SGS/NS

SENATE STATE OF MINNESOTA NINETY-SECOND SESSION

S.F. No. 3666

(SENATE AUTHORS: KORAN, Mathews, Eichorn, Dornink and Hoffman)

DATE	D-PG	OFFICIAL STATUS
03/02/2022	5186	Introduction and first reading
		Referred to Health and Human Services Finance and Policy
03/07/2022	5240	Author added Mathews
03/09/2022	5265	Author added Eichorn
03/10/2022	5289	Authors added Dornink; Hoffman

1.1	A bill for an act
1.2 1.3 1.4	relating to health; establishing a right for a patient or resident to choose to have a support person present while receiving care or services; proposing coding for new law in Minnesota Statutes, chapter 144.
1.5	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.6	Section 1. [144.6514] RIGHT OF PATIENTS TO SUPPORT PERSON.
1.7	Subdivision 1. Short title. This section may be cited as the "No Patient Left Alone Act."
1.8	Subd. 2. General rule. A provider must allow, at a minimum, one support person of the
1.9	patient's or resident's choice to be physically present while the patient is receiving care
1.10	services.
1.11	Subd. 3. Definitions. (a) For the purposes of this section, the following terms have the
1.12	meanings given.
1.13	(b) "Minor" means an individual who has not attained the age of 18 years, notwithstanding
1.14	any law to the contrary.
1.15	(c) "Patient" means an individual who is receiving care services from a provider.
1.16	(d) "Provider" means a licensed health care facility, nursing home, assisted living facility,
1.17	residential care home, organization, or corporation that is licensed, certified, or otherwise
1.18	authorized by the laws of this state to provide health care.
1.19	(e) "Resident" means an individual residing in a facility.
1.20	(f) "Support person" means an individual necessary to provide compassionate care to
1.21	the patient or resident, including but not limited to:

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2.1	<u>(1) an inc</u>	lividual requested to	o meet the physical	or mental needs of the pa	atient or resident;
2.2	<u>(2) indiv</u>	iduals requested in	end-of-life situati	ons;	
2.3	(3) a cler	gy member or lay j	person offering rel	igious or spiritual suppo	rt; or
2.4	(4) an ind	dividual providing	a service requeste	d by the patient or reside	ent. such as a
2.5	hairdresser o	· · · · · · · · · · · · · · · · · · ·			
2.6	Subd. 4.	Notice of rights. (a	a) A provider mus	t have written policies ar	nd procedures
2.7				upport person present du	
2.8				ssary or reasonable restric	
2.9	may place or	n access to the patie	ent or resident and	the reason for the restric	ction. A provider
2.10	must inform	each patient, resid	ent, or support per	rson, as appropriate, of th	ne patient's or
2.11	resident's rig	tto have a suppor	t person present, i	ncluding any restriction	on that right, and
2.12	must ensure	that a support perso	on enjoys full and	equal visitation privilege	s consistent with
2.13	patient prefe	rences and the prov	ider's policies and	procedures. A provider n	nust have written
2.14	policies and	procedures regardir	ng complaints and	the contact information for	or the individuals
2.15	tasked with	investigating violat	ions.		
2.16	(b) For th	e purposes of this s	ection, policies an	d procedures are subject	to the following:
2.17	(1) the su	pport person of a m	inor may not be su	bject to visitation hours,	unless otherwise
2.18	exempt unde	er subdivision 8;			
2.19	<u>(2) maxin</u>	num access to patie	ents, including by c	offering evening and wee	kend visits, must
2.20	be provided;	<u>-</u>			
2.21	(3) in end	d-of-life or nearing	end-of-life situati	ons, every effort should	be made for all
2.22	immediate fa	amily to be accomm	odated, in reasona	bly sized groups, with no	age restrictions;
2.23	(4) when	the parent or legal	guardian of a mir	or child is receiving care	e, the support
2.24	person must	be permitted to brir	ng the minor or min	nors in the event no child	care is available;
2.25	<u>(5) if lim</u>	itations are set on th	ne number of supp	ort persons allowed to be	present, a clergy
2.26	member or la	ay person offering r	eligious or spiritua	l support must be allowed	to be physically
2.27	present, in a	ddition to the numb	per of support pers	ons allowed;	
2.28	<u>(6) in the</u>	event of a pandem	nic, one or more w	ays for compassionate ca	are visitation,
2.29	including pe	rsonal contact, that	minimize the risk	of infection to patients ar	nd residents must
2.30	be identified	·			

 (7) when all feasible options for the physical presence of a support person have been exhausted, a virtual option must be required, unless otherwise exempt under subdivision 8; and (8) requiring medical interventions that permanently alter the individual or penetrate the skin or mucosa, including but not limited to vaccination and presterilized single-use needles, of the support person or the patient or resident is prohibited. Subd. 5. Limitation of rights, (a) A patient or resident is not required to waive the rights provided under this section. (b) A patient or resident is not required to consent to additional conditions, such as executing an advance directive or agreeing to a "do not resuscitate" or similar order as a condition of receiving visitation from a support person. (c) In the event a patient or resident is incapacitated or otherwise unable to communicate the patient's or resident's wishes and an individual provides an advance medical directive designating the individual as the patient's or resident's support person, durable power of attorney, or other term indicating the individual is authorized to exercise rights covered by this section on behalf of the patient or resident's support person rights on the patient's or resident's behalf. (d) The rights specified in this section may not be terminated, suspended, or waived by the provider, the Department of Health, or any governmental entity, notwithstanding declarations of emergency declared by the governor or the legislature. Subd. 6. Violations; penalties. Any provider who knowingly or willfully violates this section is subject to a civil penalty of \$500 per day of violation. Subd. 7. Liability of provider, Unless expressly required by federal law or regulation, no action shall be taken against a provider for: (1) giving a support person access to a provider's facility; (2) failing to protect or otherwise ensure the safety or comfort of a support person given ac	
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guidelines that require or recommend restricting support person access; or	(3) choosing not follow the Centers for Disease Control and Prevention or other national
	guidelines that require or recommend restricting support person access; or
(4) the acts or omissions of any support person who is given access to a provider's facility.	(4) the acts or omissions of any support person who is given access to a provider's facility.

02/23/22 REVISOR SGS/NS 22-06341 as intro

4.1	Subd. 8. Exemption. (a) Facilities are not required to allow a support person to enter
4.2	an operating room, isolation room, isolation unit, behavioral health setting, or other typically
4.3	restricted area or to remain present during the administration of emergency care in critical
4.4	situations.
4.5	(b) Facilities are not required to allow a support person access beyond the rooms, units,
4.6	or wards in which the patient or resident the support person is visiting is receiving care or
4.7	beyond general common areas in the provider's facility.
4.8	(c) Support person access may be restricted:
4.9	(1) at the request of the patient, resident, or a law enforcement agency;
4.10	(2) due to a court order;
4.11	(3) if the support person has symptoms of a transmissible infection;
4.12	(4) if the support person is determined to be a danger to the patient or in cases of (4)
4.13	suspected abuse;
4.14	(5) if support persons are engaging in disruptive, threatening, or violent behavior toward
4.15	any staff member, patient, or other visitor; or
4.16	(6) if support persons are noncompliant with hospital policy.