

FACILITY LICENSING AND INVESTIGATIONS SECTION

BLAST FAX 2025-17

TO: Hospital Administrators

FROM: Jennifer Olsen-Armstrong, MS, RD

Department of Public Health (DPH)

Section Chief, Facility Licensing and Investigations Section

CC: Adelita Orefice, MPM, JD, CHC, Deputy Commissioner, DPH

Lorraine Cullen, MS, RRT, RRT-ACCS, Branch Chief, HQSB Cheryl Davis, RN Public Health Services Manager, FLIS James Augustyn, Public Health Services Manager, FLIS

DATE: September 30, 2025

SUBJECT: Public Act 25-96: An Act Concerning The Department Of Public Health's

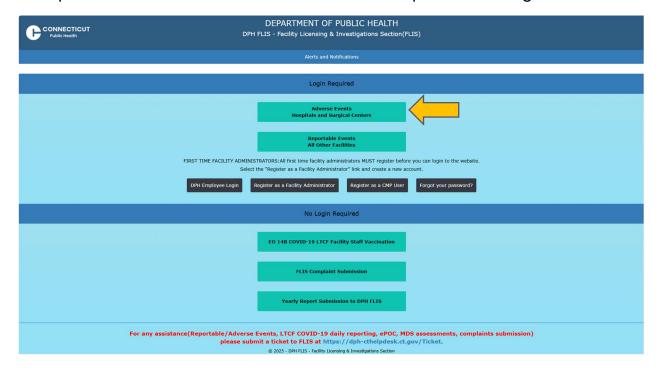
Recommendations Regarding Various Revisions To The Public Health

Statutes. (Reporting Hospital Emergency Department Diversion)

Section ten (10) of Public Act (PA)25-96, requires hospitals to notify the Connecticut Department of Public Health (DPH) within two hours of commencing an emergency department (ED) diversion. Hospitals are required to report in a form and manner determined by the Commissioner.

The Department has updated the Facility Licensing and Investigations Section (FLIS) web-based submission portal for the purpose of ED diversion reporting. Reports shall be submitted to the Department of Public Health using the web-based reporting portal under the new "Hospital ED Diversion" tab.

To report ED Diversion, Select "Adverse Events Hospitals and Surgical Centers"



Enter your username and password and click the "Login" button.



After successful login, the hospital landing page will appear.



Click the "Hospital ED Diversion" tab and then "Submit Hospital ED Diversion" to submit a notification of hospital ED diversion.



Complete the Notice of Hospital Emergency Department Diversion and click "Submit."

Notice of Hospit	al Emergency Department Diversion		
In accordance with Public Act No: 25-96,"emergency department statutes that reroutes incoming ambulances to other hospitals du			
Directions: Complete the Hospital Emergency Department Divers diversion.	on Notification form within two (2) hours of commen	cing an emergency department (ED)	
Hospitals are responsible for maintaining compliance with	the Emergency Medical Treatment and Labor Ac	ct (EMTALA), 42 U.S.C. § 1395dd.	
Facility Name	Select a Facility	•	
First Name of Person Submitting		*	
Last Name of Person Submitting		*	
Title of Person Submitting		•	
Phone number of Person Submitting		•	
Email of Person Submitting		•	
Is this a continuation of a previously reported diversion?	Yes ○ No		
If yes, was the original report made within two hours of the initiation of the diversion?	○ Yes ○ No		
Date and Time emergency department diversion was initiated	© ©		
First name of the hospital administrator or designee who authorized the emergency department diversion		•	
Last name of the hospital administrator or designee who authorized the emergency department diversion		•	
Title of the hospital administrator or designee who authorized the emergency department diversion		*	



Type of emergency department diversion (select one)	 Partial Diversion (The hospital is unable to accept specific types of patients from EMS who require specific types of emergency department services/capabilities due to an infrastructure issue (e.g., trauma or neurological/stroke patients because the CT scan is out of service) and is effectively diverting EMS transport of the specified patient types or patients in need of a specific capability. Full Diversion (Closed to all EMS) 		
Reason For Diversion (check all that apply)	Physical Plant Issue Equipment Environmental Other		
Briefly Describe Reason (e.g. type of equipment that is out of service).	*		
The name of hospital(s) accepting EMS diversions	*		
The location of hospital(s) accepting EMS diversions	*		
First name of authorized official of the receiving hospital(s)	*		
Last name of authorized official of the receiving hospital(s)	*		
Title of authorized official of the receiving hospital(s)	*		

Please note, after eight (8) hours, each ED diversion notification will be considered 'closed'. If a hospital diversion exceeds eight (8) hours, the hospital must initiate a new notification report and indicate it is a continuation of a previously reported

9/29/2025

Date of Submission

Hospitals are expected to maintain compliance with the Emergency Medical Treatment and Labor Act (EMTALA.)

In addition, Adverse Events should continue to be reported in accordance with the Public Health Code through established channels.



diversion.

Hospital administrators can create user-logins for additional staff members to report into the FLIS portal if needed to comply with the requirements of Public Act 25-96.

For assistance with submission of reports please submit a ticket to the DPH Helpdesk Portal (https://dph-cthelpdesk.ct.gov/Ticket). For other questions on reporting please contact Cheryl Davis, Public Health Services Manager, at cheryl.davis@ct.gov.

