PROPOSED AMENDMENTS TO SENATE BILL NO. 2070

SECTION 2. AMENDMENT. Section 50-10.2-02 of the North Dakota Century Code is amended and reenacted as follows:

50-10.2-02. Residents' rights - Implementation.

- 1. All facilities shall, upon a resident's admission, provide in hand to the resident and a member of the resident's immediate family or any existing legal guardian of the resident representative a statement of the resident's rights during the admission process and while living in the facility. Within thirtyfourteen days after admission, the statement must be orally explained to the resident and, if the resident is unable to understand, to the resident's immediate family member or members and any existing legal guardian of the resident representative, and thereafter annually so long as the resident remains in the facility. The statement must include rights, responsibilities of both the resident and the facility, and the facility rules governing resident conduct. Facilities A facility shall treat residents a resident in accordance with provisions of the statement. The statement must include provisions ensuring each resident the following minimum rights:
 - a. The right to civil and religious liberties, including knowledge of available choices, the right to independent personal decisions without infringement, and the right to encouragement and assistance from the staff of the facility to promote the fullest possible exercise of these rights.
 - The right to have private meetings, associations, and communications with any person of the resident's choice within the facility.
 - c. The right to have full access to participate in the community, unless otherwise indicated through the care planning process.
 - d. The right of each resident, the resident's immediate family, any existing legal guardian of the resident representative, friends, facility staff, and other persons to present complaints on the behalf of the resident to the facility's staff, the facility's

administrator, governmental officials, or to any other person, without fear of reprisal, interference, coercion, discrimination, or restraint. The facility shall adopt a grievance process and make the process known to each resident and, if the resident is unable to understand, to the resident's immediate family member or members and any existing legal guardian of the resident. An individual making a complaint in good faith is immune from any civil liability that otherwise might result from making the complaint.

- d.e. The right to send and receive unopened personal mail and electronic mail and the right of access to and use of telephones and electronic devices for private conversations.
- e.f. The right to assured private visits, subject to restrictions to protect the health or safety of the resident, by one's spouse, partner, or significant other, or if both are residents of the same facility, the right to share a room, within the capacity of the facility, unless sharing a room is not medically advisable as documented in the medical records by the attending physician.
- f.g. The right to manage one's own financial affairs if not under legal guardianship, or to delegate that responsibility in writing to the administrator or manager of the facility, but only to the extent of funds held in trust by the facility for the resident. If such a trust is established, then a written quarterly accounting of any transactions made on behalf of the resident must be furnished along with an explanation by the facility to the resident or the person legally responsible for the resident.
- g.h. The right to be fully informed in writing prior to or at the time of admission and during one's stay, of services provided and; the charges for those services, including ancillary charges. Residents, or their legal guardians, must be informed at least thirty days prior to any change in the costs or availability of the services. No facility may demand or receive any advance

- payment or gratuity to assure admission; and information regarding the billing system and processes.
- h.i. The right to be adequately informed of one's medical condition and proposed treatment and to participate in the planning of all medical treatment, including the right to refuse medication and treatment, to be discharged from the facility upon written request, and to be notified by the resident's attending physician of the medical consequences of any such actions.
- i-j. The right to have privacy in treatment and in caring for personal needs, to use personal belongings, to have security in storing and using personal possessions, and to have confidentiality in the treatment of personal and medical records. The resident has the right to view, and authorize release of, any personal or medical records.
- j-k. The right to keep and use personal belongings and to have security in storing and using personal possessions, including furnishings and clothing, as space permits, unless to do so would infringe upon the rights or health and safety of other residents.
- The right to be treated courteously, fairly, and with the fullest measure of dignity.
- k.m. The right to be free from mental and physical abuse, neglect, and financial exploitation, and the right to be free from physical or chemical restraint except in documented emergencies or when necessary to protect the resident from injury to self or to others. In such cases, the restraint must be authorized and documented by a physician for a limited period of time and, if the restraint is a chemical one, it must be administered by a licensed nurse or physician. Except as provided in this subdivision, drugs or physical restraints may not be used or threatened to be used for the purposes of punishment, for the convenience of staff, for behavior conditioning, as a substitute

for rehabilitation or treatment, or for any other purpose not part of an approved treatment plan.

