

## HOSPITAL SIGNAGE REQUIREMENTS

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NAME OF SIGN	WHO MUST COMPLY	DESCRIPTION OF REQUIREMENT	LOCATION/ LANGUAGE/ SIGN AND FONT SIZE
<b>Accountable Care Act Participant</b>  <span style="color: red;">*New</span>	Participants in an Accountable Care Organization (ACO)	ACO participants must notify beneficiaries that their ACO providers/suppliers are participating in the Medicare Shared Savings Program and the beneficiary's opportunity to decline claims data sharing under § 425.708.  Legal Authority 42 CFR §425.312(a)(2)	ACO participants must "post signs in their facilities."
<b>ADA Information and Signage (applies to entities owned by state and local governments)</b>	U.S. Department of Justice Civil Rights Division	ADA Act of 1990, Title 11, § 35.163	All inaccessible entrances, directing users to an accessible entrance or to a location at which they can obtain information about accessible facilities; the international symbol for accessibility must be used at each accessible entrance of the facility
<b>Ambulance Replenishing</b>  <span style="color: red;">*New</span>	Hospitals that replenish ambulances	The notice must include the category of ambulance providers that qualifies for replenishment, the drugs or medical supplies included in the replenishment program, and the procedures for documenting and replenishing.  Legal Authority 42 CFR §1001.952(v)	The notice must be posted conspicuously in the receiving hospital's emergency room or other location where the ambulance providers deliver patients. Do not have to post notice if the replenishment arrangement operates in accordance with a plan or protocol of general application promulgated by an EMS council or comparable entity.
<b>Community Needs Assessment</b>  <span style="color: red;">*New</span>	Internal Revenue Service	Legal Authority 26 CFR 1.501(r)-3(b)(7)(A)	The most recent final CHNA report as adopted by an authorized body of the hospital must be readily accessible on the Hospital's website, without any required login.

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<b>Complaint and Client Advocacy Group Information</b>	Skilled nursing facilities certified for Medicare and Medicaid	Skilled nursing facilities must post the names, addresses, and telephone numbers of all pertinent state client advocacy groups such as the state survey and certification agency (DHSS), the state licensure office (DHSS), the state ombudsman program, the protection and advocacy network, and the Medicaid fraud control unit.  Legal Authority 42 CFR §483.10(b)(7)	
<b>Comprehensive Care for Joint Replacement (CJR) Program Participants</b>	Participant hospitals in the CJR model.	Website must include: [R] List of all current and past CJR collaborators, including names and address, and written policies for selecting collaborators required by §510.500(d).	Post on participant hospital's website; update quarterly (at a minimum)
<b>Employee Polygraph Protection Act (EPPA)</b>	U.S. Dept. of Labor	29 CFR § 801.6	Human Resources
<b>EMTALA: It's the Law!</b>	Hospitals that participate in Medicare (including psychiatric hospitals)	Hospitals must post (in a form specified by the Secretary of the U.S. Department of Health and Human Services) the rights of individuals with respect to examination and treatment for emergency medical conditions and women in labor, and whether the hospital participates in the Medicaid program.  Legal Authority 42 USC. §1395cc(a)(1)(N)(iii) and (iv) 42 CFR §489.20(q)	Signs must be posted in a place or places likely to be noticed by all individuals entering the dedicated emergency department (on- and off-campus), as well as those individuals waiting for examination and treatment in areas other than traditional emergency departments (e.g., entrances, admitting area, waiting rooms, treatment areas). Posting of signs is not required in off-campus departments that are not dedicated emergency departments. Signs must be clear and in simple terms. Signs must be posted in English and other major languages that are common to the population of the hospital service area. The letters within the signs must be

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<b>EMTALA: It's the Law! (continued)</b>			clearly readable at a distance of at least 20 feet, or from the expected vantage point of dedicated emergency department patrons.
<b>End-Stage Renal Disease Quality Incentive Program: Performance Score Certificate</b>	Renal dialysis services providers and facilities	The Medicare Dialysis Quality Incentive Program issues two-page "Performance Score Certificates" (PSCs) that providers and facilities must post. CMS will electronically notify facilities that the PSC is available to download from <a href="http://www.dialysisre-ports.org">www.dialysisre-ports.org</a> . The facility must post both pages of the certificate within five business days of the notice from CMS. The notice must be posted until the end of the calendar year. (See <a href="http://www.medicare.gov/dialysis">www.medicare.gov/dialysis</a> for more information.) Legal Authority 42 USC §1395rr(h)(6)(C)	The PSC must be prominently displayed in patient areas.
<b>"Equal Employment Opportunity is the Law" (Civil Rights and ADA notice)</b>	Equal Employment Opportunity Commission (EEOC)	<u>29 CFR §1627.10</u>	Human Resources
<b>Financial Assistance/ Charity</b>	Hospitals licensed under Title 70 RCW that are 501(c)(3) tax exempt under federal law	Notify and inform visitors to the hospital about the availability of financial assistance through conspicuous displays.  26 CFR 1.501(r)-4(b)(5)	Website; public areas of the hospital, including the emergency department and admissions areas must have paper copies of the FAP documents must be available upon request and without charge.
<b>Freedom to Choose Post-Acute Care Provider</b>	Hospitals including critical access hospitals	Discharge plan must include a list of HHAs or SNFs that are available, participate in the Medicare program, and that serve the geographic area in which the patient resides, or in the case of a SNF, in the geographic area requested by the patient. Legal Authority 42 CFR 482.43(c)(1); (I don't see a similar reg for CAHs)	List of HHS or SNF must be included in the discharge plan.

