

676--A

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I N S E N A T E

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Introduced by Sens. HANNON, SKELOS, SERINO, ADDABBO, AVELLA, CARLUCCI, DeFRANCISCO, GRIFFO, KRUEGER, LANZA, LATIMER, MARTINS, MONTGOMERY, PANEPINTO, ROBACH, SQUADRON, VALESKY -- read twice and ordered printed, and when printed to be committed to the Committee on Health -- reported favorably from said committee, ordered to first and second report, ordered to a third reading, amended and ordered reprinted, retaining its place in the order of third reading

AN ACT to amend the public health law, in relation to identification of caregivers

THE PEOPLE OF THE STATE OF NEW YORK, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

1 Section 1. The public health law is amended by adding a new article  
2 29-CCCC to read as follows:

3 ARTICLE 29-CCCC

4 CARE ACT (CAREGIVER ADVISE, RECORD AND ENABLE ACT)

5 SECTION 2994-HH. SHORT TITLE.

6 2994-II. DEFINITIONS.

7 2994-JJ. CAREGIVER; OPPORTUNITY TO IDENTIFY.

8 2994-KK. NOTICE TO IDENTIFIED CAREGIVER.

9 2994-LL. INSTRUCTION TO IDENTIFIED CAREGIVER.

10 2994-MM. EFFECT ON OTHER RIGHTS.

11 S 2994-HH. SHORT TITLE. THIS ARTICLE SHALL BE KNOWN AND MAY BE CITED  
12 AS THE "CARE ACT".

13 S 2994-II. DEFINITIONS. WHEN USED IN THIS ARTICLE, THE FOLLOWING  
14 WORDS OR PHRASES SHALL HAVE THE FOLLOWING MEANINGS:

15 1. "HOSPITAL" SHALL MEAN ANY "GENERAL HOSPITAL" AS DEFINED IN SECTION  
16 TWENTY-EIGHT HUNDRED ONE OF THIS CHAPTER.

17 2. "AFTER-CARE" SHALL MEAN ANY ASSISTANCE PROVIDED BY A CAREGIVER TO A  
18 PATIENT UNDER THIS ARTICLE AFTER THE PATIENT'S DISCHARGE FROM A HOSPITAL  
19 THAT IS RELATED TO THE PATIENT'S CONDITION AT THE TIME OF DISCHARGE.

EXPLANATION--Matter in ITALICS (underscored) is new; matter in brackets  
[ ] is old law to be omitted.

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1 SUCH ASSISTANCE SHALL INCLUDE, BUT IS NOT LIMITED TO, ASSISTING WITH  
2 BASIC ACTIVITIES OF DAILY LIVING (ADLS), INSTRUMENTAL ACTIVITIES OF  
3 DAILY LIVING (IADLS), AND OTHER TASKS AS DETERMINED TO BE APPROPRIATE BY  
4 THE DISCHARGING PHYSICIAN.

5 3. "CAREGIVER" SHALL MEAN ANY INDIVIDUAL DULY IDENTIFIED AS A CAREGIV-  
6 ER BY A PATIENT UNDER THIS ARTICLE WHO PROVIDES AFTER-CARE ASSISTANCE TO  
7 A PATIENT LIVING IN HIS OR HER RESIDENCE. AN IDENTIFIED CAREGIVER SHALL  
8 INCLUDE, BUT IS NOT LIMITED TO, A RELATIVE, PARTNER, FRIEND OR NEIGHBOR  
9 WHO HAS A SIGNIFICANT RELATIONSHIP WITH THE PATIENT.

10 4. "DISCHARGE" SHALL MEAN A PATIENT'S EXIT OR RELEASE FROM A HOSPITAL  
11 TO THE PATIENT'S RESIDENCE FOLLOWING AN INPATIENT ADMISSION.

12 5. "ENTRY" SHALL MEAN A PATIENT'S ADMISSION INTO A HOSPITAL FOR THE  
13 PURPOSES OF RECEIVING INPATIENT CARE.

14 6. "PATIENT" SHALL MEAN A PATIENT EIGHTEEN YEARS OF AGE OR OLDER.

