



General Assembly

January Session, 2005

**Raised Bill No. 6776**

LCO No. 3787

\*03787 \_\_\_\_\_ AGE\*

Referred to Committee on Select Committee on Aging

Introduced by:  
(AGE)

**AN ACT CONCERNING ENHANCEMENTS TO ELDERLY ADVOCACY PROGRAMS.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Subsection (b) of section 19a-550 of the general statutes is  
2 repealed and the following is substituted in lieu thereof (*Effective*  
3 *October 1, 2005*)

4 (b) There is established a patients' bill of rights for any person  
5 admitted as a patient to any nursing home facility or chronic disease  
6 hospital. The patients' bill of rights shall be implemented in accordance  
7 with the provisions of Sections 1919(b), 1919(c), 1919(c)(2),  
8 1919(c)(2)(D) and 1919(c)(2)(E) of the Social Security Act. The patients'  
9 bill of rights shall provide that each such patient: (1) Is fully informed,  
10 as evidenced by the patient's written acknowledgment, prior to or at  
11 the time of admission and during the patient's stay, of the rights set  
12 forth in this section and of all rules and regulations governing patient  
13 conduct and responsibilities; (2) is fully informed, prior to or at the  
14 time of admission and during the patient's stay, of services available in  
15 the facility, and of related charges including any charges for services  
16 not covered under Titles XVIII or XIX of the Social Security Act, or not

17 covered by basic per diem rate; (3) is entitled to choose the patient's  
18 own physician and is fully informed, by a physician, of the patient's  
19 medical condition unless medically contraindicated, as documented by  
20 the physician in the patient's medical record, and is afforded the  
21 opportunity to participate in the planning of the patient's medical  
22 treatment and to refuse to participate in experimental research; (4) in a  
23 residential care home or a chronic disease hospital is transferred from  
24 one room to another within the facility only for medical reasons, or for  
25 the patient's welfare or that of other patients, as documented in the  
26 patient's medical record and such record shall include documentation  
27 of action taken to minimize any disruptive effects of such transfer,  
28 except a patient who is a Medicaid recipient may be transferred from a  
29 private room to a nonprivate room, provided no patient may be  
30 involuntarily transferred from one room to another within the facility  
31 if (A) it is medically established that the move will subject the patient  
32 to a reasonable likelihood of serious physical injury or harm, or (B) the  
33 patient has a prior established medical history of psychiatric problems  
34 and there is psychiatric testimony that as a consequence of the  
35 proposed move there will be exacerbation of the psychiatric problem  
36 which would last over a significant period of time and require  
37 psychiatric intervention; and in the case of an involuntary transfer  
38 from one room to another within the facility, the patient and, if known,  
39 the patient's legally liable relative, guardian or conservator or a person  
40 designated by the patient in accordance with section 1-56r, is given at  
41 least thirty days' and no more than sixty days' written notice to ensure  
42 orderly transfer from one room to another within the facility, except  
43 where the health, safety or welfare of other patients is endangered or  
44 where immediate transfer from one room to another within the facility  
45 is necessitated by urgent medical need of the patient or where a patient  
46 has resided in the facility for less than thirty days, in which case notice  
47 shall be given as many days before the transfer as practicable; (5) is  
48 encouraged and assisted, throughout the patient's period of stay, to  
49 exercise the patient's rights as a patient and as a citizen, and to this  
50 end, [has] prior to or at the admission and during the patient's stay,

51 shall be (A) provided with the name of, and contact information for  
52 state, federal and privately funded patient advocacy programs acting  
53 on behalf of patients in the geographic area of the nursing home  
54 facility or chronic disease hospital, (B) advised of the right to free  
55 association with any such advocacy program including the right to be  
56 fully informed about patients' rights by [state or federally funded]  
57 such patient advocacy programs, (C) advised of the right to select an  
58 individual of the patient's choice to serve as the patient's advocate, and  
59 (D) may voice grievances and recommend changes in policies and  
60 services to facility staff or to outside representatives of the patient's  
61 choice, free from restraint, interference, coercion, discrimination or  
62 reprisal; (6) shall have prompt efforts made by the facility to resolve  
63 grievances the patient may have, including those with respect to the  
64 behavior of other patients; (7) may manage the patient's personal  
65 financial affairs, and is given a quarterly accounting of financial  
66 transactions made on the patient's behalf; (8) is free from mental and  
67 physical abuse, corporal punishment, involuntary seclusion and any  
68 physical or chemical restraints imposed for purposes of discipline or  
69 convenience and not required to treat the patient's medical symptoms.  
70 Physical or chemical restraints may be imposed only to ensure the  
71 physical safety of the patient or other patients and only upon the  
72 written order of a physician that specifies the type of restraint and the  
73 duration and circumstances under which the restraints are to be used,  
74 except in emergencies until a specific order can be obtained; (9) is  
75 assured confidential treatment of the patient's personal and medical  
76 records, and may approve or refuse their release to any individual  
77 outside the facility, except in case of the patient's transfer to another  
78 health care institution or as required by law or third-party payment  
79 contract; (10) receives quality care and services with reasonable  
80 accommodation of individual needs and preferences, except where the  
81 health or safety of the individual would be endangered, and is treated  
82 with consideration, respect, and full recognition of the patient's dignity  
83 and individuality, including privacy in treatment and in care for the  
84 patient's personal needs; (11) is not required to perform services for the

