Sub. H.B. 33 As Passed by the Senate DOHCD36

_____ moved to amend as follows:

In line 111 of the title, after "3721.026," insert "3721.13,	1
3721.16, 3721.161, 3721.162"	2
In line 844, after "3721.026," insert "3721.13, 3721.16,	3
3721.161, 3721.162"	4
After line 65546, insert:	5
"Sec. 3721.13. (A) The rights of residents of a home shall	6
include, but are not limited to, the following:	7
(1) The right to a safe and clean living environment pursuant	8
to the medicare and medicaid programs and applicable state laws	9
and rules adopted by the director of health;	10
(2) The right to be free from physical, verbal, mental, and	11
emotional abuse and to be treated at all times with courtesy,	12
respect, and full recognition of dignity and individuality;	13
(3) Upon admission and thereafter, the right to adequate and	14
appropriate medical treatment and nursing care and to other	15
ancillary services that comprise necessary and appropriate care	16
consistent with the program for which the resident contracted.	17
This care shall be provided without regard to considerations such	18
as race, color, religion, national origin, age, or source of	19

pavment	for	care

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(4) The right to have all reasonable requests and inquiries 21
responded to promptly;

- (5) The right to have clothes and bed sheets changed as the 23 need arises, to ensure the resident's comfort or sanitation; 24
- (6) The right to obtain from the home, upon request, the name 25 and any specialty of any physician or other person responsible for 26 the resident's care or for the coordination of care; 27
- (7) The right, upon request, to be assigned, within the 28 capacity of the home to make the assignment, to the staff 29 physician of the resident's choice, and the right, in accordance 30 with the rules and written policies and procedures of the home, to 31 select as the attending physician a physician who is not on the 32 staff of the home. If the cost of a physician's services is to be 33 met under a federally supported program, the physician shall meet 34 the federal laws and regulations governing such services. 35
- (8) The right to participate in decisions that affect the 36 resident's life, including the right to communicate with the 37 physician and employees of the home in planning the resident's 38 treatment or care and to obtain from the attending physician 39 complete and current information concerning medical condition, 40 prognosis, and treatment plan, in terms the resident can 41 reasonably be expected to understand; the right of access to all 42 information in the resident's medical record; and the right to 43 give or withhold informed consent for treatment after the 44 consequences of that choice have been carefully explained. When 45 the attending physician finds that it is not medically advisable 46 to give the information to the resident, the information shall be 47 made available to the resident's sponsor on the resident's behalf, 48 if the sponsor has a legal interest or is authorized by the 49

resident to receive the information. The home is not liable for a	50
violation of this division if the violation is found to be the	51
result of an act or omission on the part of a physician selected	52
by the resident who is not otherwise affiliated with the home.	53
by the resident who is not otherwise arrithated with the home.	
(9) The right to withhold payment for physician visitation if	54
the physician did not visit the resident;	55
(10) The right to confidential treatment of personal and	56
medical records, and the right to approve or refuse the release of	57
these records to any individual outside the home, except in case	58
of transfer to another home, hospital, or health care system, as	59
required by law or rule, or as required by a third-party payment	60
contract;	61
(11) The right to privacy during medical examination or	62
treatment and in the care of personal or bodily needs;	63
(12) The right to refuse, without jeopardizing access to	64
appropriate medical care, to serve as a medical research subject;	65
(13) The right to be free from physical or chemical	66
restraints or prolonged isolation except to the minimum extent	67
necessary to protect the resident from injury to self, others, or	68
to property and except as authorized in writing by the attending	69
physician for a specified and limited period of time and	70
documented in the resident's medical record. Prior to authorizing	71
the use of a physical or chemical restraint on any resident, the	72
attending physician shall make a personal examination of the	73
resident and an individualized determination of the need to use	74
the restraint on that resident.	75
Physical or chemical restraints or isolation may be used in	76
an emergency situation without authorization of the attending	77

physician only to protect the resident from injury to self or

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others. Use of the physical or chemical restraints or isolation	79
shall not be continued for more than twelve hours after the onset	80
of the emergency without personal examination and authorization by	81
the attending physician. The attending physician or a staff	82
physician may authorize continued use of physical or chemical	83
restraints for a period not to exceed thirty days, and at the end	84
of this period and any subsequent period may extend the	85
authorization for an additional period of not more than thirty	86
days. The use of physical or chemical restraints shall not be	87
continued without a personal examination of the resident and the	88
written authorization of the attending physician stating the	89
reasons for continuing the restraint.	90
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If physical or chemical restraints are used under this

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division, the home shall ensure that the restrained resident

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receives a proper diet. In no event shall physical or chemical

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restraints or isolation be used for punishment, incentive, or

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convenience.

