EMTALA Signage Requirements

Since 1990, the federal Emergency Medical Treatment and Active Labor Act (EMTALA) and its implementing regulations (42 C.F.R. 489.20(q)) have required hospitals to post a sign, in a form specified by the U.S. Dept. of Health and Human Services, outlining the rights of individuals with respect to examination and treatment for emergency medical conditions and women in labor. In 2003, the Centers for Medicare & Medicaid Services (CMS) issued a final rule clarifying EMTALA requirements. In 2004, CMS released revised interpretive guidelines to its surveyors.

General EMTALA Signage Requirement

Under the 2004 revised guidelines, EMTALA signs must:

- Specify the rights of individuals with emergency conditions and women in labor who come to the emergency department for healthcare services;
- Indicate whether the facility participates in the Medicaid program;
- Contain wording that is clear and in simple terms and in language(s) that are understandable by the population served by the hospital; and
- Be posted in a place or places likely to be noticed by all individuals entering the emergency department, as well as those individuals waiting for examination and treatment (e.g., entrance, admitting area, waiting room, treatment area).

CMS initially required that signs be readable at a distance of 20 feet or the expected vantage point of the emergency department patron, however this requirement is not contained in the 2004 interpretive guidelines. Of course, the signs should still be readily visible in order to be noticed by all individuals.

Signage Requirements Outside the Emergency Department

The 2004 interpretive guidelines further clarified the meaning of “dedicated emergency department.” A dedicated emergency department is defined as meeting one of the following criteria regardless of whether it is located on or off the main hospital campus. The entity:

- Is licensed by the State as an emergency room or emergency department;
• Is held out to the public (by name, posted signs, advertising or other means) as a place that provides care for emergency medical conditions (EMCs) on an urgent basis without requiring a previously scheduled appointment; or
• Provides at least one-third of all of its visits for the treatment of EMCs on an urgent basis without requiring a previously scheduled appointment. The guidelines further state that this includes individuals who may present as unscheduled ambulatory patients to units (such as labor and delivery or psychiatric units of hospitals) where patients are routinely evaluated and treated for emergency medical conditions.

Thus, outpatient departments where patients may seek care for an EMC, including off-campus locations (e.g., urgent care centers), are subject to the EMTALA signage requirement described above.

In the past, the Chicago Regional Office of CMS identified the lack of proper signage as one of the most common EMTALA violations by Illinois hospitals. Given the potential penalties associated with a violation, hospitals may want to take a conservative approach and post signs in several departments in addition to the emergency department. Such an approach will help demonstrate the hospital’s good faith efforts to comply with the law, in the event it is investigated for a more serious EMTALA violation.

EMTALA Signs No Longer Available From IHA

To assist hospitals in complying with the EMTALA signage requirement, IHA is pleased to offer English and Spanish language requirements for EMTALA signs.