SF107

SGS

S0107-3

SENATE STATE OF MINNESOTA EIGHTY-NINTH SESSION

S.F. No. 107

(SENATE AUTHORS: EKEN, Sheran, Senjem, Carlson and Eaton)

DATE	D-PG	OFFICIAL STATUS
01/15/2015	69	Introduction and first reading
		Referred to Health, Human Services and Housing
02/16/2015	293a	Comm report: To pass as amended and re-refer to Judiciary
03/04/2015	540a	Comm report: To pass as amended
	556	Second reading
04/13/2015	1544	Special Order
	1544	Third reading Passed
05/09/2016	6851	Returned from House with amendment
	6852	Senate concurred and repassed bill
	6852	Third reading
		Presentment date 05/10/16
05/17/2016	7050	Governor's action Approval 05/12/16
	7050	Secretary of State Chapter 103 05/12/16
		Effective date 01/01/17

1.1	A bill for an act
1.2	relating to health care; requiring a hospital to provide a patient the opportunity to
1.3	designate a caregiver upon entry to the hospital; requiring a hospital to provide
1.4	a discharge plan and aftercare instructions to a designated caregiver prior to
1.5	discharge; proposing coding for new law in Minnesota Statutes, chapter 144.

1.6 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.7 Section 1. [144.6522] DESIGNATION OF A CAREGIVER.

1.8 Subdivision 1. **Definitions.** For purposes of this section:

1.9 (a) "Aftercare" means any assistance provided to a patient in the patient's residence

1.10 by a caregiver designated by the patient in accordance with this section after the patient's

1.11 <u>discharge from a hospital. Assistance may include, but is not limited to, assisting with</u>

1.12 basic activities of daily living (ADLs), instrumental activities of daily living (IADLs),

1.13 or carrying out medical or nursing tasks, such as managing wound care, assisting in

1.14 administering medications, and operating medical equipment.

1.15 (b) "Agent" means a court appointed guardian, the parent of a minor child whose

1.16 <u>authority to act on behalf of the patient as to health care decisions has not been restricted by</u>

1.17 <u>the court, or a health agent authorized to act on behalf of the patient under chapter 145C.</u>

1.18 (c) "Designated caregiver" means any individual 18 years of age or older who is

1.19 designated as a caregiver by a patient to provide aftercare assistance to the patient in the

1.20 patient's residence after the patient's discharge from a hospital and who, in the professional

- 1.21 opinion of the patient's health care provider, is capable of providing aftercare assistance.
- 1.22 A designated caregiver may include, but is not limited to, a relative, partner, friend, or
- neighbor who has a relationship with the patient.
- 1.24 (d) "Discharge" means a patient's exit or release from a hospital to the patient's
 1.25 residence following an inpatient admission.

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2.1	(e) "En	try" means a patient	s admission to	o a hospital for the pur	poses of inpatient
2.2	medical care.			•	··
2.3	(f) "Ho	spital" means a facil	ity licensed u	nder sections 144.50 to	144.56.
2.4	(g) "Re	sidence" means a dw	velling that the	e patient considers to b	e the patient's home.
2.5	For the purpo	oses of this section, a	a residence do	es not include a rehabi	ilitation facility,
2.6	hospital, nurs	sing facility, or other	health care or	r residential facility wh	ere health care staff
2.7	are responsib	le for performing ne	cessary medic	cal and nursing tasks fo	or the patient.
2.8	Subd. 2	2. Opportunity to d	esignate a ca	regiver. (a) A hospital	shall provide each
2.9	patient or, if	applicable, the patien	nt's agent with	an opportunity to des	ignate at least one
2.10	caregiver no	later than 24 hours u	pon the paties	nt's entry into a hospita	al and before the
2.11	patient is disc	charged from the hos	spital or transf	ferred to another health	care facility. If the
2.12	patient is unc	onscious or otherwis	se incapacitate	ed upon entry into the l	nospital, the hospital
2.13	shall provide	the patient or the pa	tient's agent w	with an opportunity to c	lesignate a caregiver
2.14	within 24 hou	urs following the pat	ient's recover	y of consciousness or c	capacity.
2.15	<u>(b) If th</u>	ne patient or the pati	ent's agent de	signates an individual	as a caregiver,
2.16	the hospital s	hall record the patie	nt's designation	on of caregiver, the rela	ationship of the
2.17	designated ca	regiver to the patien	t, and the nan	ne, telephone number,	and address of the
2.18	patient's desig	gnated caregiver in t	he patient's m	edical record. If the pa	tient or the patient's
2.19	agent decline	s to designate a care	giver, the hos	pital shall document th	is in the patient's
2.20	medical reco	<u>rd.</u>			
2.21	<u>(c) If th</u>	e patient designates	a caregiver, t	he hospital shall be de	emed to have
2.22	obtained the	written consent of th	e patient to re	lease medical informat	ion to the designated
2.23	caregiver foll	owing the hospital's	established p	rocedures for releasing	g personal health
2.24	information a	und in compliance w	ith all federal	and state laws. The pa	tient or the patient's
2.25	agent may re	voke prior consent to	o release medi	cal information to the	designated caregiver
2.26	at any time a	nd if consent is revol	ked, the hospi	tal is not required to pr	rovide notice to the
2.27	designated ca	regiver under subdiv	vision 3 or pro	ovide information conta	ained in the patient's
2.28	discharge pla	n under subdivision	4.		
2.29	<u>(d)</u> A p	atient may elect to c	hange their de	esignated caregiver at a	any time, and the
2.30	hospital shall	record the change in	n the patient's	medical record within	24 hours.
2.31	<u>(e)</u> A de	esignation of a careg	iver by a patie	ent or a patient's agent	does not obligate the
2.32	designated ca	aregiver to perform a	iny aftercare t	asks for the patient.	
2.33	Subd. 3	3. Notice to designa	ted caregiver	. (a) A hospital shall r	notify, as soon as
2.34	practicable, t	he patient's designat	ed caregiver o	of the patient's discharg	ge or transfer to
2.35	another hosp	ital or health care fac	cility after the	patient's health care p	rovider issues a
2.36	discharge or	transfer order.			