- (14) The right to the pharmacist of the resident's choice and
 the right to receive pharmaceutical supplies and services at
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 reasonable prices not exceeding applicable and normally accepted
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 prices for comparably packaged pharmaceutical supplies and
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 services within the community;
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- (15) The right to exercise all civil rights, unless the 101 resident has been adjudicated incompetent pursuant to Chapter 102 2111. of the Revised Code and has not been restored to legal 103 capacity, as well as the right to the cooperation of the home's 104 administrator in making arrangements for the exercise of the right 105 to vote; 106
- (16) The right of access to opportunities that enable the 107 resident, at the resident's own expense or at the expense of a 108

third-party payer, to achieve the resident's fullest potential,	109
including educational, vocational, social, recreational, and	110
habilitation programs;	111
(17) The right to consume a reasonable amount of alcoholic	112
beverages at the resident's own expense, unless not medically	113
advisable as documented in the resident's medical record by the	114
attending physician or unless contradictory to written admission	115
policies;	116
(18) The right to use tobacco at the resident's own expense	117
under the home's safety rules and under applicable laws and rules	118
of the state, unless not medically advisable as documented in the	119
resident's medical record by the attending physician or unless	120
contradictory to written admission policies;	121
(19) The right to retire and rise in accordance with the	122
resident's reasonable requests, if the resident does not disturb	123
others or the posted meal schedules and upon the home's request	124
remains in a supervised area, unless not medically advisable as	125
documented by the attending physician;	126
(20) The right to observe religious obligations and	127
participate in religious activities; the right to maintain	128
individual and cultural identity; and the right to meet with and	129
participate in activities of social and community groups at the	130
resident's or the group's initiative;	131
(21) The right upon reasonable request to private and	132
unrestricted communications with the resident's family, social	133
worker, and any other person, unless not medically advisable as	134
documented in the resident's medical record by the attending	135
physician, except that communications with public officials or	136
with the resident's attorney or physician shall not be restricted.	137

Private and unrestricted communications shall include, but are not

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limited to, the right to:	139
(a) Receive, send, and mail sealed, unopened correspondence;	140
(b) Reasonable access to a telephone for private	141
communications;	142
(c) Private visits at any reasonable hour.	143
(22) The right to assured privacy for visits by the spouse,	144
or if both are residents of the same home, the right to share a	145
room within the capacity of the home, unless not medically	146
advisable as documented in the resident's medical record by the	147
attending physician;	148
(23) The right upon reasonable request to have room doors	149
closed and to have them not opened without knocking, except in the	150
case of an emergency or unless not medically advisable as	151
documented in the resident's medical record by the attending	152
physician;	153
(24) The right to retain and use personal clothing and a	154
reasonable amount of possessions, in a reasonably secure manner,	155
unless to do so would infringe on the rights of other residents or	156
would not be medically advisable as documented in the resident's	157
medical record by the attending physician;	158
(25) The right to be fully informed, prior to or at the time	159
of admission and during the resident's stay, in writing, of the	160
basic rate charged by the home, of services available in the home,	161
and of any additional charges related to such services, including	162
charges for services not covered under the medicare or medicaid	163
program. The basic rate shall not be changed unless thirty days'	164
notice is given to the resident or, if the resident is unable to	165
understand this information, to the resident's sponsor.	166
(26) The right of the resident and person paying for the care	167

to examine and receive a bill at least monthly for the resident's	168
care from the home that itemizes charges not included in the basic	169
rates;	170
(27)(a) The right to be free from financial exploitation;	171
(b) The right to manage the resident's own personal financial	172
affairs, or, if the resident has delegated this responsibility in	173
writing to the home, to receive upon written request at least a	174
quarterly accounting statement of financial transactions made on	175
the resident's behalf. The statement shall include:	176
(i) A complete record of all funds, personal property, or	177
possessions of a resident from any source whatsoever, that have	178
been deposited for safekeeping with the home for use by the	179
resident or the resident's sponsor;	180
(ii) A listing of all deposits and withdrawals transacted,	181
which shall be substantiated by receipts which shall be available	182
for inspection and copying by the resident or sponsor.	183
(28) The right of the resident to be allowed unrestricted	184
access to the resident's property on deposit at reasonable hours,	185
unless requests for access to property on deposit are so	186
persistent, continuous, and unreasonable that they constitute a	187
nuisance;	188
(29) The right to receive reasonable notice before the	189
resident's room or roommate is changed, including an explanation	190
of the reason for either change.	191
(30) The right not to be transferred or discharged from the	192
home unless the transfer is necessary because of one of the	193
following:	194
(a) The welfare and needs of the resident cannot be met in	195
the home.	196

