

	Policy: Page: 1 of 2 EMERGENCY DEPARTMENT REGISTRATION PROCESSING
	Date Implemented: 8/23/05
Approved by: Policy and Procedure Committee Medical Executive Committee Management Committee	Area: EMERGENCY DEPARTMENT
	Reviewed: 6/19/08; 10/29/13; 08/22/17; 04/24/19; 02/04/20; 02/22/22 Revised: 3/1/11; 02/24/15; 01/18/24; 01/27/26

PURPOSE:

To have an established process that complies with Emergency Medical Treatment and Active Labor Act (EMTALA) regulations for processing patients who present to the Emergency Department (ED) for emergency care, treatment or services.

POLICY:

1. To offer emergency medical treatment regardless of a patient's ability to pay or insurance status.
2. To prohibit any delay of emergency medical treatment in order to obtain information about the patient's method of payment or insurance status.
3. To prohibit use of prior authorizations before completing the medical screening examination and beginning any necessary stabilizing treatment.
4. To prohibit use of any financial responsibility forms, such as Advance Beneficiary Notices (ABNs), before the medical screening examination and the beginning of any necessary stabilizing treatment.

SCOPE:

Emergency Department (ED) Personnel

RESPONSIBILITY:

Chief Nursing Officer, Director of Acute Care/ER/Respiratory

PROCEDURE:

Processing Registrations Effectively and in Compliance with EMTALA.

This procedure identifies responsible parties and defines suggested actions to ensure EMTALA compliance during registration for patients with emergency medical conditions.

Step 1: Comply with EMTALA During Registration

Registration Personnel:

As circumstances permit, collect the following types of registration information from the patient with a potential information medical condition or from a person accompanying the patient:

1. Identify information, such as name and address;
2. Physician information, such as the name of the patient's regular physician; and
3. Demographic information, such as age.

Do not ask questions about the patient's ability to pay or insurance until the patient has received a medical screening examination and is receiving any necessary stabilizing treatment.