

EMERGENCY MEDICAL TREATMENT AND ACTIVE LABOR ACT (EMTALA)

Source: American College of Emergency Physicians http://www.acep.org/News-Media-top-banner/EMTALA/

What is EMTALA?

EMTALA is a federal law that requires anyone coming to a hospital emergency department to be assessed, stabilized and treated, whether or not they can pay for that care. EMTALA was enacted by Congress in 1986 as part of the Consolidated Omnibus Budget Reconciliation Act (COBRA) of 1985 (42 U.S.C. §1395dd). Any hospital that takes Medicare is required to comply with EMTALA.

What does EMTALA require?

Hospitals have three main requirements under EMTALA:

- Any individual presenting at the emergency department and requesting care must receive a medical screening examination to determine whether an emergency medical condition exists. Examination and treatment cannot be delayed to inquire about methods of payment or insurance coverage. Emergency departments also must post signs that notify patients and visitors of their rights to a medical screening examination and treatment.
- 2. If an emergency medical condition exists, treatment must be provided until the emergency medical condition is resolved or stabilized. If the hospital does not have the capability to treat the emergency medical condition, an "appropriate" transfer of the patient to another hospital must be done in accordance with the EMTALA provisions.
- 3. Hospitals with specialized capabilities are obligated to accept transfers from hospitals who lack the capability to treat unstable emergency medical conditions.

Scope of EMTALA:

EMTALA applies to hospital emergency departments. It does not apply to other outpatient settings, like primary care or specialty clinics. It also does not apply to inpatient care. The hospital's EMTALA obligation ends when the patient is stabilized or admitted as an inpatient.