(b) The resident's health has improved sufficiently so that	197
the resident no longer needs the services provided by the home.	198
(c) The safety of individuals in the home is endangered.	199
(d) The health of individuals in the home would otherwise be	200
endangered.	201
(e) The resident has failed, after reasonable and appropriate	202
notice, to pay or to have the medicare or medicaid program pay on	203
the resident's behalf, for the care provided by the home. A	204
resident shall not be considered to have failed to have the	205
resident's care paid for if the resident has applied for medicaid,	206
unless both of the following are the case:	207
(i) The resident's application, or a substantially similar	208
previous application, has been denied.	209
(ii) If the resident appealed the denial, the denial was	210
upheld.	211
(f) The home's license has been revoked, the home is being	212
closed pursuant to section 3721.08, sections 5165.60 to 5165.89,	213
or section 5155.31 of the Revised Code, or the home otherwise	214
ceases to operate.	215
(g) The resident is a recipient of medicaid, and the home's	216
participation in the medicaid program is involuntarily terminated	217
or denied.	218
(h) The resident is a beneficiary under the medicare program,	219
and the home's participation in the medicare program is	220
involuntarily terminated or denied.	221
(31) The right not to be transferred or discharged from the	222
home to a location that is incapable of meeting the resident's	223
health care and safety needs.	224

(32) The right not to be transferred or discharged from the	225
home without adequate preparation prior to the transfer or	226
discharge to ensure a safe and orderly transfer or discharge from	227
the home, including proper arrangements for medication, equipment,	228
health care services, and other necessary services.	229
(33) All rights provided under 42 C.F.R. 483.15 and 483.21	230
and any other transfer or discharge rights provided under federal	231
law.	232
(34) The right to voice grievances and recommend changes in	233
policies and services to the home's staff, to employees of the	234
department of health, or to other persons not associated with the	235
operation of the home, of the resident's choice, free from	236
restraint, interference, coercion, discrimination, or reprisal.	237
This right includes access to a residents' rights advocate, and	238
the right to be a member of, to be active in, and to associate	239
with persons who are active in organizations of relatives and	240
friends of nursing home residents and other organizations engaged	241
in assisting residents.	242
$\frac{(32)}{(35)}$ The right to have any significant change in the	243
resident's health status reported to the resident's sponsor. As	244
soon as such a change is known to the home's staff, the home shall	245
make a reasonable effort to notify the sponsor within twelve	246
hours.	247
(33)(36) The right, if the resident has requested the care	248
and services of a hospice care program, to choose a hospice care	249
program licensed under Chapter 3712. of the Revised Code that best	250
meets the resident's needs.	251
(B) A sponsor may act on a resident's behalf to assure that	252
the home does not deny the residents' rights under sections	253
3721.10 to 3721.17 of the Revised Code.	254

(C) Any attempted waiver of the rights listed in division (A)	255
of this section is void.	256
Sec. 3721.16. For each resident of a home, notice of all of	257
the following apply with respect to a proposed transfer or	258
discharge shall be in accordance with this section. from the home:	259
(A)(1) The administrator of a home shall notify a resident in	260
writing, and the resident's sponsor in writing by certified mail,	261
return receipt requested, in advance of any proposed transfer or	262
discharge from the home. The administrator shall send a copy of	263
the notice to the state department of health. The notice shall be	264
provided at least thirty days in advance of the proposed transfer	265
or discharge, unless any of the following applies:	266
(a) The resident's health has improved sufficiently to allow	267
a more immediate discharge or transfer to a less skilled level of	268
care;	269
(b) The resident has resided in the home less than thirty	270
days;	271
(c) An emergency arises in which the safety of individuals in	272
the home is endangered;	273
(d) An emergency arises in which the health of individuals in	274
the home would otherwise be endangered;	275
(e) An emergency arises in which the resident's urgent	276
medical needs necessitate a more immediate transfer or discharge.	277
In any of the circumstances described in divisions (A)(1)(a)	278
to (e) of this section, the notice shall be provided as many days	279
in advance of the proposed transfer or discharge as is	280
practicable.	281
(2) The notice required under division (A)(1) of this section	282

