-through COVID testing.
 - The patient is swabbed.
 - The patient is told by personnel if they receive notification that they are positive for COVID, they should go to a different hospital.

- DISCUSSION –
Is there risk for EMTALA violation?

Scenario 4



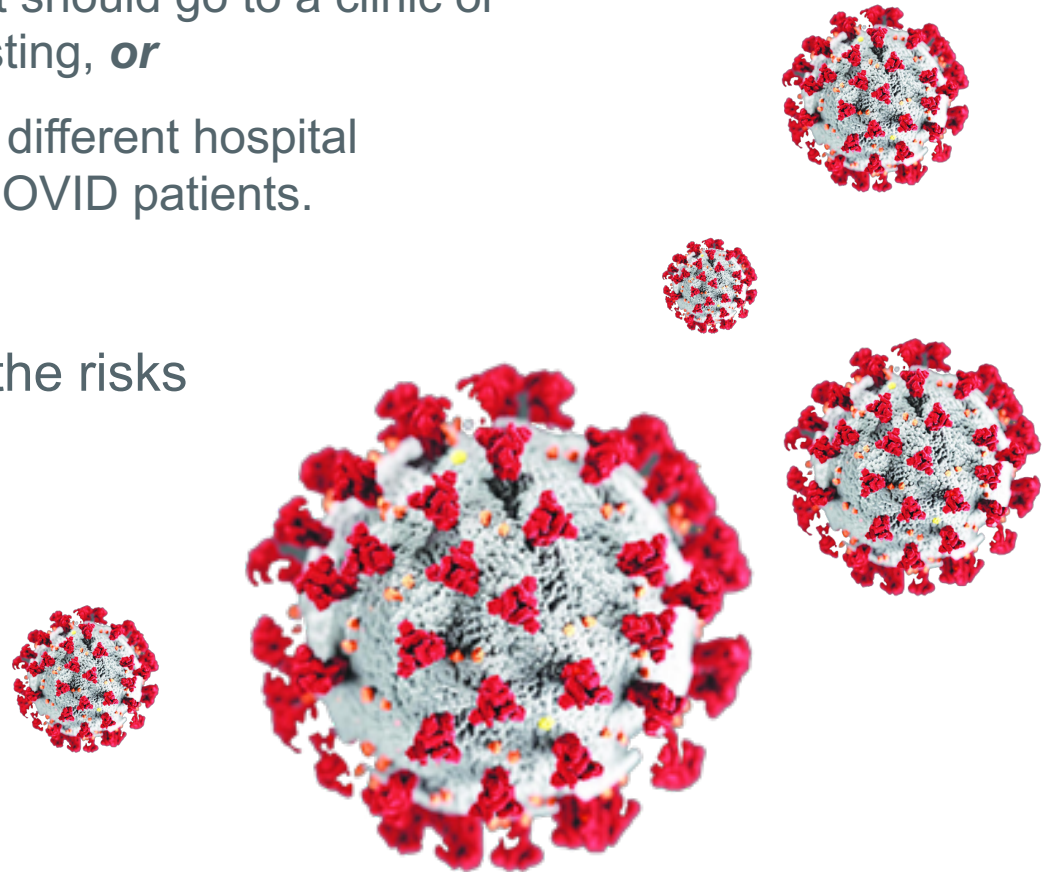
- Larger hospital needs to transfer patient to a lower level of care.
 - Can a critical access hospital (CAH) refuse transfer?
- DISCUSSION – What are the risks or alternatives?



Scenario 5



- Patient calls the ED stating he thinks he has COVID. Patient asks, “Should I come to the ED?”
 - ED recommends the patient should go to a clinic or drive through for COVID testing, *or*
 - ED recommends going to a different hospital because they do not treat COVID patients.
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- DISCUSSION – What are the risks or alternatives?





Questions and Group Discussion

Image Source: Shutterstock



Thank you!



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