85 facility that are not included for therapeutic purposes in the patient's  
86 plan of care; (12) may associate and communicate privately with  
87 persons of the patient's choice, including other patients, send and  
88 receive the patient's personal mail unopened and make and receive  
89 telephone calls privately, unless medically contraindicated, as  
90 documented by the patient's physician in the patient's medical record,  
91 and receives adequate notice before the patient's room or roommate in  
92 the facility is changed; (13) is entitled to organize and participate in  
93 patient groups in the facility and to participate in social, religious and  
94 community activities that do not interfere with the rights of other  
95 patients, unless medically contraindicated, as documented by the  
96 patient's physician in the patient's medical records; (14) may retain and  
97 use the patient's personal clothing and possessions unless to do so  
98 would infringe upon rights of other patients or unless medically  
99 contraindicated, as documented by the patient's physician in the  
100 patient's medical record; (15) is assured privacy for visits by the  
101 patient's spouse or a person designated by the patient in accordance  
102 with section 1-56r and, if the patient is married and both the patient  
103 and the patient's spouse are inpatients in the facility, they are  
104 permitted to share a room, unless medically contraindicated, as  
105 documented by the attending physician in the medical record; (16) is  
106 fully informed of the availability of and may examine all current state,  
107 local and federal inspection reports and plans of correction; (17) may  
108 organize, maintain and participate in a patient-run resident council, as  
109 a means of fostering communication among residents and between  
110 residents and staff, encouraging resident independence and  
111 addressing the basic rights of nursing home and chronic disease  
112 hospital patients and residents, free from administrative interference  
113 or reprisal; (18) is entitled to the opinion of two physicians concerning  
114 the need for surgery, except in an emergency situation, prior to such  
115 surgery being performed; (19) is entitled to have the patient's family or  
116 a person designated by the patient in accordance with section 1-56r  
117 meet in the facility with the families of other patients in the facility to  
118 the extent the facility has existing meeting space available which meets

119 applicable building and fire codes; (20) is entitled to file a complaint  
120 with the Department of Social Services and the Department of Public  
121 Health regarding patient abuse, neglect or misappropriation of patient  
122 property; (21) is entitled to have psychopharmacologic drugs  
123 administered only on orders of a physician and only as part of a  
124 written plan of care developed in accordance with Section 1919(b)(2) of  
125 the Social Security Act and designed to eliminate or modify the  
126 symptoms for which the drugs are prescribed and only if, at least  
127 annually, an independent external consultant reviews the  
128 appropriateness of the drug plan; (22) is entitled to be transferred or  
129 discharged from the facility only pursuant to section 19a-535 or section  
130 19a-535b, as applicable; (23) is entitled to be treated equally with other  
131 patients with regard to transfer, discharge and the provision of all  
132 services regardless of the source of payment; (24) shall not be required  
133 to waive any rights to benefits under Medicare or Medicaid or to give  
134 oral or written assurance that the patient is not eligible for, or will not  
135 apply for benefits under Medicare or Medicaid; (25) is entitled to be  
136 provided information by the facility as to how to apply for Medicare or  
137 Medicaid benefits and how to receive refunds for previous payments  
138 covered by such benefits; (26) on or after October 1, 1990, shall not be  
139 required to give a third party guarantee of payment to the facility as a  
140 condition of admission to, or continued stay in, the facility; (27) in the  
141 case of an individual who is entitled to medical assistance, is entitled to  
142 have the facility not charge, solicit, accept or receive, in addition to any  
143 amount otherwise required to be paid under Medicaid, any gift,  
144 money, donation or other consideration as a precondition of admission  
145 or expediting the admission of the individual to the facility or as a  
146 requirement for the individual's continued stay in the facility; and (28)  
147 shall not be required to deposit the patient's personal funds in the  
148 facility.

149       Sec. 2. (*Effective July 1, 2005*) The sum of fifty thousand dollars is  
150 appropriated to the Department of Social Services, from the General  
151 Fund, for the fiscal year ending June 30, 2006, for the purpose of  
152 providing a grant to a citizen advocacy group in the southeast region

153 of the state that shall act as an advocate on behalf of elderly persons in  
154 nursing home facilities who are without family or friends.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>October 1, 2005</i>	19a-550(b)
Sec. 2	<i>July 1, 2005</i>	New section

***Statement of Purpose:***

To enhance elderly advocacy programs by ensuring that patients in nursing home facilities and in chronic disease hospitals have unimpeded access to patient advocates and by providing a grant of fifty thousand dollars to a citizen advocacy group, such as the Thames Area Citizen Advocacy Program, that currently provides citizen advocacy services to nursing home facility patients in the southeast region of the state.

*[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]*