I. SCOPE:

This policy applies to (1) Tenet Healthcare Corporation (“Tenet”) and its wholly-owned subsidiaries and affiliates; (2) any other entity or organization in which Tenet or its affiliate owns a direct or indirect equity interest of 50% or more; and (3) any hospital or healthcare facility or organization in which Tenet or an affiliate either manages or controls the day-to-day operations of the facility (a “Tenet Entity”) (collectively, “Tenet”).

II. PURPOSE:

The purpose of this policy is to provide direction with respect to acceptable arrangements that a Tenet Entity may engage in with ambulance companies and emergency medical services providers (collectively, “EMS”).

III. POLICY:

A Tenet Entity may provide benefits to EMS providers which are incidental to the delivery of transportation services for patients in the Tenet entity’s community. In no event shall the provision of benefits be conditioned upon or intended to induce an EMS provider to select a Tenet hospital for the provision of services to a patient.

IV. PROCEDURE:

A. Space Access

A Tenet Entity may allow EMS access to the break rooms and access to desk space and similar types of work space similar in accommodations and amenities to break space and work space generally available to employees of the Tenet Entity (“Staff Space”). If Tenet Entity does not provide break room or work space for its employees, it may not create space exclusively for EMS use.

B. Food and Drinks

If Tenet Entity has free or discounted food or drinks available to its employees in the Staff Space, EMS may partake of the same food and drinks available to Tenet Entity employees, under the same rules and conditions as Tenet Entity employees. Any food or drink available to EMS should be of a modest nature.

C. Medical Direction

1. Tenet Entity may provide EMS with physician-directed out-of-hospital care through a combination of off-line and on-line medical direction using prospective, concurrent, and retrospective methods.
HOSPITAL RELATIONSHIPS WITH AMBULANCE AND EMS PROVIDERS

a. Off-Line (Prospective and Retrospective) Medical Direction

Off-line medical direction includes setting standards for out-of-hospital care and can be accomplished through both prospective and retrospective methods. Examples of prospective medical direction include training, testing and certification of providers, protocol development, operational policy and procedures development, and legislative activities. Examples of retrospective activities: medical audit and review of care (process improvement), and direction of remedial education.

b. On-Line (Concurrent) Medical Direction.

On-line medical direction is provided directly to out-of-hospital providers by direct voice communication. This contact may be by radio, telephone or other means as technology develops, but relies primarily upon person-to-person communication of patient status, and orders to be carried out.

2. Medical Direction provided by Tenet Entity, directly or indirectly, may include:

a. Developing and implementing protocols and standing orders for EMS agencies for all patient care activities from dispatch through triage, treatment, transport, and/or non-transport;

b. Developing and implementing a process improvement program;

c. Arranging for coordination of activities for mutual aid, disaster planning and management, and hazardous materials response including weapons of mass destruction and terrorism. Providing training related to the above activities.

d. Establishing criteria for determining patient destination in a non-discriminatory manner.

D. Technology

Tenet Entity may provide technology to EMS in the form of access to smart phone/tablet applications (app) if all of the following criteria are met:

1. Tenet Entity is licensed to share the app;

2. Tenet Entity will make the app available to any EMS provider that requests it;
3. Neither the app or Tenet Entity imposes any limit on transmission of data to any hospital at the election of EMS, subject to the other facilities’ license of the application; and

4. The primary purpose of the app is promotion of quality patient care for EMS’s patients.

Tenet Entity may not provide EMS with other software or hardware without approval from Regional Counsel.

E. EMS Appreciation Week

During the one week each year designated as National EMS Week by the National Association of EMT’s, Tenet Entity may provide EMS with items or services in addition to those listed above. During this week, Tenet Entity may give away to EMS:

1. Items that are branded with Tenet Entity’s name and logo that have a cost to Tenet Entity of not more than $10/item;

2. Food or beverages outside the Staff Space that are modest in value, which may include a modest meal.

The Tenet Entity shall maintain a log of benefits provided to EMS.

F. Ambulance Restocking

The Tenet Entity may only restock ambulances that are regularly used for emergency transportation. An ambulance is considered to be regularly used for emergency transportation if it responds to emergencies on the average of three times per week. Restocking is not limited to emergency calls, as long as the ambulance is an "emergency" ambulance under this "three times per week" definition. Tenet Entity may not restock non-emergency ambulances.

Tenet Entity must also comply with the following requirements:

1. Under no circumstances may both Tenet Entity and EMS bill for the replenished items (this includes submitting claims for bad debt);

2. Tenet Entity must maintain records of the restocked items (this may be accomplished through a patient care report or trip sheet which shows the items used), except for linens (linens are presumed to be exchanged one for one). These records must be maintained for 5 years (see
3. The restocking arrangement must not take into account the volume or value of patient referrals;

4. The restocking program must meet all the requirements for one of the following:

   a. General replenishing

      (1) Tenet Entity restocks EMS on an equal basis within one or more of the following categories:

          (a) only EMS which do not charge for their services;
          (b) nonprofit EMS; or
          (c) all EMS.

