

Sixty-fifth  
Legislative Assembly  
of North Dakota

**HOUSE BILL NO. 1039**

Introduced by

Legislative Management

(Human Services Committee)

1 A BILL for an Act to create and enact chapter 23-49 of the North Dakota Century Code, relating  
2 to hospital discharge policies.

3 **BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

4 **SECTION 1.** Chapter 23-49 of the North Dakota Century Code is created and enacted as  
5 follows:

6 **23-49-01. Definitions.**

7 As used in this chapter:

- 8 1. "Aftercare" means assistance related to a patient's condition at the time of discharge  
9 provided by an uncompensated caregiver to a patient after the patient's discharge.  
10 The term may include assistance with activities of daily living, instrumental activities of  
11 daily living, or medical or nursing tasks.  
12 2. "Discharge" means a patient's release from a hospital following the patient's admission  
13 to the hospital.  
14 3. "Uncompensated caregiver" means an individual who, at the request of a patient,  
15 agrees to provide, without compensation, aftercare to the patient in the patient's  
16 residence.

17 **23-49-02. Hospital discharge policies.**

- 18 1. A hospital shall establish and maintain written discharge policies. Components of the  
19 discharge policies must include:  
20 a. Assessment of the patient's ability for self-care after discharge.  
21 b. Opportunity for the patient to designate an uncompensated caregiver.  
22 c. Documentation of an uncompensated caregiver designated by a patient.  
23 d. Notification of the designated uncompensated caregiver of the patient's discharge  
24 or transfer to another facility.

e. Opportunity for the patient and designated uncompensated caregiver to participate in discharge planning.

f. Opportunity for instruction and training for the patient and designated uncompensated caregiver before discharge for the uncompensated caregiver to perform aftercare.

g. Documentation of the details of the discharge plan.

2. The discharge policies may incorporate established standards, such as:

a. Standards for accreditation adopted by a nationally recognized hospital accreditation organization; or

b. The conditions of participation for hospitals and for critical access hospitals adopted by the centers for medicare and medicaid services.

**23-49-03. Limitations - Immunity.**

1. This chapter may not be construed to interfere with the rights of an agent operating under a valid health care directive under chapter 23-06.5.

2. This chapter does not require a hospital to adopt discharge policies that would delay a patient's discharge or transfer to another facility or require the disclosure of protected health information without obtaining a patient's consent as required by state and federal laws governing health information privacy and security.

3. This chapter does not require a patient designate an uncompensated caregiver.

4. This chapter does not create a private right of action against a hospital or a hospital's employee, contractor, or duly authorized agent for providing the instruction and services required under this chapter.