shall include all of the following:	283
(a) The reasons for the proposed transfer or discharge;	284
(b) The proposed date the resident is to be transferred or discharged;	285 286
(c) Subject to division (A)(3) of this section, a proposed location to which the resident may relocate and a notice that the resident and resident's sponsor may choose another location to which the resident will relocate;	287 288 289 290
(d) Notice of the right of the resident and the resident's sponsor to an impartial hearing at the home on the proposed transfer or discharge, and of the manner in which and the time within which the resident or sponsor may request a hearing pursuant to section 3721.161 of the Revised Code;	291 292 293 294 295
(e) A statement that the resident will not be transferred or discharged before the date specified in the notice unless the home and the resident or, if the resident is not competent to make a decision, the home and the resident's sponsor, agree to an earlier date;	296 297 298 299 300
(f) The address of the legal services office of the department of health;	301 302
(g) The name, address, and telephone number of a representative of the state long-term care ombudsman program and, if the resident or patient has a developmental disability or mental illness, the name, address, and telephone number of the Ohio protection and advocacy system.	303 304 305 306 307
(3) The proposed location to which a resident may relocate as specified pursuant to division (A)(2)(c) of this section in the proposed transfer or discharge notice shall be capable of meeting the resident's health-care and safety needs. The proposed location	308 309 310

for relocation need not have accepted the resident at the time the	312
notice is issued to the resident and resident's sponsor.	313
(B) No home shall transfer or discharge a resident before the	314
date specified in the notice required by division (A) of this	315
section unless the home and the resident or, if the resident is	316
not competent to make a decision, the home and the resident's	317
sponsor, agree to an earlier date.	318
(C) Transfer or discharge actions shall be documented in the	319
resident's medical record by the home if there is a medical basis	320
for the action.	321
(D) A resident or resident's sponsor may challenge a transfer	322
or discharge by requesting an impartial hearing pursuant to	323
section 3721.161 of the Revised Code, unless the transfer or	324
discharge is required because of one of the following reasons:	325
(1) The home's license has been revoked under this chapter;	326
(2) The home is being closed pursuant to section 3721.08,	327
sections 5165.60 to 5165.89, or section 5155.31 of the Revised	328
Code;	329
(3) The resident is a recipient of medicaid and the home's	330
participation in the medicaid program has been involuntarily	331
terminated or denied by the federal government;	332
(4) The resident is a beneficiary under the medicare program	333
and the home's certification under the medicare program has been	334
involuntarily terminated or denied by the federal government.	335
(E) If a resident is to be transferred or discharged pursuant	336
to this section, the home from which the resident is being	337
transferred proposing the transfer or discharged discharge shall	338
provide the resident with adequate preparation prior to the	339
transfer or discharge to ensure a safe and orderly transfer or	340

discharge from the home, and the home or alternative setting to

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which the resident is to be transferred or discharged shall have

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accepted the resident for transfer or discharge.

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- (F) At the time of a transfer or discharge of a resident who 344 is a recipient of medicaid from a home to a hospital or for 345 therapeutic leave, the home shall provide notice in writing to the 346 resident and in writing by certified mail, return receipt 347 requested, to the resident's sponsor, specifying the number of 348 days, if any, during which the resident will be permitted under 349 the medicaid program to return and resume residence in the home 350 and specifying the medicaid program's coverage of the days during 351 which the resident is absent from the home. An individual who is 352 absent from a home for more than the number of days specified in 353 the notice and continues to require the services provided by the 354 facility shall be given priority for the first available bed in a 355 356 semi-private room.
- Sec. 3721.161. (A) Not later than thirty days after the date 357 a resident or the resident's sponsor receives under section 358 3721.16 of the Revised Code a notice of a proposed transfer or 359 discharge, whichever date of receiving the notice is later, the 360 resident or resident's sponsor may challenge the proposed transfer 361 or discharge by submitting a written request for a hearing to the 362 state department of health. On receiving the request, the 363 department shall conduct a hearing in accordance with section 364 3721.162 of the Revised Code to determine whether the proposed 365 transfer or discharge complies with division divisions (A)(30) to 366 (33) of section 3721.13 and section 3721.16 of the Revised Code. 367
- (B) Except in the circumstances described in divisions 368
 (A)(1)(a) to (e) of section 3721.16 of the Revised Code, if a 369
 resident or the resident's sponsor submits a written hearing 370

request not later than ten days after the date the resident or the 371 resident's sponsor received notice of the proposed transfer or 372 discharge, whichever date of receiving the notice is later, the 373 home shall not transfer or discharge the resident unless the 374 department determines after the hearing that the transfer or 375 discharge complies with division divisions (A)(30) to (33) of 376 377 section 3721.13 and section 3721.16 of the Revised Code or the department's determination to the contrary is reversed on appeal. 378