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<p><b>Hill-Burton Community Service Assurance and Uncompensated Care Services</b></p>	<p>Recipients of federal funding under the Hill-Burton Act that have not completed their Hill-Burton obligations.</p>	<p>A facility receiving federal funding under Title VI or XVI of the Public Health Service Act (Hill-Burton grants to modernize hospitals) must make its facility (or that portion constructed or renovated with federal funds) available to all persons residing or employed in the geographic area it serves, and provide uncompensated services. The facility must acknowledge this obligation by making a “community service assurance” and posting a sign to that effect. The facility must also post a sign regarding the provision of uncompensated care. The Secretary of the U.S. Department of Health and Human Services will provide the required signs in English and Spanish.</p> <p>Written Individual Notice that specifies the types of Hill-Burton free and reduced-cost services available and the income criteria is also required;  <a href="http://www.hrsa.gov/gethealthcare/affordable/hillburton/">http://www.hrsa.gov/gethealthcare/affordable/hillburton/</a></p> <p>Legal Authority            42 CFR §124.501 et seq. (uncompensated care) and 124.601 et seq. (community service)</p>	<p>The law does not specify where the community service signs must be posted. Signs about uncompensated care must be posted in “appropriate areas in the facility, including, but not limited to, the admissions areas, the business office, and the emergency room” Signs must be posted in English and Spanish. If 10 percent or more of households in the facility’s service area usually speak a language other than English or Spanish, the facility must translate the sign into that language(s) and post signs similar in size and legibility to the English and Spanish signs. In addition, the facility must make reasonable efforts to communicate the contents of the posted notice to persons it has reason to believe cannot read the notice.</p> <p>Sample Signs            Facilities may obtain the signs by contacting the Health Resources and Services Administration at 800-638-0742.</p>

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<b>Mammography : Accreditation Certificate</b>	A mammography facility — a hospital, outpatient department, clinic, radiology practice, mobile unit, physician office, or other facility as determined by the Secretary of the U.S. Department of Health and Human Services, that conducts breast cancer screening or diagnosis through mammography activities.	<p>The U.S. Secretary of Health and Human Services issues a certification of accreditation to accredited mammography facilities.</p> <p>Legal Authority 42 USC §263b(b)(1)(A)(iii)</p>	The certificate must be prominently displayed.
<b>Medicare and Medicaid Benefits</b>	Skilled nursing facilities certified for Medicare and Medicaid	<p>A skilled nursing facility must display written information about how to apply for and use Medicare and Medicaid benefits, and how to receive refunds for previous payments covered by such benefits.</p> <p>Legal Authority 42 CFR §483.10(b)(10)</p>	The information must be prominently displayed in the facility.
<b>Notice of Privacy Practices</b>	Covered entities under HIPAA	<p>Each covered entity under the Health Insurance Portability and Accountability Act (HIPAA) of 1996 must post its Notice of Privacy Practices. The notice must also be available on the covered entity's website for downloading.</p> <p><a href="http://www.hhs.gov/ocr/privacy/hipaa/understanding/coveredentities/notice.pdf">http://www.hhs.gov/ocr/privacy/hipaa/understanding/coveredentities/notice.pdf</a>; written notice on a website and in a form that patients may take with them is also required.</p> <p>Legal Authority 45 CFR §164.520(c)(2)(iii)(B)</p>	Notices must be posted in a clear and prominent location where it is reasonable to expect individuals seeking services to be able to read it.

