

SENATE CHAMBER

STATE OF OKLAHOMA

DISPOSITION

FLOOR AMENDMENT

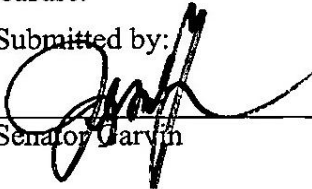
No. 1

COMMITTEE AMENDMENT

(Date)

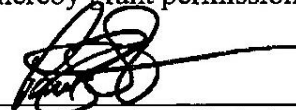
I move to amend House Bill No. 1013 by substituting the attached floor substitute (Request #3769) for the title, enacting clause and entire body of the measure.

Submitted by:




Senator Garvin

I hereby grant permission for the floor substitute to be adopted.



Senator Rosine, Chair (required)




Senator Pemberton



Senator Raste


Senator Prieto

Senator Daniels



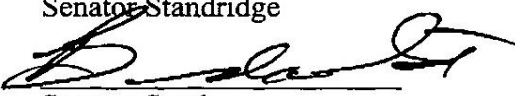
Senator Pugh

Senator Gollihare



Senator Hall

Senator Standridge



Senator Stanley



Senator Hicks

Senator Young

Senator Treat, President Pro Tempore

Senator McCartney, Majority Floor Leader

Note: Health and Human Services committee majority requires seven (7) members' signatures.

Garvin-DC-FS-HB1013
4/23/2024 4:41 PM

(Floor Amendments Only) Date and Time Filed: 4-23-24 5:00pm 

Untimely Amendment Cycle Extended Secondary Amendment

1 STATE OF OKLAHOMA

2 2nd Session of the 59th Legislature (2024)

3 FLOOR SUBSTITUTE
4 FOR ENGROSSED
5 HOUSE BILL NO. 1013

By: Echols, Hefner, and
Hasenbeck of the House

6 and

7 Garvin of the Senate

8
9
10 FLOOR SUBSTITUTE

11 [health care - Lori Brand Patient Bill of Rights Act
12 of 2024 - list of rights for a patient seeking
13 treatment - responsibilities of patients seeking
14 treatment - rights for minor patients seeking
15 treatment - responsibilities of parents -
16 codification - effective date]

17 ~~BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:~~

18 SECTION 1. NEW LAW A new section of law to be codified
19 in the Oklahoma Statutes as Section 3501 of Title 63, unless there
20 is created a duplication in numbering, reads as follows:

21 This act shall be known and may be cited as the "Lori Brand
22 Patient Bill of Rights Act of 2024".
23
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1 SECTION 2. NEW LAW A new section of law to be codified
2 in the Oklahoma Statutes as Section 3501.1 of Title 63, unless there
3 is created a duplication in numbering, reads as follows:

4 A. Each patient treated in this state shall have the following
5 rights when being treated:

6 1. The right to considerate and respectful care, provided in a
7 safe environment, free from all forms of abuse, neglect, harassment,
8 or exploitation;

9 2. To receive information in a manner that he or she
10 understands. Communications with the patient shall be effective and
11 provided in a manner that facilitates understanding by the patient.
12 Written information provided will be appropriate to the age, the
13 understanding, and, as appropriate, the language of the patient. As
14 appropriate, communications specific to the vision-, speech-,
15 hearing-, cognitive-, and language-impaired patient will be
16 provided. The hospital shall meet the requirements of federal
17 regulations that require program and facility accessibility;

18 3. To receive as much information about any proposed treatment
19 or procedure as he or she may need in order to give informed consent
20 or to refuse the course of treatment. Except in emergencies, this
21 shall include a description of the procedure or treatment, the
22 medically significant risks involved in the procedure or treatment,
23 alternate courses of treatment or nontreatment and the risks

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1 involved in each, and the name of the person who will carry out the
2 procedure or treatment;

3 4. To have an advance directive attorney for health care
4 concerning treatment or to designate a surrogate decision-maker with
5 the expectation that the hospital will honor the intent of that
6 directive to the extent allowed by law and hospital policy. The
7 health care provider must advise a patient of his or her rights
8 under state law and hospital policy to make informed medical
9 decisions, ask if the patient has an advance directive, and include
10 that information in patient records. The patient has the right to
11 timely information about hospital policy that may limit the
12 hospital's ability to implement a legally valid advance directive;

13 5. To participate in the development and implementation of his
14 or her plan of care and actively participate in decisions regarding
15 his or her medical care;

16 6. To accept medical care or to refuse treatment, to the extent
17 permitted by law, and to be informed of the consequences of such
18 refusal;

19 7. To become informed of his or her rights as a patient in
20 advance of, or when discontinuing, the provision of care. The
21 patient may appoint a representative to receive this information
22 should he or she so desire;

23 8. To have a family member or representative of his or her
24 choice notified promptly of his or her admission to the hospital;

1 9. To request that no information regarding his or her
2 admittance, diagnosis, or treatment be released;

3 10. To review and obtain a copy of the medical records
4 pertaining to his or her medical care and to have the information
5 explained or interpreted as necessary, except when restricted by
6 law;

7 11. To reasonable continuity of care, when appropriate, and to
8 be informed by the doctor and other caregivers of available and
9 realistic patient care options when hospital care is no longer
10 appropriate;

11 12. To confidential treatment of all communications and records
12 pertaining to his or her care and stay at the hospital. The
13 patient's written authorization shall be obtained before his or her
14 medical records can be made available to anyone not directly
15 concerned with his or her care;

