

GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2023

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HOUSE PRINCIPAL CLERK

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HOUSE BILL DRH30291-MG-39

Short Title: Enhance ACH and Nursing Home Clients' Rights. (Public)

Sponsors: Representative T. Brown.

Referred to:

1 A BILL TO BE ENTITLED
2 AN ACT ENHANCING THE RIGHTS OF ADULT CARE HOME RESIDENTS AND
3 NURSING HOME PATIENTS.

4 The General Assembly of North Carolina enacts:

5 **SECTION 1.** G.S. 131D-21 is amended by adding new subdivisions to read:

6 "(18) To receive prompt and ongoing coordination between the resident's attending
7 physician and any specialist for the purpose of providing appropriate
8 treatment to the resident.

9 (19) To have the facility provide family members who are legally authorized to
10 receive information about the resident with a response to an information
11 request by the family members within 72 hours after receiving the request.

12 (20) To the extent allowed under applicable State and federal laws, to have the
13 facility provide information to family members about the resident's prognosis
14 when the resident is diagnosed with a late stage disease.

15 (21) To receive immediate and adequate care when the resident has an adverse
16 reaction to a prescription drug used to treat a complex or rare disease, such as
17 cancer, multiple sclerosis, or rheumatoid arthritis."

18 **SECTION 2.** G.S. 131E-117 reads as rewritten:

19 **"§ 131E-117. Declaration of patient's rights.**

20 All facilities shall treat their patients in accordance with the provisions of this Part. Every
21 patient shall have the following rights:

22 (1) To be treated with consideration, respect, and full recognition of personal
23 dignity and ~~individuality~~; individuality.

24 (2) To receive care, treatment and services ~~which that~~ are adequate, appropriate,
25 and in compliance with relevant federal and State statutes and ~~rules~~; rules.

26 (3) To receive at the time of admission and during the stay, a written statement of
27 the services provided by the facility, including those required to be offered on
28 an as-needed basis, and of related charges. Charges for services not covered
29 under Medicare or Medicaid shall be specified. Upon receiving this statement,
30 the patient shall sign a written receipt ~~which that~~ must be on file in the facility
31 and available for ~~inspection~~; inspection.

32 (4) To have on file in the patient's record a written or verbal order of the attending
33 physician containing any information as the attending physician deems
34 appropriate or necessary, together with the proposed schedule of medical
35 treatment. The patient shall give prior informed consent to participation in
36 experimental research. Written evidence of compliance with this subdivision,



- 1 including signed acknowledgements by the patient, shall be retained by the
2 facility in the patient's ~~file;~~file.
- 3 (5) To receive respect and privacy in the patient's medical care program. Case
4 discussion, consultation, examination, and treatment shall remain confidential
5 and shall be conducted discreetly. Personal and medical records shall be
6 confidential and the written consent of the patient shall be obtained for their
7 release to any individual, other than family members, except as needed in case
8 of the patient's transfer to another health care institution or as required by law
9 or third party payment ~~contract;~~contract.
- 10 (6) To be free from mental and physical abuse and, except in emergencies, to be
11 free from chemical and physical restraints unless authorized for a specified
12 period of time by a physician according to clear and indicated medical
13 ~~need;~~need.
- 14 (7) To receive from the administrator or staff of the facility a reasonable response
15 to all ~~requests;~~requests.
- 16 (8) To associate and communicate privately and without restriction with persons
17 and groups of the patient's choice on the patient's initiative or that of the
18 persons or groups at any reasonable hour; to send and receive mail promptly
19 and unopened, unless the patient is unable to open and read personal mail; to
20 have access at any reasonable hour to a telephone where the patient may speak
21 privately; and to have access to writing instruments, stationery, and
22 ~~postage;~~postage.
- 23 (9) To manage the patient's financial affairs unless authority has been delegated
24 to another pursuant to a power of attorney, or written agreement, or some other
25 person or agency has been appointed for this purpose pursuant to law. Nothing
26 shall prevent the patient and facility from entering a written agreement for the
27 facility to manage the patient's financial affairs. In the event that the facility
28 manages the patient's financial affairs, it shall have an accounting available
29 for inspection and shall furnish the patient with a quarterly statement of the
30 patient's account. The patient shall have reasonable access to this account at
31 reasonable hours; the patient or facility may terminate the agreement for the
32 facility to manage the patient's financial affairs at any time upon five days'
33 notice.
- 34 (10) To enjoy privacy in visits by the patient's spouse, and, if both are inpatients of
35 the facility, they shall be afforded the opportunity where feasible to share a
36 ~~room;~~room.
- 37 (11) To enjoy privacy in the patient's ~~room;~~room.
- 38 (12) To present grievances and recommend changes in policies and services,
39 personally or through other persons or in combination with others, on the
40 patient's personal behalf or that of others to the facility's staff, the community
41 advisory committee, the administrator, the Department, or other persons or
42 groups without fear of reprisal, restraint, interference, coercion, or
43 ~~discrimination;~~discrimination.
- 44 (13) To not be required to perform services for the facility without personal consent
45 and the written approval of the attending ~~physician;~~physician.
- 46 (14) To retain, to secure storage for, and to use personal clothing and possessions,
47 where ~~reasonable;~~reasonable.
- 48 (15) To not be transferred or discharged from a facility except for medical reasons,
49 the patient's own or other patients' welfare, nonpayment for the stay, or when
50 the transfer or discharge is mandated under Title XVIII (Medicare) or Title
51 XIX (Medicaid) of the Social Security Act. The patient shall be given at least

- 1 five days' advance notice to ensure orderly transfer or discharge, unless the
2 attending physician orders immediate transfer, and these actions, and the
3 reasons for them, shall be documented in the patient's medical ~~record;~~record.
4 (16) To be notified within 10 days after the facility has been issued a provisional
5 license because of violation of licensure regulations or received notice of
6 revocation of license by the North Carolina Department of Health and Human
7 Services and the basis on which the provisional license or notice of revocation
8 of license was issued. The patient's responsible family member or guardian
9 shall also be notified.
- 10 (17) To receive prompt and ongoing coordination between the patient's attending
11 physician and any specialist for the purpose of providing appropriate
12 treatment to the patient.
- 13 (18) To have the facility provide family members who are legally authorized to
14 receive information about the patient with a response to an information request
15 by the family members within 72 hours after receiving the request.
- 16 (19) To the extent allowed under applicable State and federal laws, to have the
17 facility provide information to family members about the patient's prognosis
18 when the patient is diagnosed with a late stage disease.
- 19 (20) To receive immediate and adequate care when the patient has an adverse
20 reaction to a prescription drug used to treat a complex or rare disease, such as
21 cancer, multiple sclerosis, or rheumatoid arthritis."
- 22 **SECTION 3.** This act becomes effective October 1, 2023.