- (C) If a resident or the resident's sponsor does not request 379 a hearing pursuant to division (A) of this section, the home may 380 transfer or discharge the resident on the date specified in the 381 notice required by division (A) of section 3721.16 of the Revised 382 Code or thereafter, unless the home and the resident or, if the 383 resident is not competent to make a decision, the home and the 384 resident's sponsor, agree to an earlier date. 385
- (D) If the a resident or the resident's sponsor requests a 386 hearing in writing pursuant to division (A) of this section and 387 the home transfers or discharges the resident before the 388 department issues a hearing decision, the home shall readmit the 389 resident in the first available bed if the department determines 390 after the hearing that the transfer or discharge does not comply 391 with division divisions (A)(30) to (33) of section 3721.13 and 392 section 3721.16 of the Revised Code or the department's 393 determination to the contrary is reversed on appeal. 394
- Sec. 3721.162. (A) On receiving a request pursuant to section 395
 3721.161 of the Revised Code, the department of health shall 396
 conduct hearings under this section in accordance with 42 C.F.R. 397
 431, subpart E, to determine whether the proposed transfer or 398
 discharge of the resident from the home complies with division 399
 divisions (A)(30) to (33) of section 3721.13 and section 3721.16 400

of the Revised Code.

(B) The department shall employ or contract with an attorney	402
to serve as hearing officer. The hearing officer shall conduct a	403
hearing in the home not later than ten days after the date the	404
department receives a request pursuant to section 3721.161 of the	405
Revised Code, unless the resident and the home or, if the resident	406
is not competent to make a decision, the resident's sponsor and	407
the home, agree otherwise. The hearing shall be recorded on	408
audiotape, but neither the recording nor a transcript of the	409
recording shall be part of the official record of the hearing. A	410
hearing conducted under this section is not subject to section	411
121.22 of the Revised Code.	412

- (C) Unless the parties otherwise agree, the hearing officer 413 shall issue a decision within five days of the date the hearing 414 concludes. In all cases, a decision shall be issued not later than 415 thirty days after the department receives a request pursuant to 416 section 3721.161 of the Revised Code. The hearing officer's 417 decision shall be served on the resident or resident's sponsor and 418 the home by certified mail. The hearing officer's decision shall 419 be considered the final decision of the department. 420
- (D) A resident, resident's sponsor, or home may appeal the 421 decision of the department to the court of common pleas pursuant 422 to section 119.12 of the Revised Code. The appeal shall be 423 governed by section 119.12 of the Revised Code, except for all of 424 the following:
- (1) The resident, resident's sponsor, or home shall file the 426 appeal in the court of common pleas of the county in which the 427 home is located.
- (2) The resident or resident's sponsor may apply to the court 429 for designation as an indigent and, if the court grants the 430

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application, the resident or resident's sponsor shall not be	431
required to furnish the costs of the appeal.	432
(3) The appeal shall be filed with the department and the	433
court within thirty days after the hearing officer's decision is	434
served. The appealing party shall serve the opposing party a copy	435
of the notice of appeal by hand-delivery or certified mail, return	436
receipt requested. If the home is the appealing party, it shall	437
provide a copy of the notice of appeal to both the resident and	438
the resident's sponsor or attorney, if known.	439
(4) The department shall not file a transcript of the hearing	440
with the court unless the court orders it to do so. The court	441
shall issue such an order only if it finds that the parties are	442
unable to stipulate to the facts of the case and that the	443
transcript is essential to the determination of the appeal. If the	444
court orders the department to file the transcript, the department	445
shall do so not later than thirty days after the day the court	446
issues the order.	447
(E) The court shall not require an appellant to pay a bond as	448

- a condition of issuing a stay pending its decision.

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- (F) The resident, resident's sponsor, home, or department may

 commence a civil action in the court of common pleas of the county

 in which the home is located to enforce the decision of the

 department or the court. If the court finds that the resident or

 home has not complied with the decision, it shall enjoin the

 violation and order other appropriate relief, including attorney's

 fees."

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In line 124668, after "3721.026," insert "3721.13, 3721.16, 457
3721.161, 3721.162"

The motion was _____ agreed to.

SYNOPSIS

Long-term care facility discharges and transfers	459
R.C. 3721.13, 3721.16. 3721.161, and 3721.162	460
Restores House-added provisions removed by the Senate that:	461
Add to the Nursing Home Patients Bill of Rights the following:	462 463
-The right not to be transferred or discharged to a location that cannot meet the health or safety needs of the resident.	464 465
-The right not to be transferred or discharged without adequate preparation in order to conduct a safe and orderly transfer or discharge.	466 467 468
-All other rights regarding transfers or discharges provided under federal law.	469 470
Require ODH in hearings regarding a notice of transfer or discharge to determine if the proposed transfer or discharge	471 472
complies with the rights listed above and notification requirements in existing law.	473 474
	