- +<u>n.</u> The right not to be transferred or discharged except for:
 - Medical reasons;
 - (2) The resident's welfare or that of other residents if the safety of an individual in the facility is endangered due to the clinical or behavioral status of the resident;
 - (3) Nonpayment of one's rent or fees; or
 - (4) A temporary transfer during times of remodeling; or
 - (5) The facility ceases to operate.
- m.o. The right to receive at least a thirty-day written advance notice of any transfer or discharge when the resident is being discharged to another facility or the resident's own home, or when the resident is being transferred or discharged because of a change in the resident's level of care; however, advance notice of transfer or discharge may be less than thirty days if the resident has urgent medical needs that require a more immediate transfer or discharge, or a more immediate transfer or discharge is required to protect the health and safety of residents and staff within the facility.
- n.p. The right to refuse to perform services on behalf of the facility, unless agreed to by the resident or legal guardian and established in the plan of care.
- e.g. The right to a claim for relief against a facility for any violation of rights guaranteed under this chapter.
- p.r. The right to have each facility display a notice that the following information is available for public review and make the information available on request:
 - (1) A complete copy of every inspection report, deficiency report, and plan of correction the facility received during the previous twethree years.
 - (2) The facility's grievance process.

- (3) A copy of the statement of ownership, board membership, and partners.
- (4) A statement of ownership setting forth any conflict of interest in the operation of the facility.
- q.s. The right to a pharmacist of the resident's choice irrespective of the type of medication distribution system used by the facility, and to not be charged a fee or receive a financial incentive or disincentive for choosing a pharmacy other than the facility's preferred pharmacy. The resident may not be charged for repackaging if that cost can be included in the facility rate or on the facility cost report.
- <u>t.</u> The right of the resident to choose an attending physician.
- The right to not be discriminated against by a facility in the admissions process or in the provision of appropriate care on the basis of the resident's source of payment to the facility. Any applicant for admission to a facility who is denied admission must be given the reason for the denial in writing upon request.
- s.v.u. The right of residents and their families to organize, maintain, and participate in resident advisory and family councils.
- t.w.v. The right of residents receiving services performed by a provider from outside the facility to be informed, on request, of the identity of the provider.
- 2. If there is a change in the resident rights, laws, or regulations, the facility shall promptly notify the resident, and, if the resident is unable to understand, a member of the resident's immediate family or the resident representative.
- 3. The For involuntary transfer and discharge actions taken by a facility:
 - <u>Must include a</u>, the written transfer or discharge notice issued
 by the facility which includes
 - (1)a. The reason for the transfer or discharge.
 - (2)b. The effective date of transfer or discharge.
 - The location the resident is to be transferred or discharged to.

- <u>(4)d.</u> The name, mailing and electronic mail address, and telephone number of the office of the state long-term care ombudsman.
- b. Must comply with the following terms and conditions:
 - (1) The discharge location may not be a hospital location unless a bed hold has been declined or the failure to discharge or transfer would endanger the health or safety of the resident or other individuals in the facility. The facility shall document the danger that failure to transfer or discharge would pose.
 - (2) The discharge location may not be a nonpermanent location, including a homeless shelter or motel room, unless the resident has stated that a nonpermanent location is their choice of discharge location and that preference is documented in the resident's chart.
 - (3) Provide discharge planning for a safe and orderly discharge, which includes planning with the resident on preferences of location to move to and assisting with securing admission to a facility if needed.
 - (4) Provide and document sufficient preparation and orientation to the resident, the resident representative, or the resident's immediate family to ensure safe and orderly transfer or discharge from the facility. The orientation must be provided in a form and manner the resident, resident representative, or immediate family can understand.
 - Provide a copy of the notice to the office of the state long-term care ombudsman.
 - (6) If a facility determines a resident who was transferred with an expectation of returning to the facility cannot return to the facility, the facility shall comply with the requirements of subdivisions n and o of subsection 1 and this subsection regarding discharge.

