



**Title:**  
**Emergency Medical Treatment and Transfer**

**Policy:**

1. It is the policy of Riverview Health to comply with all applicable laws and regulations relating to the provision of emergency services, including the Emergency Medical Treatment and Active Labor Act ("Act"). Signs specifying the rights of individuals under the Act will be posted in accordance with federal regulations. Qualified Medical Personnel will conduct screening examinations for all Persons who present to the Hospital requesting treatment, unless alternative arrangements are made pursuant to this Policy.

**2. General Requirement:**

a. In accordance with the Act, Riverview Health (the "Hospital") shall perform, Without Delay, an appropriate Medical Screening Examination to all Persons who come to the Emergency Center and request (or has a request made on the Person's behalf, or absent a request, would cause a prudent layperson observer to believe based on the Person's appearance or behavior that the Person needs) an examination or treatment for a medical condition. The purpose of the Medical Screening Examination, which may be performed by a Physician or other Qualified Medical Personnel, is to determine whether an Emergency Medical Condition exists. If an Emergency Medical Condition exists, the Hospital shall provide any necessary Stabilizing Treatment or an Appropriate Transfer unless the Person refuses such treatment or transfer. The Hospital shall also accept transfers from other hospitals if it is capable of providing the necessary treatment. Finally, the Hospital shall maintain a current list of On-Call Physicians who are on staff or have privileges at the Hospital to provide necessary treatment after the initial examination to stabilize Persons with Emergency Medical Conditions in accordance with the resources available to the Hospital.

**3. Defined Terms:**

a. The term "Medical Screening Examination" means that process used by Qualified Medical Personnel to determine, with reasonable clinical confidence, whether an Emergency Medical Condition exists. Consistent with medical necessity and the particular practitioner's licensure and training, such Medical Screening Examination shall be conducted using those resources routinely available to the Emergency Center.

i. At a minimum, an appropriate Medical Screening Examination shall include, but not be limited to, the following:

(1) Vital signs (e.g., blood pressure, pulse, respiratory rate and temperature);

- (2) Sensorium evaluation;
  - (3) Medical history, including history of presenting problem;
  - (4) Focused physical examination; and
  - (5) Utilization of appropriate diagnostic resources as directed by a Physician or a Consulting Physician.
- b. The term "Emergency Medical Condition" means a medical condition manifested by acute symptoms or pain of sufficient severity; or with respect to a pregnant woman having contractions, a circumstance where there is inadequate time to effect a safe transfer to another hospital before delivery or where the transfer may pose a threat to the health or safety of the woman or unborn child; such that the absence of medical attention could reasonably be expected to:
- i. Place the health of the Person (or woman and unborn child) in serious jeopardy;
  - ii. Cause serious impairment to bodily functions; or
  - iii. Cause serious dysfunction of any bodily organ or part.
- c. The term "Labor" means the process of childbirth beginning with the latent or early phase of labor and continuing through the delivery of the placenta. A woman experiencing contractions is in true labor unless a Physician, certified nurse-midwife, or other Qualified Medical Personnel acting within his or her scope of practice as defined in the Hospital Medical Staff Bylaws and State law, certifies that, after a reasonable time of observation, the woman is in false labor.
- d. The term "Without Delay" means no delay in providing an appropriate Medical Screening Examination or initiating the further Stabilizing Treatment that may be required to stabilize a Person's Emergency Medical Condition, except:
- i. The Qualified Medical Personnel may contact the Person's physician at any time to seek advice regarding medical history and relevant needs so long as the consult does not inappropriately delay services; and
  - ii. The Hospital may follow reasonable registration and / or triage processes for individuals, including asking whether a Person is insured and if so, what that insurance is, so long as the inquiry does not delay screening or treatment or unduly discourage Persons from remaining for further evaluation.
- e. The term "Person" applies to any individual who comes to the Hospital's Emergency Center in need of an examination or treatment for a medical condition. Note that neither the term "Person" nor the Act applies to any individual who:
- i. Undergoes a Medical Screening Examination and is found not to have an Emergency Medical Condition;
  - ii. Is admitted to the Hospital as an inpatient for elective diagnosis or treatment;
  - iii. Receives outpatient services at an off-campus location that does not routinely provide emergency services; or
  - iv. Receives scheduled services on the Hospital's main campus for non-emergency purposes even if the individual experiences a medical emergency while at the Hospital.
  - v. The term "Emergency Center" means:

