

106TH CONGRESS
2D SESSION

H. R. 5304

To require the General Accounting Office to report on the impact of the Emergency Medical Treatment and Active Labor Act (EMTALA) on hospital emergency departments.

IN THE HOUSE OF REPRESENTATIVES

SEPTEMBER 26, 2000

Mr. SHADEGG introduced the following bill; which was referred to the Committee on Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To require the General Accounting Office to report on the impact of the Emergency Medical Treatment and Active Labor Act (EMTALA) on hospital emergency departments.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Phoenix-Area Hospital
5 and Physician Assistance Act of 2000”.

6 **SEC. 2. FINDINGS.**

7 The Congress makes the following findings:

1 (1) The Emergency Medical Treatment and Ac-
2 tive Labor Act (EMTALA) requires that hospitals
3 and the emergency physicians as well as doctors on
4 call at hospital emergency departments screen and
5 stabilize patients who go to emergency departments
6 for treatment.

7 (2) Physicians who refuse to treat emergency
8 department patients or fail to respond to hospital
9 emergency department requests when on call face
10 significant fines and are exposed to liability under
11 EMTALA.

12 (3) Estimates indicate that EMTALA costs
13 emergency department physicians \$426,000,000 per
14 year and leads to at least \$10,000,000,000 more in
15 uncompensated inpatient services.

16 (4) Emergency departments, emergency physi-
17 cians, and physicians covering emergency depart-
18 ment call have become the de facto providers of indi-
19 gent health care in America.

20 (5) 27 percent of the over 4,300,000 people liv-
21 ing in Arizona are uninsured.

22 (6) Many physicians covering emergency de-
23 partment call in Phoenix, Arizona, are resigning
24 from the medical staff at hospitals due to burden-
25 some on-call requirements and uncompensated care.

1 (7) Significant concern exists as to whether
2 downtown Phoenix hospitals can keep their emer-
3 gency departments open.

4 (8) The cumulative effect of potential hospital
5 closings and staff resignations threatens the quality
6 of health care in Phoenix, Arizona.

7 **SEC. 3. REPORT ON EFFECT OF EMTATLA.**

8 (a) REPORT.—The Comptroller General of the
9 United States shall submit a report to the Subcommittee
10 on Health and Environment of the Committee on Com-
11 merce of the House of Representatives by May 1, 2001,
12 on the effect of the Emergency Medical Treatment and
13 Active Labor Act on hospitals, emergency physicians, and
14 physicians covering emergency department call, focusing
15 on those in Phoenix, Arizona.

16 (b) REPORT REQUIREMENTS.—The report should
17 evaluate—

18 (1) the extent to which hospitals, emergency
19 physicians, and physicians covering emergency de-
20 partment call provide uncompensated services in re-
21 lation to the requirements of EMTALA;

22 (2) the extent to which the requirements of
23 EMTALA are having a deleterious effect on the leg-
24 islation's original intent;

1 (3) any possible estimates for the total dollar
2 amount EMTALA-related care costs emergency phy-
3 sicians, physicians covering emergency department
4 call, and hospital emergency department depart-
5 ments;

6 (4) the extent to which different portions of the
7 country may be experiencing similar uncompensated
8 EMTALA-related care;

9 (5) the extent to which EMTALA would be
10 classified as an unfunded mandate;

11 (6) the extent to which States have programs to
12 provide financial support for uncompensated care;

13 (7) the extent to which funds under medicare
14 hospital bad debt accounts are available to under-
15 write the cost of uncompensated EMTALA-related
16 care; and

17 (8) the financial strain that illegal immigration
18 populations place on hospital emergency depart-
19 ments.

20 (c) DEFINITION.—In this Act, the terms “Emergency
21 Medical Treatment and Active Labor Act” and
22 “EMTALA” mean section 1867 of the Social Security Act
23 (42 U.S.C. 1395dd).

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