- 4. A facility shall inform the resident if the facility determines the physician chosen by the resident is unable or unwilling to assure provision of appropriate and adequate care and treatment. The facility shall discuss alternative physician participation with the resident and honor the resident's preferences, if any, among options. If the resident subsequently selects another attending physician, the facility shall honor that choice.
- 5. The facility shall provide the resident, and a member of the resident's immediate family or the resident representative, a written statement before admission identifying the level of licensed long-term care to which the resident will be admitted. The facility also shall disclose and provide to a resident or potential resident, resident representative, or immediate family member before admission, notice of special characteristics or service limitations of the facility.
- The facility shall protect the resident from retaliation. The facility shall adopt a grievance process and make the process known to each resident, the resident's immediate family member, and the resident representative. A person making a complaint in good faith is immune from any civil liability that otherwise might result from making the complaint.
- If a trust is established by the facility to hold the resident's funds, the facility shall provide to the resident, resident representative, or an agent under a power of attorney for financial decisions a written quarterly accounting of any transactions made on behalf of the resident which includes an explanation of the transactions by the facility. The facility shall pay out in full, within thirty days, the resident's personal funds deposited with the facility or refunds due to the resident upon discharge or eviction, and provide a final accounting of those funds to the resident, or in the case of death, in accordance with state law.

 Other refunds due to the resident upon discharge, eviction, or death must be paid out in full within thirty days from the resident's date of discharge from the facility.

- 8.6. The facility shall inform a resident, resident representative, an agent under a power of attorney for financial decisions, or immediate family member, at least thirty days before any change in the costs or availability of the services. A facility may not demand or receive advance payment or gratuity to assure admission or for the resident to be placed on a waiting list for admission.
- 9.7. A resident and the resident representative may view and authorize release of any personal or medical records.
- 10.8. The use of a physical or chemical restraint in an emergency or when necessary to protect the resident from injury to self or others must be authorized and documented by a physician, nurse practitioner, or physician's assistant for a limited period of time. A chemical restraint must be administered by a licensed nurse or physician, nurse practitioner, licensed nurse, or physician's assistant. Except as provided in this subsection, a drug or physical restraint may not be used or threatened to be used for the purpose of punishment, for the convenience of staff, for behavior conditioning, as a substitute for rehabilitation or treatment, or for any other purpose not included in an approved treatment plan.
- <u>Upon request, a facility shall provide an applicant for admission to a facility who is denied admission the reason for the denial in writing.</u>
 <u>The facility shall note in the written denial when the denial is based on the special characteristics or service limitations of the facility.</u>
- <u>12.10.</u> A facility shall ensure a resident council meeting is attended by residents only or at the invitation of a resident.
- <u>43.11.</u> Waiver of any of the rights guaranteed by this chapter may not be made a condition of admission to a facility <u>or ongoing residence</u>.
- 3.14.12. Each facility shall prepare a written plan and provide staff training to implement this chapter.
- 4.<u>15.13.</u> The department shall develop and coordinate with the facility licensing and regulatory agencies a relocation plan in the event a facility is decertified or unlicensed.

SECTION 3. AMENDMENT. Section 50-10.2-02.1 of the North Dakota Century Code is amended and reenacted as follows:

50-10.2-02.1. Authorized electronic monitoring - Penalty.

- 1. A resident and the resident representative may treat the resident's living quarters as the resident's home and, subject to rules to protect the privacy and safety of another resident, may purchase and use a technology device of the resident's choice, including a technology device that may facilitate virtual monitoring or virtual visitation with family and other persons, provided operation and use of the technology device does not violate an individual's right to privacy under state or federal law. The resident and the resident representative may not record Subsections 3 through 12 apply if a technology device or a virtual monitoring and virtual visitation device is used to record.
- A resident may use a device of the resident's choice that facilitates virtual monitoring, provided:
 - a. The purchase, activation, installation, maintenance, repair,
 deactivation, and removal of such device is at the expense of
 the resident; and
 - <u>b.</u> The device and any images obtained from the device are used by the resident and any person communicating with the resident in a manner that does not violate an individual's right to privacy under state or federal law.
- 3. A facility shall permit a resident or the resident representative to conduct authorized electronic monitoring recording of the resident's room through an authorized electronic monitoring recording device if:
 - a. The authorized electronic monitoring recording device is placed in the resident's room;
 - b. The electronic monitoring recording device is placed in a fixed, stationary position; monitors records only the area occupied by the resident and not the area occupied by the resident's roommate; and protects the privacy and dignity of the resident;