- (1) Riverview Health's Emergency Center, Labor and Delivery Department, and Urgent Care;
  - (2) Any other Riverview Health department or facility, regardless of location, that is either:
    - (a) Licensed by the State of Indiana as an emergency room or emergency department under applicable laws;
    - (b) Held out to the public (name, posted signs, ads, other means) as a place that provides care for an emergency medical condition on an urgent basis without requiring a previously scheduled appointment; or
    - (c) Based on a representative sample of visits during the prior calendar year, conducted at least one-third of all outpatient visits to treat an Emergency Medical Condition on an urgent basis without requiring a previously scheduled appointment;
  - (3) The Riverview Health property which includes the Hospital's main campus, parking lots, sidewalks and driveways;
  - (4) Any physician offices, clinics, skilled nursing facilities or other entities that bill for services under the Hospital's name and provider number.
    - (a) Riverview Health employed physician offices and the Transitional Care Unit are not applicable to this Policy.
  - (5) Any ground or air ambulance owned and operated by Riverview Health except in certain limited circumstances. (It should be noted that Riverview Health does not own any air or ground ambulances so this does not apply.)
  - (6) Any ground or air ambulance not owned and operated by Riverview Health, but that is on Hospital property for presentation of a Person for examination and treatment for a medical condition at the Hospital's Emergency Center.
- vi. Note that neither the term "Emergency Center" nor the Act applies to any other areas or structures of the Hospital's main building that are not a part of the Hospital, such as restaurants, gift shops and other non-medical facilities, or any physician offices, health clinics, skilled nursing facilities or other entities that bill for services separate and apart from the Hospital under a different provider number.
- f. The term "Physician" means those duly qualified physicians who, as a member in good standing of the Hospital's active medical staff with clinical privileges, shall be permitted to perform, among other things, medical screening examinations and stabilizing treatment in the Emergency Center.
- g. The term "Qualified Medical Personnel" means those duly qualified physicians, nurse practitioners, physician assistants, or adult trained sexual assault nurse examiners ("SANE nurses"), who are employed or otherwise engaged by Riverview Health to perform, among other things, Medical Screening Examinations and Stabilizing Treatment and are acting within their professional scope of practice in the Emergency Center.

- h. The term "Consulting Physician" means those duly qualified physicians who, as a member in good standing of Riverview Health's medical staff with clinical privileges, are not scheduled for emergency call but consults with the Emergency Center in assessing a Person's condition.
- i. The term "On-Call Physicians" means those duly qualified physicians who, as a member in good standing of the Hospital's active medical staff with clinical privileges, shall be scheduled to be on-call and to appear in the Emergency Center, within a reasonable period of time, to provide the treatment necessary to stabilize a Person with an Emergency Medical Condition.
- j. The term "Stabilizing Treatment" means treatment provided either within the capabilities of the Hospital's available staff and facilities in order to stabilize an Emergency Medical Condition, or alternatively, to result in an Appropriate Transfer to another medical facility.
- k. The term "Appropriate Transfer" is the transfer of a Person to another hospital, prior to the Person's Emergency Medical Condition being stabilized:
  - i. Because either:
    - (1) The Person (or the Person's representative), after being informed of the risks and the Hospital's obligations, requests a transfer; or
    - (2) The Physician signs and certifies that the medical benefits of the Person's transfer outweigh the increased risks to the Person from the transfer. If a Physician is not present in the Emergency Center at the time the Person is transferred, a Qualified Medical Person may sign a certification that the medical benefits of the Person's transfer outweigh the increased risks to the Person from the transfer after a Consulting Physician agrees with the certification and subsequently countersigns the certification; and
  - ii. In accordance with the following four (4) requirements:
    - (1) The Hospital provides medical treatment to the Person within its capabilities and capacity to minimize the risks of transfer;
    - (2) The receiving hospital has available space and qualified personnel for the treatment of the Person; and agreed to accept transfer of the Person and to provide appropriate medical treatment;
    - (3) The Hospital sends to the receiving hospital:
      - (a) All Hospital records related to the Person's Emergency Medical Condition;
      - (b) The documentation to confirm the request or certification under (3)(k)(i) or (ii) of this Policy (Authorization for Transfer form);
      - (c) The name and address of any On-Call Physician(s) who refused or failed to appear within a reasonable period of time to provide the treatment necessary to stabilize an Emergency Medical Condition; and
    - (4) Arrange for the transfer to be conducted by qualified personnel using the necessary and medically appropriate transportation equipment and life support required during the transfer.

