676

2015-2016 Regular Sessions

IN SENATE

(PREFILED)

January 7, 2015

Introduced by Sen. HANNON -- read twice and ordered printed, and when printed to be committed to the Committee on Health

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 ASSEM-BLY, DO ENACT AS FOLLOWS:

Section 1. The public health law is amended by adding a new article 1 2 29-CCCC to read as follows: 3

ARTICLE 29-CCCC

CARE ACT (CAREGIVER ADVISE, RECORD AND ENABLE ACT)

SECTION 2994-HH. SHORT TITLE. 5 6

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2994-II. DEFINITIONS.

2994-JJ. CAREGIVER; OPPORTUNITY TO IDENTIFY.

2994-KK. NOTICE TO IDENTIFIED CAREGIVER.

2994-LL. INSTRUCTION TO IDENTIFIED CAREGIVER.

2994-MM. EFFECT ON OTHER RIGHTS.

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

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

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

17 2. "AFTER-CARE" SHALL MEAN ANY ASSISTANCE PROVIDED BY A CAREGIVER TO A PATIENT UNDER THIS ARTICLE AFTER THE PATIENT'S DISCHARGE FROM A HOSPI-18 19 TAL. SUCH ASSISTANCE SHALL INCLUDE, BUT IS NOT LIMITED TO, ASSISTING WITH BASIC ACTIVITIES OF DAILY LIVING (ADLS), INSTRUMENTAL ACTIVITIES OF 20 21 DAILY LIVING (IADLS) OR CARRYING OUT MEDICAL/NURSING TASKS, SUCH AS 22 MANAGING WOUND CARE, ASSISTING IN ADMINISTERING MEDICATIONS AND OPERAT-ING MEDICAL EOUIPMENT. 23

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

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6 4. "DISCHARGE" SHALL MEAN A PATIENT'S EXIT OR RELEASE FROM A HOSPITAL
7 TO THE PATIENT'S RESIDENCE FOLLOWING ANY MEDICAL CARE, TREATMENT OR
8 OBSERVATION.

9 5. "ENTRY" SHALL MEAN A PATIENT'S ADMISSION INTO A HOSPITAL FOR THE 10 PURPOSES OF MEDICAL CARE.

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

S 2994-JJ. CAREGIVER; OPPORTUNITY TO IDENTIFY. 1. A HOSPITAL SHALL PROVIDE EACH PATIENT OR, IF APPLICABLE, THE PATIENT'S LEGAL GUARDIAN 17 18 19 WITH AT LEAST ONE OPPORTUNITY TO IDENTIFY AT LEAST ONE CAREGIVER UNDER 20 THIS ARTICLE NO LATER THAN TWENTY-FOUR HOURS FOLLOWING THE PATIENT'S 21 ENTRY INTO A HOSPITAL AND PRIOR TO THE PATIENT'S ENTRY INTO A HOSPITAL 22 AND PRIOR TO THE PATIENT'S DISCHARGE OR TRANSFER TO ANOTHER FACILITY. THE HOSPITAL SHALL INFORM THE PATIENT THAT THE PURPOSE OF PROVIDING THE 23 CAREGIVER'S IDENTITY IS TO INCLUDE THAT CAREGIVER IN DISCHARGE PLANNING 24 25 AND SHARING OF POST-DISCHARGE CARE INFORMATION OR INSTRUCTION.

26 (A) IN THE EVENT THAT THE PATIENT IS UNCONSCIOUS OR OTHERWISE INCAPAC27 ITATED UPON HIS OR HER ENTRY INTO A HOSPITAL, THE HOSPITAL SHALL PROVIDE
28 SUCH PATIENT OR HIS/HER LEGAL GUARDIAN WITH AN OPPORTUNITY TO IDENTIFY A
29 CAREGIVER WITHIN TWENTY-FOUR HOURS FOLLOWING THE PATIENT'S RECOVERY OF
30 HIS OR HER CONSCIOUSNESS OR CAPACITY.

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

34 (C) THE HOSPITAL SHALL RECORD THE PATIENT'S IDENTIFICATION OF A CARE35 GIVER, THE RELATIONSHIP OF THE IDENTIFIED CAREGIVER TO THE PATIENT, AND
36 THE NAME, TELEPHONE NUMBER, AND ADDRESS OF THE PATIENT'S IDENTIFIED
37 CAREGIVER IN THE PATIENT'S MEDICAL RECORD.

38 (D) A PATIENT MAY ELECT TO CHANGE HIS OR HER IDENTIFIED CAREGIVER AT 39 ANY TIME, AND THE HOSPITAL MUST RECORD THIS CHANGE IN THE PATIENT'S 40 MEDICAL RECORD WITHIN TWENTY-FOUR HOURS.

41 (E) PRIOR TO NOTIFYING THE PATIENT'S CAREGIVER OF THE PATIENT'S 42 DISCHARGE OR TRANSFER TO ANOTHER HOSPITAL OR FACILITY AS REQUIRED UNDER 43 SECTION TWENTY-NINE HUNDRED NINETY-FOUR-KK OF THIS ARTICLE, THE HOSPITAL 44 SHALL ASK THE PATIENT TO VERIFY THE PATIENT'S CAREGIVER CHOICE AND 45 PROVIDE THE PATIENT THE OPPORTUNITY TO CHANGE HIS OR HER IDENTIFIED 46 CAREGIVER.

