

October - November 2023

Department of Inspections, Appeals, and Licensing Health and Safety Division Has Moved

The department's new offices are located at 6200 Park Ave., Suite 100, Des Moines, Iowa 50321.

Notify DIAL Health and Safety Division (HSD) of Changes in Hospital Information

Changing Hospital Information (relocations, name changes, etc.)

Any hospital with a change of information needs to inform the Department of Inspections, Appeals, and Licensing Health and Safety Division (DIAL HSD) in writing of the change. This should be done on the hospital letterhead and include: the type of change (relocation, name change, leadership changes, etc.), the current information and changes to it, and the effective date of the changes.

The majority of changes also require the submission of the CMS-855A to your Medicare Administrative Contractor (MAC). A CHOW (Change of Ownership) requires additional documentation – contact DIAL for additional information. Please note that changes cannot be made to information until an approved CMS-855A is received by DIAL from your MAC.

Hospitals also will need to update their licenses. Licensing fees are paid at the time of the annual renewals.

Adding, Deleting, or Changing an Off-Site Hospital-Based Location

Just like with changes in hospital information, it is important to notify DIAL in writing when there are changes to off-site provider-based locations referenced in a hospital license addendum. Each hospital with one or more off-site provider-based locations is issued a hospital license addendum. The hospital license addendum is a public document printed on the same paper as the license, but it does not need to be posted in the hospital as is

required for the hospital license. The hospital license addendum includes a table showing the DBA name of each provider-based entity, its physical address, and the specific patient services offered at each location. The hospital license addendum does not expire and is reissued only when changes occur.

Similar to the procedure for hospital information changes, these change notifications should be done on the hospital letterhead and include the type of potential change and effective date.

There are several steps in the process of <u>adding</u> the clinics to the hospital's license:

- First, you will need to file a CMS 855A application with WPS via Provider,
 Enrollment, Chain and Ownership System (PECOS) to add the clinics as practice locations for the hospital.
- Second, while waiting on the approval letter, you will need to have an architect or engineer submit architectural plans for the department's building code bureau for their review. The space will need to meet the current Life Safety Code requirements along with the 2018 version of the Facility Guidelines Institute (FGI) guidelines for hospitals.
- After receiving approval from the plan review, you will need to have a state fire
 inspector perform an on-site inspection of the clinics and issue a state certificate
 of occupancy. We can ONLY accept a certificate of occupancy from the state fire
 inspector, as it is the only entity that reviews for the Life Safety Code.
- Upon receiving the approval letter from WPS and the state certificate of occupancy, please submit both, along with a letter of intent on hospital letterhead, to Hema Lindstrom and Renee Andrews at hema.lindstrom@dia.iowa.gov and renee.andrews@dia.iowa.gov.

The letter of intent needs to specify which clinics are being added to the hospital's license, the address of the clinics, the name of the clinics (it must match the approved information from WPS), and the services provided at the clinics (which will be listed on the license addendum).

A CMS-855A must also be submitted by your hospital to your MAC. Please note that changes cannot be made to information until an approved CMS-855A is received by DIAL from your MAC.

Trends in EMTALA Violations

During a recent EMTALA (Emergency Medical Treatment and Labor Act) investigation, deficient practice was identified at C2407, Stabilizing Treatment.

A patient presented to the emergency department of a critical access hospital with a court order to be detained due to serious mental impairment that posed a danger to the patient. The patient had a history of mental illness, was non-compliant with medications, had visual and auditory hallucinations, and paranoia. The patient was medically screened by a physician and cleared for placement in another hospital's psychiatric unit. While awaiting transfer, the patient became more agitated, paced about, and tried to leave the hospital. Hospital staff redirected the patient, but within an hour, the patient left the facility unsupervised.

The hospital had policies in place, including an elopement procedure for patients who were committed. According to the policy, an elopement risk assessment should have been completed, and the hospital staff failed to complete one on the patient. The patient should have also been placed under direct observation (eyes on at all times). The patient was placed on 15-minute checks and was able to leave the building between checks, during cold temperatures and freezing rain/snow mix. Law enforcement located the patient and transported them to the hospital with a psychiatric unit.

EMTALA Lunch and Learn Set For Nov. 8



Join us for Dr. Sean Michael's EMTALA (Emergency Medical Treatment and Labor Act) presentation during the Department of Inspections, Appeals, and Licensing's Lunch and Learn session at 11:30 am on Nov. 8, 2023.

Please submit questions in advance by Nov. 7 with the subject line: Questions for EMTALA Lunch and Learn to hema.lindstrom@dia.iowa.gov.

Participants can connect to the event via Google link. Meeting ID: meet.google.com/jgg-jmua-zau OR 1-605-627-1467, PIN: 498 535 681#

Iowa Department of Inspections, Appeals, & Licensing

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