#### 4. Procedure

- a. Persons Seeking Examination and Treatment
  - i. Any Person who comes to the Emergency Center, as defined herein, and requests (or has a request made on the Person's behalf, or absent a request, would cause a prudent layperson observer to believe, based on the Person's appearance or behavior, that the Person needs) an examination or treatment for a medical condition shall be provided with a Medical Screening Examination to determine whether that Person is experiencing an Emergency Medical Condition.
    - (1) A Medical Screening Examination and Stabilizing Treatment of an Emergency Medical Condition shall not be unreasonably delayed in order to inquire about the Person's method of payment or insurance status or denied on account of the Person's inability to pay. All Persons who have an Emergency Medical Condition must be serviced, regardless of the answers the Person may give to the insurance questions asked during the registration process.
    - (2) The Hospital will not delay Emergency Medical Treatment to any Person while it obtains the information required.
    - (3) The Hospital may continue to follow reasonable registration processes for Persons presenting with an Emergency Medical Condition, including but not limited to requesting information about insurance as long as these procedures do not delay a Medical Screening Examination or Stabilizing Treatment.
  - ii. If a Person presents to the Emergency Center with an obvious life-threatening Emergency Medical Condition (e.g., person arrives by ambulance in cardiac arrest), the Medical Screening Examination and necessary Stabilizing Treatment will begin immediately. The registrar may obtain the information required for registration from a source other than the Person (e.g., next of kin). Otherwise, this financial information should be obtained after the Person has received a Medical Screening Examination and necessary Stabilizing Treatment. The Person may be informed of his/her potential financial liability thereafter.
  - iii. All Persons shall be examined by a Physician or other Qualified Medical Personnel pursuant to Riverview Health policy.
  - iv. The Medical Screening Examination shall include those ancillary services routinely available to, although not actually located in, the Emergency Center.
  - v. If an individual is determined not to have an Emergency Medical Condition, the Act and this policy no longer applies and the Hospital's obligations under the Act terminate.
    - (1) In such cases, the individual may choose to wait in the Emergency Center so that a Physician may perform any subsequent evaluation or treatment, if appropriate, or the individual may seek the services of his or her private physician (or the private physician's on-call coverage) and the physician will be called to provide any such evaluation or treatment.

- b. Persons Seeking Initial Examination and Treatment by Private Physician
  - i. Persons who are sent to the Hospital to be examined by the Person's particular private physician (or on-call coverage) will have these requests honored, subject to the discretion of the Physician in charge of the Emergency Center at the time, provided that both the order and the manner in which the order is communicated are appropriate. Upon the Person's arrival at the Hospital, the Person shall undergo a Medical Screening Examination and the private physician (or on-call coverage) will be contacted.
    - (1) Neither the Act, nor this Policy, applies to any individual who is found not to have an Emergency Medical Condition and in such cases, the individual will be registered as usual and the private physician (or on-call coverage) should plan to see the individual in the Emergency Center within an hour of this contact.
    - (2) The Act and this policy apply to any Person found to have an Emergency Medical Condition and in such cases, the Person shall receive the necessary Stabilizing Treatment and the On-Call Physician shall be contacted in accordance with this Policy.
- c. Medical Screening Examination
  - i. The Medical Screening Examination is a process that begins with the Person's arrival in the Emergency Center and ends with a determination whether the Person has an Emergency Medical Condition.
  - ii. A Medical Screening Examination may be performed by a Physician or in a Physician's absence by Qualified Medical Personnel, in accordance with Riverview Health policy and any applicable treatment protocols adopted by the Medical Staff.
  - iii. Any such Medical Screening Examination shall include use, consistent with medical necessity and the particular practitioner's licensure and training, of those Hospital resources and ancillary services routinely available to the Emergency Center.
  - iv. Qualified Medical Personnel shall consult with a Physician or Consulting Physician before ordering a Person to be admitted to the Hospital, transferred to another hospital, or discharged home. In all such cases, the Physician or Consulting Physician, as appropriate, shall sign all Qualified Medical Personnel orders within twenty-four (24) hours of the time of the order.
- d. Consultations
  - i. All consultations initiated by a Physician, Qualified Medical Personnel, On-Call Physician, as appropriate, or by a Person who requests the involvement of his private physician (assuming the physician is a member in good standing of the Hospital's active medical staff with clinical privileges to perform, among other things, Medical Screening Examinations and Stabilizing Treatment in the Emergency Center) shall be conducted in accordance with Riverview Health policy and Medical Staff Rules and Regulations.