15 7. "RESIDENCE" SHALL MEAN A DWELLING THAT THE PATIENT CONSIDERS TO BE  
16 HIS OR HER HOME. A "RESIDENCE" FOR THE PURPOSES OF THIS ARTICLE SHALL  
17 NOT INCLUDE ANY REHABILITATION FACILITY, HOSPITAL, NURSING HOME,  
18 ASSISTED LIVING FACILITY, GROUP HOME OR OTHER RESIDENTIAL HEALTH CARE  
19 FACILITY AS DEFINED IN SECTION TWENTY-EIGHT HUNDRED ONE OF THIS CHAPTER  
20 OR ANY INPATIENT FACILITY REGULATED BY THE OFFICE OF MENTAL HEALTH.

21 S 2994-JJ. CAREGIVER; OPPORTUNITY TO IDENTIFY. 1. A HOSPITAL SHALL  
22 PROVIDE EACH PATIENT OR, IF APPLICABLE, THE PATIENT'S LEGAL GUARDIAN  
23 WITH AT LEAST ONE OPPORTUNITY TO IDENTIFY AT LEAST ONE CAREGIVER UNDER  
24 THIS ARTICLE FOLLOWING THE PATIENT'S ENTRY INTO A HOSPITAL AND PRIOR TO  
25 THE PATIENT'S DISCHARGE OR TRANSFER TO ANOTHER FACILITY. THE HOSPITAL  
26 SHALL INFORM THE PATIENT THAT THE PURPOSE OF PROVIDING THE CAREGIVER'S  
27 IDENTITY IS TO INCLUDE THAT CAREGIVER IN DISCHARGE PLANNING AND SHARING  
28 OF POST-DISCHARGE CARE INFORMATION OR INSTRUCTION.

29 (A) IN THE EVENT THAT THE PATIENT IS UNCONSCIOUS OR OTHERWISE INCAPAC-  
30 ITATED UPON HIS OR HER ENTRY INTO A HOSPITAL, THE HOSPITAL SHALL PROVIDE  
31 SUCH PATIENT OR HIS/HER LEGAL GUARDIAN WITH AN OPPORTUNITY TO IDENTIFY A  
32 CAREGIVER FOLLOWING THE PATIENT'S RECOVERY OF HIS OR HER CONSCIOUSNESS  
33 OR CAPACITY.

34 (B) IN THE EVENT THAT THE PATIENT OR THE PATIENT'S LEGAL GUARDIAN  
35 DECLINES TO IDENTIFY A CAREGIVER UNDER THIS ARTICLE, THE HOSPITAL SHALL  
36 PROMPTLY DOCUMENT THIS IN THE PATIENT'S MEDICAL RECORD.

37 (C) THE HOSPITAL SHALL RECORD THE PATIENT'S IDENTIFICATION OF A CARE-  
38 GIVER IF GIVEN BY THE PATIENT OR LEGAL GUARDIAN, THE RELATIONSHIP OF THE  
39 IDENTIFIED CAREGIVER TO THE PATIENT, AND THE NAME, TELEPHONE NUMBER, AND  
40 ADDRESS OF THE PATIENT'S IDENTIFIED CAREGIVER IN THE PATIENT'S MEDICAL  
41 RECORD.

42 (D) A PATIENT MAY ELECT TO CHANGE HIS OR HER IDENTIFIED CAREGIVER AT  
43 ANY TIME, AND THE HOSPITAL MUST RECORD THIS CHANGE IN THE PATIENT'S  
44 MEDICAL RECORD.

45 (E) (I) THE HOSPITAL SHALL PROMPTLY REQUEST THE WRITTEN CONSENT OF THE  
46 PATIENT OR THE PATIENT'S LEGAL GUARDIAN TO RELEASE MEDICAL INFORMATION  
47 TO THE PATIENT'S DESIGNATED CAREGIVER FOLLOWING THE HOSPITAL'S ESTAB-  
48 LISHED PROCEDURE FOR RELEASING PERSONAL HEALTH INFORMATION AND IN  
49 COMPLIANCE WITH ALL STATE AND FEDERAL LAWS, INCLUDING THE FEDERAL HEALTH  
50 INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996 AS AMENDED, AND  
51 RELATED REGULATIONS.

