J3 7lr1790 CF HB 808

By: Senators Benson, Currie, Guzzone, Kagan, Lee, Muse, Salling, Smith, and Young

Introduced and read first time: February 3, 2017

Assigned to: Finance

A BILL ENTITLED

	A TAT	AOM	•
L	AN	ACT	concerning

2

Hospitals - Patient's Bill of Rights

- 3 FOR the purpose of requiring each administrator of a hospital to provide patients with a 4 certain patient's bill of rights; requiring each administrator of a hospital to provide 5 certain patients with a translator or an interpreter to provide certain assistance to 6 the patients; requiring each administrator of a hospital to conspicuously post copies 7 of the patient's bill of rights on the hospital's Web site and in certain areas of the 8 hospital; requiring each administrator of a hospital to provide annual training to 9 certain staff to ensure the staff's knowledge and understanding of the patient's bill 10 of rights; requiring a certain statement to be written in plain language; altering the 11 rights that must be included in the patient's bill of rights; declaring the intent of the 12 General Assembly; defining a certain term; and generally relating to hospitals and 13 patient's bills of rights.
- 14 BY repealing and reenacting, with amendments,
- 15 Article Health General
- 16 Section 19–342
- 17 Annotated Code of Maryland
- 18 (2015 Replacement Volume and 2016 Supplement)
- 19 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
- 20 That the Laws of Maryland read as follows:
- 21 Article Health General
- 22 19–342.
- 23 (A) IN THIS SECTION, "PATIENT" INCLUDES AN INPATIENT, AN OUTPATIENT,
- 24 AND AN EMERGENCY SERVICES PATIENT.

- 1 (B) THE GENERAL ASSEMBLY INTENDS TO PROMOTE THE HEALTH, SAFETY,
- 2 AND WELL-BEING OF PATIENTS AND TO FOSTER BETTER COMMUNICATION
- 3 BETWEEN PATIENTS AND HEALTH CARE PROVIDERS IN HOSPITALS THROUGH THE
- 4 USE OF A PATIENT'S BILL OF RIGHTS THAT REQUIRES THE ETHICAL AND HUMANE
- 5 TREATMENT OF PATIENTS BY HOSPITALS.
- 6 [(a)] (C) Each administrator of a hospital [is responsible for making available] 7 SHALL:
- 8 (1) PROVIDE to each patient in the hospital a WRITTEN copy of the 9 patient's bill of rights that [the]:
- 10 **(I) THE** hospital adopts under the Joint Commission on 11 Accreditation of Hospitals' guidelines; **AND**
- 12 (II) COMPLIES WITH SUBSECTION (D) OF THIS SECTION;
- 13 (2) If A PATIENT DOES NOT SPEAK ENGLISH, PROVIDE A
- 14 TRANSLATOR OR AN INTERPRETER TO ASSIST THE PATIENT IN UNDERSTANDING
- 15 AND EXERCISING THE RIGHTS INCLUDED IN THE PATIENT'S BILL OF RIGHTS;
- 16 (3) CONSPICUOUSLY POST COPIES OF THE PATIENT'S BILL OF RIGHTS
- 17 ON THE HOSPITAL'S WEB SITE AND IN AREAS OF THE HOSPITAL ACCESSIBLE BY
- 18 PATIENTS, INCLUDING IN THE ADMITTING OFFICE, PATIENT FLOORS, OUTPATIENT
- 19 DEPARTMENT, AND EMERGENCY SERVICES WAITING AREAS; AND
- 20 (4) PROVIDE ANNUAL TRAINING TO ALL PATIENT CARE STAFF TO
- 21 ENSURE THE STAFF'S KNOWLEDGE AND UNDERSTANDING OF THE PATIENT'S BILL
- 22 OF RIGHTS.
- [(b)] (D) The patient's bill of rights shall include a statement, WRITTEN IN
- 24 PLAIN LANGUAGE, that a patient has a right to [expect]:
- 25 (1) RECEIVE TREATMENT WITHOUT DISCRIMINATION AS TO RACE,
- 26 COLOR, RELIGION, SEX, NATIONAL ORIGIN, DISABILITY, SEXUAL ORIENTATION,
- 27 GENDER IDENTITY, AGE, OR SOURCE OF PAYMENT;
- 28 (2) RECEIVE CONSIDERATE, RESPECTFUL, AND COMPASSIONATE
- 29 CARE IN A CLEAN AND SAFE ENVIRONMENT FREE OF UNNECESSARY RESTRAINTS
- 30 AND FREE FROM ALL FORMS OF ABUSE, NEGLECT, OR MISTREATMENT;
- 31 (3) RECEIVE EMERGENCY CARE FOR ANY MEDICAL CONDITION THAT
- 32 WILL DETERIORATE FROM FAILURE TO PROVIDE PROMPT TREATMENT;