- ii. At no time shall a requested consultation interfere with or otherwise delay the performance of a Medical Screening Examination or Stabilizing Treatment as determined by the Physician or Qualified Medical Personnel, as appropriate.
- e. On-Call Physicians
  - i. The Emergency Center will maintain a list of designated On-Call Physicians for the following specialties, including but not limited to: Cardiology, Pediatrics, Orthopedics, Otolaryngology, Primary Care, Pulmonology, Radiology, and Surgery. The purpose of the list is to identify and schedule certain physician specialists to be on-call and available to come to the Emergency Center, upon request, to provide further evaluation and treatment of a Person in need of the Physician's particular skills and expertise.
  - ii. On-Call Physicians are permitted to schedule simultaneous on-call duties at other health care facilities during the time period that they are scheduled to be on-call for the Emergency Center.
  - iii. On-Call Physicians are permitted to schedule simultaneous elective procedures and office visits during the time period that they are scheduled to be on-call for the Emergency Center.
  - iv. Any On-Call Physician who is contacted and asked to come to the Emergency Center to see a Person with an Emergency Medical Condition shall confirm his or her intent to arrive at the Emergency Center within 30 minutes following the call.
  - v. Failure by an On-Call Physician to come to the Emergency Center within the specified 30-minute period shall be reported to the appropriate department chairperson for review. In such cases, the Emergency Center shall arrange to contact another Physician within the particular specialty to provide consultation or to come to the Emergency Center to provide further evaluation and treatment to a Person. The Chain of Command for Management of Patient Care Policy shall be implemented as needed.
  - vi. Riverview Health may formulate and participate in a formal community call plan where any one of a number of individual hospitals within a geographic region may be designated as the on-call facility for a specific time period, or alternatively, for a specific service, or both. The hospital designated as the on-call hospital is still under an obligation to provide a Medical Screening Examination and Stabilizing Treatment to the extent it is within its capability, and all hospitals participating in this formal community call plan must abide by the regulations governing Appropriate Transfers.
- f. Emergency Medical Condition - Stabilizing Treatment or Appropriate Transfer
  - i. Any Person determined to have an Emergency Medical Condition must receive Stabilizing Treatment in the Emergency Center prior to transfer or discharge or an Appropriate Transfer to another facility in accordance with this Policy and the Act.
  - ii. If a Person (or the Person's legal representative) refuses Stabilizing Treatment, the Physician must:
    - (1) Inform the Person of the risks and benefits to the Person of the Stabilizing Treatment;

- (2) Document the risks and benefits of the Stabilizing Treatment, description of the Stabilizing Treatment refused, and reasons for the refusal; and
  - (3) Attempt to obtain the signature of the Person (or the Person's legal representative) on the "Authorization for Transfer" form. If the Physician is unable to obtain the signature of the Person, the Physician shall document the steps taken to try to secure the written refusal.
    - (a) If a Physician is not present in the Emergency Center at the time of the refusal, a Qualified Medical Personnel (after consulting with the Consulting Physician) may carry out steps (1) – (3), directly above. The Consulting Physician shall subsequently countersign all Qualified Medical Personnel entries on the "Authorization for Transfer" form and in the Person's record.
- iii. If a Person (or the Person's legal representative) refuses an Appropriate Transfer, the Physician must:
- (1) Inform the Person of the risks and benefits to the Person of the Appropriate Transfer;
  - (2) Document the proposed transfer, that the Person was informed of the risks and benefits of the transfer, and the reasons for the refusal on the "Authorization for Transfer" form; and
  - (3) Attempt to obtain the signature of the Person (or the Person's legal representative) signifying the informed refusal on the "Authorization for Transfer" form. If the Person or Person's legal representative refuses to indicate his or her informed refusal by signing the "Authorization for Transfer" form, the Hospital must document such refusal on the "Authorization for Transfer" form.
- g. Arranging For an Appropriate Transfer
- i. If a Person has an Emergency Medical Condition that has not been stabilized, the Hospital may not transfer the Person unless the transfer is an Appropriate Transfer.
  - ii. Prior to arranging for an Appropriate Transfer, the Emergency Center shall provide the Medical Screening Examination and Stabilizing Treatment within its capabilities and capacity in order to minimize the risks to the Person during the transfer.
  - iii. The Physician and Hospital personnel shall also confirm that the receiving facility has available space and qualified personnel to treat the Person and has agreed to accept the transfer and documented the time, date, person contacted, title, and acceptance of transfer all of which shall be documented on the "Authorization for Transfer" form.
  - iv. The Physician and Hospital personnel shall complete all necessary arrangements before the Person is transferred to the receiving hospital, including both physician-to-physician and nurse-to-nurse contact, all of which shall be documented on the "Authorization for Transfer" form.
  - v. If the Person remains unstable with an Emergency Medical Condition, the receiving Hospital with the relevant specialized capabilities continues to have