- c. The facility is given written notice of the placement and use which must include an installation plan in compliance with the facility's standards and regulations the facility provides shall provide to the resident;
- A video tape or recording created using an authorized electronic monitoring recording device records the date and time;
- e. All costs, except for electricity, associated with the authorized electronic monitoring recording device, including installation, operation, removal, repairs, room damage, and maintenance, are paid by the resident or resident representative who initiated the use of the authorized electronic monitoring recording device; and
- f. A signed authorization for the disclosure of protected health information, as defined by title 45, Code of Federal Regulations, part 160, section 103, compliant with the federal Health Insurance Portability and Accountability Act of 1996 [Pub. L. 104-191; 110 Stat. 1936; 29 U.S.C. 1181 et seq.] and consenting to the use of the device is given by each resident occupying the same room, or by that resident's resident representative in accordance with subsection 465.
- 2.4. A facility that uses allows the use of an authorized electronic monitoring recording device or a virtual monitoring device in compliance with this chapter is not guilty of a crime or civilly liable under this code for a violation of a resident's privacy.
- 3.5.4. The facility shall cooperate to accommodate the placement of the authorized electronic monitoring recording device, unless doing so would place undue burden on the facility.
- 4.6.5. Before placing and using the authorized electronic monitoring recording device or virtual monitoring device, a resident or resident representative shall obtain the signed authorization of any other resident residing in the room in accordance with subsection 43. The authorization may be signed by that resident's resident representative.

- a. The resident's or the resident representative's authorization may limit the use of an authorized electronic monitoringrecording device to only audio monitoringrecording or only video monitoringrecording and may limit the device's time of operation, direction, and focus.
- b. At any time, a resident or resident representative who did not request the authorized electronic monitoring recording device in the resident's room may withdraw, in writing, the signed authorization for the use of the device. The resident who requested the device or the resident's resident representative is responsible for having the device disabled in compliance with the facility's standards and regulations after receipt of the written withdrawal.
- 5.7.6. The facility shall make a reasonable attempt to accommodate a resident if a resident or resident representative of a resident who is residing in a shared room wants to have an authorized electronic monitoring recording device placed in the room and another resident living in the same shared room refuses to authorize the use of the authorized electronic monitoring device.
- 6.8.7. If authorized electronic monitoring recording is being conducted in the room of a resident, and another resident will be moved into the room, the resident who requested the device or the resident's resident representative is responsible for having the existing authorized electronic monitoring recording device disabled in compliance with the facility's standards and regulations unless the new resident or the resident's resident representative authorizes the device pursuant to subsections 43 and 465.
- 7.9.8. A facility may not refuse to admit an individual and may not remove a resident from a facility because of authorized electronic monitoringrecording of a resident's room. A person may not intentionally retaliate or discriminate against a resident for authorization of authorized electronic monitoringrecording.

- 8.10.9. A facility clearly and conspicuously shall post a sign where authorized electronic monitoring recording is being conducted to alert and inform visitors.
- 9.11.10. A facility or staff of the facility may not access any video or audio recording created through an authorized electronic monitoringrecording device placed in a resident's room without the written consent of the resident or resident representative or court order.
- 10.12.11. A person An individual that intentionally hampers, obstructs, tampers with, or destroys a recording or an authorized electronic monitoring recording device or virtual monitoring device placed in a resident's room, without the express written consent of the resident or resident representative, is subject to a class B misdemeanor. A personAn individual that places an electronic monitoring recording device in the room of a resident or which uses or discloses a tape or other recording made by the device may be guilty of a crime or civilly liable for any unlawful violation of the privacy rights of another. In any civil proceeding, administrative proceeding, or survey process, material obtained through the use of an authorized electronic monitoringrecording device may not be used if a personan individual intentionally hampered, obstructed, or tampered with the material without the express written consent of the resident or resident representative, or if the material was obtained through the operation of an electronic monitoring recording device which was not compliant with this section.
- 11.13.12. A person may not intercept a communication or disclose or use an intercepted communication of an authorized electronic monitoringrecording device or a virtual monitoring device placed in a resident's room, without the express written consent of the resident or the resident representative.

SECTION 4. AMENDMENT. Section 50-10.2-05 of the North Dakota Century Code is amended and reenacted as follows:

50-10.2-05. Furnishing financial information.

A facility may request that an applicant for admission, a resident of the facility, or the applicant's or resident's legal representative furnish financial information regarding income and assets, including information regarding any transfers or assignments of income or assets. A facility may deny admission to an applicant for admission who is unable to verify a viable payment source. The facility shall inform the resident in writing if the inability to verify a viable payment source is the reason for denial of admission.