

Section 9	Clinical Policies	03/22/91 - Originated
Subject 9.1	Admissions, Transfers, and Discharges	08/14/14 - Reviewed w changes - Reviewed w/o changes
Policy 9.1.16	Admission of Interfacility Transfer Patients	Patient Placement - Author

Admission of Interfacility Transfer Patients

Definitions

Emergency Medical Condition means –

- (A) a medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain, psychiatric disturbances and/or symptoms of substance abuse) such that the absence of immediate medical attention could reasonably be expected to result in:
- (i) placing the health of the individual (or, with respect to a pregnant woman, the health of the woman or her unborn child) in serious jeopardy,
 - (ii) serious impairment to bodily functions, or
 - (iii) serious dysfunction of any bodily organ or part; or
- (B) with respect to a pregnant woman who is having contractions—
- (i) that there is inadequate time to effect a safe transfer to another hospital before delivery, or
 - (ii) that transfer may pose a threat to the health or safety of the woman or the unborn child.

Policy

In accordance with the requirements of the Emergency Medical Treatment and Active Labor Act (EMTALA), the University of Texas Medical Branch (UTMB) is committed to accepting patients with emergency medical conditions from other facilities when UTMB has capacity, its medical services are available and the transferring facility represents it cannot provide the medical services required by the patient.

UTMB accepts interfacility patient transfers for patients with emergency medical conditions. All interfacility patient transfers for patients with emergency medical conditions are arranged through the Patient Placement Center (PPC) or Bed Coordinator (Angleton Danbury Campus) and must have a bed assignment prior to transfer to UTMB.

UTMB respects the diverse cultural needs, preferences, and expectations of the patients and families it serves to the extent reasonably possible while appropriately managing available resources and without compromising the quality of health care delivered.

Guidelines

An interfacility transfer of a patient with an emergency medical condition may not be denied based on ability to pay. All such transfers will be

monitored by the BIC for compliance with this policy with deviations reported monthly to the Chief Medical Officer and the applicable chair and chief.

The memorandum of transfer (MOT) from the transferring facility and appropriate documentation must accompany all patients. The receiving physician and the hospital administrator/designee must sign and complete the section of the transferring facility's memorandum of transfer (MOT) and it shall be filed in the UTMB medical record.

Patients previously accepted by UTMB physicians for direct admission will not be denied admission by the Emergency Department (ED). The ED may render care to patients if their medical condition deteriorates or becomes unstable while en route to UTMB.

Guidelines, continued

When the PPC receives a call from a facility requesting the transfer of a patient with an emergency medical condition in an Emergency Room, the BIC, in conjunction with the Clinical Operations Administrator (COA)/House Supervisor, will determine capacity at UTMB. If capacity is available, the PPC will contact the UTMB physician assigned to the call coverage and connect the UTMB physician with the transferring facility physician to discuss patient care issues. Once the clinical discussion has taken place, the PPC will secure a bed assignment and will provide to the referring facility the administrative approval and bed assignment information for the direct admission.

TDCJ direct admissions will arrive at the TDCJ Hospital.

Once the patient has arrived on the designated floor or unit, care will be initiated according to the applicable UTMB Nursing Practice Standards.

See [Policy 9.1.12](#), *Interfacility Transfer of Patients from UTMB* for details on completing the MOT.

Reporting Violations

All alleged violations of Texas Department of Health (TDH), Centers for Medicare and Medicaid Services (CMS), or EMTALA regulations shall immediately be reported to the BIC. The BIC will collect the necessary information and will provide this information to the Medical Director of Inpatient Care/Hospital Administration and the Executive Director of Institutional Compliance. The Institutional Compliance Officer will review the allegation and report receipt of inappropriate transfer patients or other violations to TDH and CMS within 72 hours of first knowledge of the incident.

References

Policy 9.1.12, *Interfacility Transfer of Patients from UTMB*