52 (II) IF THE PATIENT OR THE PATIENT'S LEGAL GUARDIAN DECLINES TO  
53 CONSENT TO RELEASE MEDICAL INFORMATION TO THE PATIENT'S DESIGNATED CARE-  
54 GIVER, THE HOSPITAL SHALL NOT BE REQUIRED TO PROVIDE NOTICE TO THE CARE-  
55 GIVER UNDER SECTION TWENTY-NINE HUNDRED NINETY-FOUR-KK OF THIS ARTICLE

1 OR PROVIDE INFORMATION CONTAINED IN THE PATIENT'S DISCHARGE PLAN UNDER  
2 SECTION TWENTY-NINE HUNDRED NINETY-FOUR-LL OF THIS ARTICLE.

3 2. AN IDENTIFICATION OF A CAREGIVER BY A PATIENT OR A PATIENT'S LEGAL  
4 GUARDIAN UNDER THIS SECTION DOES NOT OBLIGATE ANY INDIVIDUAL TO PERFORM  
5 ANY AFTER-CARE TASKS FOR ANY PATIENT.

6 3. THIS SECTION SHALL NOT BE CONSTRUED TO REQUIRE A PATIENT OR A  
7 PATIENT'S LEGAL GUARDIAN TO IDENTIFY ANY INDIVIDUAL AS A CAREGIVER AS  
8 DEFINED BY THIS ARTICLE.

9 S 2994-KK. NOTICE TO IDENTIFIED CAREGIVER. A HOSPITAL SHALL NOTIFY THE  
10 PATIENT'S IDENTIFIED CAREGIVER OF THE PATIENT'S DISCHARGE OR TRANSFER TO  
11 ANOTHER HOSPITAL OR FACILITY LICENSED BY THE DEPARTMENT OR THE OFFICE OF  
12 MENTAL HEALTH AS SOON AS THE DATE AND TIME OF DISCHARGE OR TRANSFER CAN  
13 BE ANTICIPATED PRIOR TO THE PATIENT'S ACTUAL DISCHARGE OR TRANSFER TO  
14 SUCH FACILITY. IN THE EVENT THE HOSPITAL IS UNABLE TO CONTACT THE  
15 DESIGNATED CAREGIVER, THE LACK OF CONTACT SHALL NOT INTERFERE WITH,  
16 DELAY, OR OTHERWISE AFFECT THE MEDICAL CARE PROVIDED TO THE PATIENT OR  
17 AN APPROPRIATE DISCHARGE OF THE PATIENT. THE HOSPITAL SHALL PROMPTLY  
18 DOCUMENT THE ATTEMPT IN THE PATIENT'S MEDICAL RECORD.

19 S 2994-LL. INSTRUCTION TO IDENTIFIED CAREGIVER. 1. AS SOON AS POSSI-  
20 BLE AND NOT LATER THAN TWENTY-FOUR HOURS PRIOR TO A PATIENT'S DISCHARGE  
21 FROM A HOSPITAL, THE HOSPITAL SHALL CONSULT WITH THE IDENTIFIED CAREGIV-  
22 ER ALONG WITH THE PATIENT REGARDING THE CAREGIVER'S CAPABILITIES AND  
23 LIMITATIONS AND ISSUE A DISCHARGE PLAN THAT DESCRIBES A PATIENT'S  
24 AFTER-CARE NEEDS AT HIS OR HER RESIDENCE. IN THE EVENT THE HOSPITAL IS  
25 UNABLE TO CONTACT THE DESIGNATED CAREGIVER, THE LACK OF CONTACT SHALL  
26 NOT INTERFERE WITH, DELAY, OR OTHERWISE AFFECT THE MEDICAL CARE PROVIDED  
27 TO THE PATIENT OR AN APPROPRIATE DISCHARGE OF THE PATIENT. THE HOSPITAL  
28 SHALL PROMPTLY DOCUMENT THE ATTEMPT IN THE PATIENT'S MEDICAL RECORD. AT  
29 MINIMUM, A DISCHARGE PLAN SHALL INCLUDE:

30 (A) THE NAME AND CONTACT INFORMATION OF THE CAREGIVER IDENTIFIED UNDER  
31 THIS ARTICLE;

32 (B) A DESCRIPTION OF ALL AFTER-CARE TASKS RECOMMENDED BY THE DISCHARG-  
33 ING PHYSICIAN, TAKING INTO ACCOUNT THE CAPABILITIES AND LIMITATIONS OF  
34 THE CAREGIVER; AND

35 (C) CONTACT INFORMATION FOR HEALTH CARE, COMMUNITY RESOURCES, AND  
36 LONG-TERM SERVICES AND SUPPORTS NECESSARY TO SUCCESSFULLY CARRY OUT THE  
37 PATIENT'S DISCHARGE PLAN.

