

**Department of Legislative Services**  
Maryland General Assembly  
2017 Session

**FISCAL AND POLICY NOTE**  
**First Reader**

House Bill 808  
(Delegate K. Young, *et al.*)  
Health and Government Operations

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**Hospitals - Patient's Bill of Rights**

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This bill specifies that a hospital administrator *must* provide each patient with a *written* copy of the hospital's patient's bill of rights. The bill also substantially expands the rights that must be included in a hospital's patient's bill of rights. If a patient does not speak English, a translator or interpreter must be provided to assist a patient in understanding and exercising the rights included in the patient's bill of rights. Copies of the patient's bill of rights must be conspicuously posted on the hospital's website and in areas of the hospital accessible by patients. A hospital administrator must also provide annual training to all patient care staff to ensure the staff's knowledge of the patient's bill of rights.

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**Fiscal Summary**

**State Effect:** Potential minimal increase in general fund expenditures for some State hospital facilities to provide translators or interpreters. The bill is not anticipated to materially affect complaint or enforcement activity for the Office of Health Care Quality. Revenues are not affected.

**Local Effect:** None.

**Small Business Effect:** None.

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**Analysis**

**Current Law/Background:** Each hospital administrator is responsible for making available to each patient in the hospital a copy of the patient's bill of rights that the hospital adopts under Joint Commission on Accreditation of Hospitals' guidelines. The patient's bill of rights must include a statement that the patient has a right to expect and receive

appropriate assessment, management, and treatment of pain as an integral component of the patient's care.

According to the Maryland Hospital Association, each hospital has a patient's bill of rights in place that conforms to Joint Commission requirements, and the document is one of the first items reviewed by a surveyor during hospital licensure or compliance surveys.

**Additional Comments:** The University of Maryland Medical System (UMMS) expressed concerns with the potential impact of adding a right to participate in all decisions about the patient's discharge from the hospital, including receiving a written discharge plan and description of how to appeal discharge and remain under hospital care. In response to similar legislation in 2016, UMMS advised that only Medicare patients are provided information on how to appeal a discharge because the appeals are handled by Medicare's appeals system; approximately 2% of Medicare patients file appeals. To the extent that hospitals would be required to establish a discharge appeals system, patient lengths of stay may increase and hospitals may be unable to proceed with medically appropriate discharges. This may impose a significant operational and a potential fiscal impact on hospitals, which are now subject to global budgets under the all-payer model contract.

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## Additional Information

**Prior Introductions:** Similar legislation, SB 661 and HB 587 of 2016, received a hearing in the Senate Finance and House Health and Government Operations committees, respectively, but was subsequently withdrawn.

**Cross File:** SB 660 (Senator Benson, *et al.*) - Finance.

**Information Source(s):** Maryland Hospital Association; University of Maryland Medical System; Department of Health and Mental Hygiene; Department of Legislative Services

**Fiscal Note History:** First Reader - February 28, 2017  
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