- an obligation under the Act to accept the Person if the transfer is medically appropriate and the receiving hospital has the necessary capabilities.
- vi. Hospital personnel shall arrange to send all records related to the Person's Emergency Medical Condition, including but not limited to all Emergency Center records, observations of signs or symptoms, preliminary diagnosis, results of diagnostic studies or telephone reports of the studies, treatment provided, results of any tests, the informed written consent of the Person (or the Person's legal representative) or the Certification by the Physician or Qualified Medical Personnel, the completed "Authorization for Transfer" form, and the name and address of any On-Call Physician who has refused or failed to appear in the Emergency Center within the specified 30 minute period to provide Stabilizing Treatment.
    - (1) Pending test results or other records not readily available at the time of transfer will be forwarded to the receiving facility as soon as practicable.
  - h. Decisions to Accept or Reject Transfer from another Hospital
    - i. Any Physician who wishes to accept a transfer to the Emergency Center or Hospital from another physician or hospital must first contact the Admitting / Registration Department which, in turn, will contact the appropriate department or house supervisor who shall evaluate bed and staffing availability.
    - ii. The department or house supervisor is required to notify the Physician whether the Hospital can accept the transfer and document the decision/communication in the Emergency Center log.
    - iii. The Physician shall contact the referring physician or hospital and confirm the Hospital's decision to accept or decline the transfer and document the communication in the Emergency Center log.
    - iv. A hospital is required to report to Centers for Medicare & Medicaid Services (CMS) or the Indiana State Department of Health when it suspects it may have received an improperly transferred Person. Notification should occur within 72 hours of the occurrence. Failure to report improper transfers may subject the receiving hospital to termination of CMS provider agreement.
  - i. EMTALA Waiver
    - i. During a public health emergency, hospitals may apply for a CMS waiver of EMTALA sanctions ("Waiver"). The Waiver can provide exceptions to penalties for the otherwise impermissible redirection or relocation of Persons for a Medical Screening Examination and for inappropriate transfers during a public health emergency.
    - ii. A Waiver may be issued only when:
      - (1) The President of the United States has declared an emergency or disaster, the Secretary has declared a public health emergency, and the Secretary has exercised his/her waiver authority; and
      - (2) The State has activated an emergency preparedness plan or pandemic preparedness plan in the area where the Hospital is located; and
      - (3) The Hospital has activated the Emergency Operations Plan (disaster plan).

- iii. The Hospital must request the Waiver electronically by contacting the CMS Regional Office address designated for Indiana ([ROCHISC@cms.hhs.gov](mailto:ROCHISC@cms.hhs.gov)).
- iv. The Hospital must notify the Indiana State Department of Health when activating the disaster plan and implementing a Waiver.
- v. It should be noted that, even in a Waiver situation, EMTALA requires Medical Screening Evaluation for all Persons who come to the Hospital Emergency Center regardless of the Person's ability to pay, even if that Medical Screening Evaluation occurs at a location other than the Hospital's campus.
- vi. A Waiver is limited to a 72-hour period beginning upon the implementation of a hospital disaster plan, unless a public health emergency involves a pandemic. For pandemic situations involving an infectious disease, the Waiver will continue in effect until the declaration of a public health emergency has been terminated.