3.1	(b) Failure to contact a designated caregiver or failure of the designated caregiver to
3.2	be present at the hospital to receive the discharge plan and aftercare instructions described
3.3	in subdivision 4, shall not interfere with or delay the discharge or transfer of the patient
3.4	so long as the hospital has made a good faith effort to contact the designated caregiver
3.5	within a reasonable time period. The hospital shall document the efforts made to contact
3.6	the designated caregiver in the patient's medical record.
3.7	(c) This subdivision shall not apply if the patient is transferred to another health
3.8	care facility due to an emergency situation.
3.9	Subd. 4. Discharge plan and aftercare instructions to designated caregiver. (a)
3.10	Prior to a patient's discharge from the hospital to the patient's residence, the hospital shall
3.11	consult with the designated caregiver and the patient, and issue a discharge plan that
3.12	describes the patient's aftercare needs and instructions for all aftercare tasks described in
3.13	the discharge plan.
3.14	(b) At a minimum, a discharge plan must include:
3.15	(1) the name and contact information of the designated caregiver;
3.16	(2) a description of and instructions for all aftercare tasks necessary to maintain the
3.17	patient's ability to reside at home, taking into account the capabilities and limitations of
3.18	the designated caregiver;
3.19	(3) contact information for any health care, community resources, and long-term
3.20	services and supports necessary to successfully carry out the patient's discharge plan; and
3.21	(4) contact information of a hospital representative who can respond to questions
3.22	about the discharge plan and instructions that are required to be provided under this
3.23	subdivision after the patient has been discharged.
3.24	(c) At a minimum, the instructions for aftercare tasks included in the discharge
3.25	plan must include:
3.26	(1) a live demonstration or video instruction of the aftercare tasks performed by a
3.27	hospital employee, or an individual with whom the hospital has a contractual relationship
3.28	who has the appropriate education and competency in the task to be performed and is
3.29	authorized to perform the task, in a culturally competent manner and in accordance with the
3.30	hospital's requirements to provide language access services under state and federal law; and
3.31	(2) an opportunity for the designated caregiver and patient to ask questions about
3.32	the aftercare tasks, and to provide answers to any questions in a culturally competent
3.33	manner and in accordance with the hospital's requirements to provide language access
3.34	services under state and federal law.

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4.1	(d) The hospital shall document the discharge plan and a description of the
4.2	instructions provided in the patient's medical record, including, at a minimum, the date,
4.3	time, and content of the instructions provided.
4.4	Subd. 5. Limitations. (a) Nothing in this section shall be construed to create a
4.5	separate private cause of action against a hospital, a hospital employee, or an individual
4.6	with whom a hospital has a contractual relationship, or to otherwise supersede or replace
4.7	existing duties, rights, or remedies under any other provision of state or federal law. This
4.8	section does not establish a separate standard of care for use in an action against a hospital,
4.9	health care facility, or health care provider.
4.10	(b) Nothing is this section shall be construed to require a patient or a patient's agent
4.11	to designate a caregiver.
4.12	(c) Nothing in this section shall be construed to interfere with the powers of a health
4.13	care agent operating under a valid health care directive in compliance with chapter 145C.
4.14	EFFECTIVE DATE. This section is effective January 1, 2017.