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

50 3. THIS SECTION SHALL NOT BE CONSTRUED TO REQUIRE A PATIENT OR A 51 PATIENT'S LEGAL GUARDIAN TO IDENTIFY ANY INDIVIDUAL AS A CAREGIVER AS 52 DEFINED BY THIS ARTICLE.

53 S 2994-KK. NOTICE TO IDENTIFIED CAREGIVER. A HOSPITAL SHALL NOTIFY THE 54 PATIENT'S IDENTIFIED CAREGIVER OF THE PATIENT'S DISCHARGE OR TRANSFER TO 55 ANOTHER HOSPITAL OR FACILITY LICENSED BY THE DEPARTMENT OR THE OFFICE OF 56 MENTAL HEALTH AS SOON AS THE DATE AND TIME OF DISCHARGE OR TRANSFER CAN

BE ANTICIPATED PRIOR TO THE PATIENT'S ACTUAL DISCHARGE OR TRANSFER TO 1 2 SUCH FACILITY. 3 S 2994-LL. INSTRUCTION TO IDENTIFIED CAREGIVER. 1. AS SOON AS POSSI-4 BLE AND NOT LATER THAN TWENTY-FOUR HOURS PRIOR TO A PATIENT'S DISCHARGE 5 FROM A HOSPITAL, THE HOSPITAL SHALL CONSULT WITH THE IDENTIFIED CAREGIV-6 ALONG WITH THE PATIENT REGARDING THE CAREGIVER'S CAPABILITIES AND ER 7 LIMITATIONS AND ISSUE A DISCHARGE PLAN THAT DESCRIBES A PATIENT'S 8 AFTER-CARE NEEDS AT HIS OR HER RESIDENCE. AT MINIMUM, A DISCHARGE PLAN 9 SHALL INCLUDE: 10 (A) THE NAME AND CONTACT INFORMATION OF THE CAREGIVER IDENTIFIED UNDER 11 THIS ARTICLE; 12 (B) A DESCRIPTION OF ALL AFTER-CARE TASKS NECESSARY TO MAINTAIN THE PATIENT'S ABILITY TO RESIDE AT HOME, TAKING INTO ACCOUNT THE CAPABILI-13 14 TIES AND LIMITATIONS OF THE CAREGIVER; AND 15 (C) CONTACT INFORMATION FOR ANY HEALTH CARE, COMMUNITY RESOURCES, AND 16 LONG-TERM SERVICES AND SUPPORTS NECESSARY TO SUCCESSFULLY CARRY OUT THE 17 PATIENT'S DISCHARGE PLAN. 2. THE HOSPITAL ISSUING THE DISCHARGE PLAN MUST OFFER CAREGIVERS 18 WITH 19 INSTRUCTION IN ALL AFTER-CARE TASKS DESCRIBED IN THE DISCHARGE PLAN. (A) AT MINIMUM, SUCH INSTRUCTION SHALL INCLUDE: 20 21 (I) A LIVE DEMONSTRATION OF THE TASKS PERFORMED BY A HOSPITAL EMPLOYEE 22 AUTHORIZED TO PERFORM THE AFTER-CARE TASK, PROVIDED IN A CULTURALLY 23 COMPETENT MANNER AND IN ACCORDANCE WITH THE HOSPITAL'S REQUIREMENTS TO 24 PROVIDE LANGUAGE ACCESS SERVICES UNDER STATE AND FEDERAL LAW; 25 (II) AN OPPORTUNITY FOR THE CAREGIVER AND PATIENT TO ASK QUESTIONS 26 ABOUT THE AFTER-CARE TASKS; AND (III) ANSWERS TO THE CAREGIVER'S AND PATIENT'S QUESTIONS PROVIDED IN A 27 CULTURALLY COMPETENT MANNER AND IN ACCORDANCE WITH THE HOSPITAL'S 28 29 REOUIREMENTS TO PROVIDE LANGUAGE ACCESS SERVICES UNDER STATE AND FEDERAL 30 LAW. ANY INSTRUCTIONS REQUIRED UNDER THIS ARTICLE SHALL BE DOCUMENTED 31 (B) 32 IN THE PATIENT'S MEDICAL RECORD, INCLUDING, AT MINIMUM, THE DATE, TIME, 33 AND CONTENTS OF THE INSTRUCTION. 34 3. THE DEPARTMENT IS AUTHORIZED TO PROMULGATE REGULATIONS TO IMPLEMENT 35 THE PROVISIONS OF THIS ARTICLE, INCLUDING BUT NOT LIMITED TO, REGU-LATIONS TO FURTHER DEFINE THE CONTENT AND SCOPE OF ANY INSTRUCTION 36 37 PROVIDED TO CAREGIVERS UNDER THIS ARTICLE. 38 2994-MM. EFFECT ON OTHER RIGHTS. NOTHING IN THIS ARTICLE SHALL BE S 39 CONSTRUED TO INTERFERE WITH THE RIGHTS OF AN AGENT OPERATING UNDER A 40 VALID HEALTH CARE DIRECTIVE CREATED UNDER SECTION TWENTY-NINE HUNDRED EIGHTY-TWO OF THIS CHAPTER. 41 42 S 2. This act shall take effect immediately.