What would you do if a CMS surveyor walked into your hospital today to investigate an EMTALA complaint? Did you know that the EMTALA penalties have more than doubled in 2017? When are you required to report a potential EMTALA violation? CMS issued a recent deficiency memo showing that more than 2,600 hospitals received deficiencies for failure to comply with the federal EMTALA law. Most hospitals were unprepared. This makes it the most frequent area of noncompliance. Common deficiencies will be discussed.

Every hospital that has an emergency department and accepts Medicare and Medicaid patients must follow the federal law and the Center for Medicare and Medicaid Services (CMS) Conditions of Participation Interpretive Guidelines on the Emergency Medical Treatment and Labor Act (EMTALA). Hospitals without emergency departments must comply with EMTALA if they have specialized capabilities. EMTALA can also impact obstetrical and behavioral health patients.

The speaker will discuss the proposed changes by the Office of Inspector General (OIG) including impacts for on-call physicians. The final rule is expected to be out in 2017. You will learn about the Quality Improvement Organization process changes and recent CMS memos including three memos on Ebola and EMTALA.

The regulations and interpretive guidelines will be reviewed and discussed, including all 12 sections and an expanded section for on-call physicians. The shared and community care plan process will be outlined. Participants will learn how to ensure their policies, procedures and training is EMTALA compliant. You will learn why hospital personnel must know how to do a medical screening exam, how to stabilize a patient and what constitutes an emergency medical condition.

There will be a lively discussion of the EMTALA case, Moses v. Providence Hospital and Medical Centers, Inc., No. 07-2111 (6th Cir. April 2009), resulting in an enormous expansion of hospital and practitioner liability under federal law. This case illustrates the importance of understanding the role that case law has on the outcome of EMTALA litigation.

Failure to comply and follow the federal EMTALA for all hospitals, including critical access hospitals, could result in loss of Medicare and Medicaid payments. Money fines can be assessed against hospitals and physicians who negligently violate the EMTALA law.

The federal EMTALA law and the accompanying regulations are complex. This program is structured to make the requirements understandable with the liberal use of examples.
PROGRAM OBJECTIVES:
Upon completion of this program, participants will be able to:

- Describe why and how the hospitals must maintain a central log;
- Discuss the hospital's requirement to maintain a list of the specific names of physicians who are on call to evaluate emergency department patients;
- Recall that CMS has requirements on what must be in the EMTALA sign;
- Identify the most frequently cited deficiency for hospitals;
- Describe the hospital's requirements regarding a minor who is brought to the ED by the babysitter for a medical screening exam; and
- Discuss when the hospitals must complete a certification of false labor.

AGENDA:
- 8:00 a.m. - 8:30 a.m.  Registration
- 8:30 a.m. - 8:45 a.m.  Welcome/Introductions/Review Agenda
- 8:45 a.m. - 10:00 a.m.  EMTALA Part 1
- 10:00 a.m. - 10:15 a.m.  Break
- 10:15 a.m. - 11:30 a.m.  Continue EMTALA Part 1
- 11:30 a.m. - 12:15 p.m.  Lunch (Provided)
- 12:15 p.m. - 2:15 p.m.  EMTALA Part 2
- 2:15 p.m. - 2:30 p.m.  Break
- 2:30 p.m. - 4:00 p.m.  Continue EMTALA Part 2
- 4:00 p.m. – 4:30 p.m.  Questions & Answers

MEET YOUR FACULTY:
Sue Dill Calloway, President, Patient Safety and Health Care Education and Consulting
Sue has been a nurse attorney and consultant for more than 30 years. Currently, she is president of Patient Safety and Healthcare Education and Consulting and was previously the chief learning officer for the Emergency Medicine Patient Safety Foundation. She has conducted many educational programs for nurses, physicians and other healthcare providers. She has authored over 100 books and numerous articles. She is a frequent speaker and is well known across the country in the area of healthcare law, risk management and patient safety.
REGISTRATION
Registrations may be sent via fax to (225) 923-1004. VISA, Master Card, Discover or American Express are accepted. All information is handled through a confidential fax and blotted out before it is forwarded to the registrar. Email confirmations will be sent to all registrants who list an accurate email address.

CANCELLATION POLICY
Cancellations received in writing up to one week prior to a scheduled event will be charged a cancellation fee of $40 (per person, per event). Cancellations received less than one week prior to the scheduled event, or individuals who fail to attend, are non-refundable. Registrants who are unable to attend an LHA educational event are permitted to, and encouraged to send a substitute without incurring a cancellation fee. Please send written notice of any substitutions prior to the scheduled event.

TRANSFER POLICY
If you are unable to attend the program for which you have registered and choose not to send a substitute, you may transfer your registration to another program. The LHA will hold your credit for a period of one year following the start date of the program for which you were originally registered. Transfers must be made in writing prior to the scheduled event, and a $40 transfer fee will be charged.

AMERICANS WITH DISABILITIES ACT
The LHA will make every effort to provide reasonable accommodations for physically-challenged attendees who require special services. When registering, please attach a written description of needs to the application.