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<b>Notice of Beneficiary Hospital Discharge Appeal Rights</b>	All hospitals providing inpatient care, including critical access hospitals	Written notice must include a Medicare beneficiary's: <ol style="list-style-type: none"> <li>1) rights as a hospital inpatient;</li> <li>2) discharge appeal rights – including a description of the process under §405.1206 and detailed information in accordance with §405.1206(e); and</li> <li>3) liability for charges for continued inpatient stay.</li> </ol> 42 CFR 405.1205	Notice to Medicare beneficiaries at or near admission, but no later than two days after being admitted.
<b>Patient Seen by Advance Practice Nurse</b>	Offices where APNs prescribe under a collaboration practice agreement	A requirement that there shall be posted at every office where the advanced practice registered nurse is authorized to prescribe, in collaboration with a physician, a prominently displayed disclosure statement informing patients that they may be seen by an advanced practice registered nurse and have the right to see the collaborating physician;  Legal Authority RSMo 334.104. 3. (3)	Sign must be prominently displayed.
<b>Physician Availability</b>	Emergency departments in hospitals and critical access hospitals without a physician present at all times.	Each dedicated emergency department, as that term is defined in Sec. 489.24(b), in a hospital in which a doctor of medicine or doctor of osteopathy is not present 24 hours per day, 7 days per week must post a notice conspicuously in a place or places likely to be noticed by all individuals entering the dedicated emergency department. The posted notice must state that the hospital does not have a doctor of medicine or a doctor of osteopathy present in the hospital 24 hours per day, 7 days per week, and must indicate how the hospital will meet the medical needs of any patient with an emergency medical condition, as defined in Sec. 489.24(b), at a time when there is no doctor of medicine or doctor of osteopathy present in the hospital.  Legal Authority 42 CFR §489.20(w(5))	The signs must be conspicuous.

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<b>Provider-Based Off-Campus Outpatient Locations</b>	Hospitals that participate in Medicare and have off-campus, provider-based outpatient services	<p>Provider-based facilities must make patients aware that they are entering a facility of the main provider (hospital) and will be billed accordingly. Technically, the law does not require signage, but most facilities use signage to fulfill this requirement. In addition, prior to delivery of services, the patient must receive written notice regarding his/her potential financial liability. If the exact type and extent of care needed are not known, the patient must receive a written explanation that the beneficiary will incur a coinsurance liability to the hospital that he or she would not incur if the facility were not provider-based; an estimate based on typical or average charges for visits to the facility; and a statement that the patient's actual liability will depend upon the actual services furnished by the hospital.</p> <p>Legal Authority 42 CFR §413.65(d)(4) and (g)(7)</p>	The notice or signage must be one that Medicare beneficiaries can read and understand.
<b>Radiation: Caution (federal)</b>	Persons or entities licensed by the Nuclear Regulatory Commission	<p>Depending on the level of radiation, the area must be marked with a sign(s) that contains the radiation symbol and text as follows:</p> <ol style="list-style-type: none"> <li>1. Radiation area (area where an individual could receive a dose in excess of 0.005 rem in 1 hour at 30 cm from source or from any surface the radiation penetrates): "CAUTION, RADIATION AREA."</li> <li>2. High radiation area (area where an individual could receive a dose in excess of 0.1 rem in 1 hour at 30 cm from source or any surface the radiation penetrates): "CAUTION, HIGH RADIATION AREA" or "DANGER, HIGH RADIATION AREA."</li> <li>3. Very high radiation area (area where an individual could receive a dose in excess of 500 rads rem in 1 hour at 1 meter from source or from any surface the radiation penetrates): "GRAVE DANGER, VERY HIGH RADIATION AREA."</li> </ol>	The signs must be conspicuous.

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<b>Radiation: Caution (federal) (continued)</b>		<p>4. Airborne radioactivity area (area where radioactive material is dispersed in the air in the form of dusts, fumes, particulates, mists, vapors, or gases): "CAUTION, AIRBORNE RADIOACTIVITY AREA" or "DANGER, AIRBORNE RADIOACTIVITY AREA."</p> <p>5. Areas/room where licensed material is used or stored in an amount exceeding 10 times the quantity specified in appendix C to 10.</p> <p>CFR part 20: "CAUTION, RADIOACTIVE MATERIAL(S)" or "DANGER, RADIOACTIVE MATERIAL(S)"</p> <p>Legal Authority 10 CFR §20.1003 and 20.1902</p>	
<b>Uniformed Services Employment and Reemployment Rights Act (USERRA)</b>	U.S. Dept. of Labor	<u>38 U.S.C. Chapter 43 (Public Law 103-353)</u>	Human Resources
<b>Various U.S. Department of Labor</b>		<p>The U.S. Department of Labor has many generally applicable poster requirements under laws such as: OSHA (Occupational Safety and Health Act), FMLA (Family and Medical Leave Act), FLSA (Fair Labor Standards Act), and other federal laws. As applicable requirements can vary based on the size and nature of a business, interested parties are encouraged to visit the "poster advisor" website provided by the DOL to determine the specific posters required for their individual businesses at: <a href="http://www.dol.gov/elaws/posters.htm">http://www.dol.gov/elaws/posters.htm</a>.</p> <p>29 CFR §1903.2 29 CFR §801.6 29 CFR §1627.10</p>	Form Poster Human Resources