16 13. To expect that, within its capacity and policies, the
17 hospital will make a reasonable response to the request of a patient
18 for appropriate and medically directed care and services. The
19 hospital must provide evaluation, service, and a referral as
20 indicated by the urgency of the case. When medically appropriate
21 and legally permissible, or when a patient has requested a transfer,
22 that patient may be transferred to another facility. That facility
23 must have first accepted the patient for transfer. The patient must
24 also have the benefit of the complete information and explanation

1 concerning the need for, risks and benefits of, and alternatives to
2 such a transfer;

3 14. The patient or patient's representative has the right to
4 participate in the consideration of ethical issues that might arise
5 in the care of the patient. The hospital shall have a mechanism for
6 the consideration of ethical issues arising in the care of patients
7 and to provide education to caregivers and patients on ethical
8 issues in health care;

9 15. To be advised of the hospital's complaint or grievance
10 process should the patient wish to communicate a concern regarding
11 the quality of care he or she receives. This includes whom to
12 contact to file a complaint. The patient will be provided with a
13 written notice of the complaint determination that contains the name
14 of the hospital's contact person, the steps taken on his or her
15 behalf to investigate the complaint, the results of the complaint
16 and, when possible, the resolution of the complaint concerning the
17 quality of care;

18 16. To examine and receive an explanation of his or her bill
19 regardless of source of payment;

20 17. To remain free from restraints or seclusion in any forms
21 that are not medically necessary or are used as a means of coercion,
22 discipline, convenience, or retaliation by staff;

23 18. To receive the visitors whom he or she designates
24 including, but not limited to, a spouse, a domestic partner

1 including a same-sex domestic partner, another family member, or a
2 friend. The patient has the right to withdraw or deny consent at
3 any time. Visitation will not be restricted, limited, or otherwise
4 denied on the basis of race, color, national origin, religion, sex,
5 or disability; and

6 19. Through use of the Hospital-Issued Notice of Noncoverage,
7 Medicare beneficiaries have the right to be informed in advance of
8 procedures or treatment for which Medicare may deny payment, and
9 that the beneficiary may be personally responsible for full payment
10 if Medicare denies payment.

11 B. A patient, guardian of a patient, or legally authorized
12 representative of a patient shall have the following
13 responsibilities:

14 1. To provide accurate and complete information concerning the
15 patient's present complaints, past illnesses, hospitalizations,
16 medications, and other matters relating to his or her health;

17 2. To report perceived risks in the patient's care and
18 unexpected changes in his or her condition to the responsible health
19 care provider;

20 3. For the patient's actions should he or she refuse treatment
21 or not follow his or her doctor's orders;

22 4. To ask questions when the patient does not understand what
23 he or she has been told about the patient's care or what he or she
24 is expected to do;

1 5. To be considerate of the rights of other patients and
2 hospital personnel;

3 6. To participate in educational and discharge planning
4 activities necessary to ensure that he or she has adequate knowledge
5 and support services to provide him or her with a safe environment
6 upon discharge from the hospital;

7 7. To ask the doctor or nurse what to expect regarding pain
8 management, to discuss pain relief options with doctors and nurses
9 and to help develop a pain management plan, to ask for pain relief
10 when pain first begins, to help doctors and nurses assess the
11 patient's pain, to tell the doctors and nurses if his or her pain is
12 not relieved, and to tell doctors and nurses about any concerns
13 about taking pain medication;

14 8. For keeping appointments and for notifying the hospital or
15 doctor when he or she is unable to do so;

16 9. Being respectful of his or her personal property and that of
17 other patients in the hospital;

18 10. Following hospital procedures; and

19 11. Assuring that the financial obligations of his or her care
20 are fulfilled as promptly as possible.

21 C. Any minor patient has the following rights when being
22 treated in this state:

23 1. To be treated with respect in regards to:

24 a. each child and adolescent as a unique individual, and

1 b. the caretaking role and individual response of the
2 parent and legal guardian;

3 2. To provisions for normal physical and physiological needs of
4 a growing child including nutrition, rest, sleep, warmth, activity,
5 and freedom to move and explore. Minors shall have the right to:

6 a. appropriate treatment in the least restrictive
7 setting,

8 b. not receive unnecessary or excessive medication,

9 c. an individualized treatment plan and the right to
10 participate in the plan,

11 d. a humane treatment environment that provides
12 reasonable protection from harm and appropriate
13 privacy for personal needs,

14 e. separation from adult patients when possible, and

15 f. regular communication between the minor patient and
16 the patient's family or legal guardian;

17 3. To consistent, supportive, and nurturing care which:

18 a. meets the emotional and psychosocial needs of the
19 minor, and

20 b. fosters open communication;

21 4. To provisions for self-esteem needs which will be met by
22 attempts to give the minor:

23 a. the reassuring presence of a caring person, especially
24 a parent,

- b. freedom to express feelings or fears with appropriate reactions,
- c. as much control as possible over both self and situation,
- d. opportunities to work through experiences before and after they occur, verbally, in play, or in other appropriate ways, and
- e. recognition for coping well during difficult situations;

5. To provisions for varied and normal stimuli of life which contribute to cognitive, social, emotional, and physical developmental needs such as play, educational, and social activities essential to all children and adolescents;

6. To information about what to expect prior to, during, and following a procedure or experience and support in coping with it;

7. To participate in decisions affecting their own medical treatment; and

8. To the minimization of stay duration by recognizing discharge planning needs.

D. All parents and legal guardians of minor patients in this state shall have the following responsibilities:

1. To continue in their parenting role to the extent of their ability; and

1 2. To be available to participate in decision-making and
2 provide staff with knowledge of other parent or family whereabouts.

3 SECTION 3. This act shall become effective November 1, 2024.

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5 59-2-3769 DC 4/23/2024 5:56:51 PM

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