- 1 (4) BE INFORMED OF THE NAME AND POSITION OF THE DOCTOR WHO 2 WILL BE IN CHARGE OF THE PATIENT'S CARE IN THE HOSPITAL;
- 3 (5) KNOW THE NAMES, POSITIONS, AND FUNCTIONS OF ANY OTHER 4 HOSPITAL STAFF INVOLVED IN THE PATIENT'S CARE;
- 5 (6) RECEIVE COMPLETE AND CURRENT INFORMATION ABOUT THE 6 PATIENT'S DIAGNOSIS, TREATMENT, RISKS, AND PROGNOSIS;
- 7 (7) RECEIVE A PROMPT AND REASONABLE RESPONSE TO QUESTIONS 8 OR REQUESTS;
- 9 (8) RECEIVE ALL INFORMATION NEEDED TO GIVE INFORMED 10 CONSENT TO ANY PROPOSED PROCEDURE OR TREATMENT, INCLUDING:
- 11 (I) THE POSSIBLE RISKS AND BENEFITS OF THE PROPOSED 12 PROCEDURE OR TREATMENT; AND
- 13 (II) ALTERNATIVES TO THE PROPOSED PROCEDURE OR 14 TREATMENT;
- 15 (9) MAKE DECISIONS REGARDING THE HEALTH CARE RECOMMENDED 16 BY THE PHYSICIAN OR MEDICAL STAFF;
- 17 (10) (I) REFUSE TREATMENT, EXAMINATION, OR OBSERVATION BY 18 HOSPITAL STAFF WITHOUT FEAR OF REPRISAL; AND
- 19 (II) BE INFORMED OF POTENTIAL HEALTH CONSEQUENCES OF 20 REFUSING TREATMENT, EXAMINATION, OR OBSERVATION;
- 21 (11) (I) PARTICIPATE IN ALL DECISIONS ABOUT THE PATIENT'S 22 DISCHARGE FROM THE HOSPITAL; AND
- 23 (II) RECEIVE FROM THE HOSPITAL A WRITTEN DISCHARGE 24 PLAN AND WRITTEN DESCRIPTION OF HOW TO APPEAL THE DISCHARGE AND REMAIN 25 UNDER HOSPITAL CARE:
- 26 (12) (I) REFUSE TO TAKE PART IN RESEARCH;

BENEFITS OF THE RESEARCH; AND

29

27 (II) IN DECIDING WHETHER OR NOT TO PARTICIPATE IN A 28 RESEARCH STUDY, RECEIVE A FULL EXPLANATION OF THE POTENTIAL RISKS AND

- 1 (III) WITHDRAW FROM A RESEARCH STUDY AT ANY TIME 2 WITHOUT IMPACTING THE PATIENT'S ACCESS TO STANDARD CARE;
- 3 (13) (I) COMPLAIN OR FILE A GRIEVANCE ABOUT THE CARE AND
- 4 SERVICES THE PATIENT IS RECEIVING, WITHOUT FEAR OF REPRISAL, AND RECEIVE
- 5 A WRITTEN RESPONSE FROM THE HOSPITAL; AND
- 6 (II) IF THE PATIENT IS NOT SATISFIED WITH THE HOSPITAL'S
- 7 RESPONSE, COMPLAIN TO THE DEPARTMENT, WHICH WILL ADDRESS THE SPECIFIC
- 8 COMPLAINT IN WRITING;
- 9 (14) IF THE PATIENT IS ALONE IN THE HOSPITAL AND DISORIENTED OR
- 10 OTHERWISE INCAPACITATED, HAVE A CARE SITTER OR ATTENDANT ASSIGNED FROM
- 11 THE HOSPITAL STAFF WHILE A FAMILY MEMBER OR DESIGNEE IS BEING CONTACTED
- 12 TO ENSURE THE PATIENT'S SAFETY AND CONTINUED CARE BY THE MEDICAL STAFF
- 13 AT THE HOSPITAL;
- 14 (15) MAINTAIN PRIVACY AND DIGNITY WHILE IN THE HOSPITAL WITH
- 15 RESPECT TO THE PATIENT'S MEDICAL AND PERSONAL CARE, INCLUDING CASE
- 16 DISCUSSION, CONSULTATION, EXAMINATION, TREATMENT, AND PERSONAL
- 17 HYGIENE;
- 18 (16) (I) HAVE HOSPITAL STAFF MAINTAIN CONFIDENTIALITY OF
- 19 ALL PERSONAL AND MEDICAL INFORMATION AND RECORDS REGARDING THE
- 20 PATIENT'S CARE; AND
- 21 (II) APPROVE OR REFUSE THE RELEASE OF RECORDS TO
- 22 ANYONE OUTSIDE THE HOSPITAL;
- 23 (17) REVIEW THE PATIENT'S MEDICAL RECORDS WITHOUT CHARGE;
- 24 (18) (I) OBTAIN A COPY OF MEDICAL RECORDS FOR A REASONABLE
- 25 FEE SET BY THE HOSPITAL; OR
- 26 (II) IF THE PATIENT CANNOT AFFORD TO PAY A REASONABLE
- 27 FEE FOR A COPY OF MEDICAL RECORDS, RECEIVE A COPY OF MEDICAL RECORDS
- 28 WITHOUT CHARGE OR AT A NEGOTIATED FEE;
- 29 (19) RECEIVE A CLEAR AND UNDERSTANDABLE ITEMIZED BILL AND
- 30 EXPLANATION OF ALL CHARGES, REGARDLESS OF SOURCE OF PAYMENT;

- 1 (20) SPECIFY THOSE FAMILY MEMBERS AND OTHER ADULTS WHO ARE
 2 TO BE GIVEN PRIORITY TO VISIT THE PATIENT CONSISTENT WITH THE PATIENT'S
 3 ABILITY TO RECEIVE VISITORS;
- 4 (21) RECEIVE REASONABLE CONTINUITY OF CARE WITH RESPECT TO 5 STAFF ASSIGNMENT;
- 6 (22) OBTAIN ACCESS, IF NEEDED, TO A LANGUAGE ASSISTANCE 7 PROGRAM TO ENSURE FULL UNDERSTANDING OF AND ACCESSIBILITY TO THE 8 HOSPITAL'S SERVICES AND REASONABLE ACCOMMODATIONS; AND
- 9 **(23) EXPECT** and receive appropriate assessment, management, and treatment of pain as an integral component of the patient's care.
- SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2017.