      Tenet Entity may exclude certain categories of EMS altogether from its restocking program and can offer a different restocking program to each category it restocks, so long as the restocking is uniform within each category; and

      (2) Tenet Entity must:

          (a) post a public notice of its restocking practices (see Attachment A for sample) and copies must be made available upon request; or

          (b) the restocking program must be done pursuant to a regional EMS council plan or protocol.

   b. Fair Market Value Replenishing – EMS pays Tenet Entity fair market value for its restocked drugs and supplies. The payment arrangements must be commercially reasonable and must be made in advance; or

   c. Government Mandated Restocking - The restocking program is undertaken in accordance with a state or local statute, ordinance or regulation.

So long as the restocking program complies with this Policy, no written agreement between the Tenet Entity and EMS is required to accomplish this restocking.
D. Other Arrangements

1. All other arrangements with EMS shall comply with any applicable Tenet Law Department policy. For example, lease of space for ambulance units or staff shall comply with Law Department Policy L-4 Office Space and Equipment Leases.

2. A Tenet Entity may contract for EMS stand-by services upon demonstration of a reasonable need to have available ambulance services on an emergent basis, such as a free-standing emergency facility which may need to transport patients to another facility for stabilizing services. Generally, a Tenet Entity which is an acute care hospital or a medical clinic is unlikely to require stand-by services.

3. In no event shall a Tenet Facility accept a benefit from an ambulance provider that may relieve the Tenet Facility of any duty or expense which would otherwise be the responsibility of the Tenet Facility. For example, a Tenet Facility shall not allow placement of a transportation coordinator in its facility for the purpose of arranging inter-hospital or post-discharge transportation for patients who have not already selected the ambulance provider to deliver the service.

4. A Tenet Entity may contract for ambulance transportation services if the Tenet Entity is responsible for the transport under applicable law or managed care arrangements, or for discharge transportation permitted under Tenet policy. The fee for such contracted service shall consistent with fair market value but shall not be less than the then-current Medicare fee schedule amount for the Tenet Entity’s service area.

E. Responsible Person

The Tenet Entity CEO is responsible for ensuring that all individuals adhere to the requirements of this policy, that these procedures are implemented and followed at the Tenet Entity.

F. Auditing and Monitoring

Audit Services will audit adherence to this policy.

G. Enforcement

All employees whose responsibilities are affected by this policy are expected to be familiar with the basic procedures and responsibilities created by this policy. Failure to comply with this policy will be subject to appropriate performance management pursuant to all applicable policies and procedures, up to and
including termination. Such performance management may also include modification of compensation, including any merit or discretionary compensation awards, as allowed by applicable law.
(Sample written disclosure of restocking program)

Notice of Ambulance Restocking Program

[date]

[Tenet Entity] offers the following ambulance restocking program:

1. We will restock all ambulance providers (other than ambulance providers that do not provide emergency services) that bring patients to Tenet Entity in the following category or categories: [insert description of category of ambulances to be restocked, i.e., all ambulance providers, all ambulance providers that do not charge patients or insurers for their services, or all nonprofit and Government ambulance providers].

2. The restocking will include the following drugs, medical supplies, and linens used for a patient prior to the patient’s delivery to Tenet Entity: [insert description of drugs, medical supplies, and linens to be restocked].

3. The ambulance providers [will/will not] be required to pay for the restocked drugs, medical supplies, and linens.

4. The restocked drugs, medical supplies, and linens, must be documented as follows: [insert description. By way of example only, documentation may be by a patient care report filed with the receiving facility within 24 hours of delivery of the patient that records the name of the patient, the date of the transport, and the relevant drugs and medical supplies used.]

5. This restocking program does not apply to the restocking of ambulances that only provide non-emergency services or to the general stocking of an ambulance provider’s inventory.

6. To ensure that Tenet Entity does not bill any Federal health care program for restocked drugs or supplies for which a participating ambulance provider bills or is eligible to bill, all participating ambulance providers must notify Tenet Entity if they intend to submit claims for restocked drugs or supplies to any Federal health care program. Participating ambulance providers must agree to work with Tenet Entity to ensure that only one party bills for a particular restocked drug or supply.

7. All participants in this ambulance restocking arrangement that bill Federal health care programs for restocked drugs or supplies must comply with all applicable Federal program billing and claims filing rules and regulations.

8. For further information about our restocking program or to obtain a copy of this notice, please contact [name] at [telephone number].