38 2. THE HOSPITAL ISSUING THE DISCHARGE PLAN MUST OFFER CAREGIVERS WITH  
39 INSTRUCTION IN ALL AFTER-CARE TASKS DESCRIBED IN THE DISCHARGE PLAN.

40 (A) AT MINIMUM, SUCH INSTRUCTION SHALL INCLUDE:

41 (I) A LIVE OR RECORDED DEMONSTRATION OF THE TASKS PERFORMED BY A  
42 HOSPITAL EMPLOYEE AUTHORIZED TO PERFORM THE AFTER-CARE TASK, PROVIDED IN  
43 A CULTURALLY COMPETENT MANNER AND IN ACCORDANCE WITH THE HOSPITAL'S  
44 REQUIREMENTS TO PROVIDE LANGUAGE ACCESS SERVICES UNDER STATE AND FEDERAL  
45 LAW;

46 (II) AN OPPORTUNITY FOR THE CAREGIVER AND PATIENT TO ASK QUESTIONS  
47 ABOUT THE AFTER-CARE TASKS; AND

48 (III) ANSWERS TO THE CAREGIVER'S AND PATIENT'S QUESTIONS PROVIDED IN A  
49 CULTURALLY COMPETENT MANNER AND IN ACCORDANCE WITH THE HOSPITAL'S  
50 REQUIREMENTS TO PROVIDE LANGUAGE ACCESS SERVICES UNDER STATE AND FEDERAL  
51 LAW.

52 (B) ANY INSTRUCTIONS REQUIRED UNDER THIS ARTICLE SHALL BE DOCUMENTED  
53 IN THE PATIENT'S MEDICAL RECORD, INCLUDING, AT MINIMUM, THE DATE, TIME,  
54 AND CONTENTS OF THE INSTRUCTION.

55 3. THE DEPARTMENT IS AUTHORIZED TO PROMULGATE REGULATIONS TO IMPLEMENT  
56 THE PROVISIONS OF THIS ARTICLE, INCLUDING BUT NOT LIMITED TO, REGU-

1 LATIONS TO FURTHER DEFINE THE CONTENT AND SCOPE OF ANY INSTRUCTION  
2 PROVIDED TO CAREGIVERS UNDER THIS ARTICLE.

3 S 2994-MM. EFFECT ON OTHER RIGHTS. 1. NOTHING IN THIS ARTICLE SHALL BE  
4 CONSTRUED TO INTERFERE WITH THE RIGHTS OF AN AGENT OPERATING UNDER A  
5 VALID HEALTH CARE DIRECTIVE CREATED UNDER SECTION TWENTY-NINE HUNDRED  
6 EIGHTY-TWO OF THIS CHAPTER.

7 2. NOTHING IN THIS ARTICLE SHALL BE CONSTRUED TO CREATE A PRIVATE  
8 RIGHT OF ACTION AGAINST A HOSPITAL OR ANY OF ITS DIRECTORS, TRUSTEES,  
9 OFFICERS, EMPLOYEES OR AGENTS, OR ANY CONTRACTORS WITH WHOM A HOSPITAL  
10 HAS A CONTRACTUAL RELATIONSHIP.

11 3. A HOSPITAL, ANY OF ITS DIRECTORS, TRUSTEES, OFFICERS, EMPLOYEES OR  
12 AGENTS, OR ANY CONTRACTORS WITH WHOM A HOSPITAL HAS A CONTRACTUAL  
13 RELATIONSHIP SHALL NOT BE HELD LIABLE, IN ANY WAY, FOR THE SERVICES  
14 RENDERED OR NOT RENDERED BY THE CAREGIVER TO THE PATIENT AT THE  
15 PATIENT'S RESIDENCE.

16 S 2. This act shall take effect on the one hundred eightieth day after  
17 it shall have become a law.