

SENATE
STATE OF MINNESOTA
NINETY-THIRD SESSION

S.F. No. 2579

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DATE	D-PG	OFFICIAL STATUS
03/06/2023	1350	Introduction and first reading Referred to Health and Human Services

1.1 A bill for an act

1.2 relating to health; establishing a right for a patient or resident to choose to have a

1.3 support person present while receiving care or services; proposing coding for new

1.4 law in Minnesota Statutes, chapter 144.

1.5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.6 Section 1. [144.6514] RIGHT OF PATIENTS TO SUPPORT PERSON.

1.7 Subdivision 1. Short title. This section may be cited as the "No Patient Left Alone Act."

1.8 Subd. 2. General rule. A provider must allow, at a minimum, one support person of the

1.9 patient's or resident's choice to be physically present while the patient is receiving care

1.10 services.

1.11 Subd. 3. Definitions. (a) For the purposes of this section, the following terms have the

1.12 meanings given.

1.13 (b) "Minor" means an individual who has not attained the age of 18 years, notwithstanding

1.14 any law to the contrary.

1.15 (c) "Patient" means an individual who is receiving care services from a provider.

1.16 (d) "Provider" means a licensed health care facility, nursing home, assisted living facility,

1.17 residential care home, organization, or corporation that is licensed, certified, or otherwise

1.18 authorized by the laws of this state to provide health care.

1.19 (e) "Resident" means an individual residing in a facility.

1.20 (f) "Support person" means an individual necessary to provide compassionate care to

1.21 the patient or resident, including but not limited to:

- 2.1 (1) an individual requested to meet the physical or mental needs of the patient or resident;
2.2 (2) individuals requested in end-of-life situations;
2.3 (3) a clergy member or lay person offering religious or spiritual support; or
2.4 (4) an individual providing a service requested by the patient or resident, such as a
2.5 hairdresser or barber.

2.6 Subd. 4. **Notice of rights.** (a) A provider must have written policies and procedures
2.7 regarding a patient's or resident's right to have a support person present during treatment,
2.8 including provisions describing any clinically necessary or reasonable restriction the provider
2.9 may place on access to the patient or resident and the reason for the restriction. A provider
2.10 must inform each patient, resident, or support person, as appropriate, of the patient's or
2.11 resident's right to have a support person present, including any restriction on that right, and
2.12 must ensure that a support person enjoys full and equal visitation privileges consistent with
2.13 patient preferences and the provider's policies and procedures. A provider must have written
2.14 policies and procedures regarding complaints and the contact information for the individuals
2.15 tasked with investigating violations.

2.16 (b) For the purposes of this section, policies and procedures are subject to the following:

2.17 (1) the support person of a minor may not be subject to visitation hours, unless otherwise
2.18 exempt under subdivision 8;

2.19 (2) maximum access to patients, including by offering evening and weekend visits, must
2.20 be provided;

2.21 (3) in end-of-life or nearing end-of-life situations, every effort should be made for all
2.22 immediate family to be accommodated, in reasonably sized groups, with no age restrictions;

2.23 (4) when the parent or legal guardian of a minor child is receiving care, the support
2.24 person must be permitted to bring the minor or minors in the event no child care is available;

2.25 (5) if limitations are set on the number of support persons allowed to be present, a clergy
2.26 member or lay person offering religious or spiritual support must be allowed to be physically
2.27 present, in addition to the number of support persons allowed;

2.28 (6) in the event of a pandemic, one or more ways for compassionate care visitation,
2.29 including personal contact, that minimize the risk of infection to patients and residents must
2.30 be identified;

3.1 (7) when all feasible options for the physical presence of a support person have been
3.2 exhausted, a virtual option must be required, unless otherwise exempt under subdivision 8;
3.3 and

3.4 (8) requiring medical interventions that permanently alter the individual or penetrate the
3.5 skin or mucosa, including but not limited to vaccination and presterilized single-use needles,
3.6 of the support person or the patient or resident is prohibited.

3.7 Subd. 5. **Limitation of rights.** (a) A patient or resident is not required to waive the rights
3.8 provided under this section.

3.9 (b) A patient or resident is not required to consent to additional conditions, such as
3.10 executing an advance directive or agreeing to a "do not resuscitate" or similar order as a
3.11 condition of receiving visitation from a support person.

3.12 (c) In the event a patient or resident is incapacitated or otherwise unable to communicate
3.13 the patient's or resident's wishes and an individual provides an advance medical directive
3.14 designating the individual as the patient's or resident's support person, durable power of
3.15 attorney, or other term indicating the individual is authorized to exercise rights covered by
3.16 this section on behalf of the patient or resident, the provider must accept this designation
3.17 and allow the individual to exercise the patient's or resident's support person rights on the
3.18 patient's or resident's behalf.

3.19 (d) The rights specified in this section may not be terminated, suspended, or waived by
3.20 the provider, the Department of Health, or any governmental entity, notwithstanding
3.21 declarations of emergency declared by the governor or the legislature.

3.22 Subd. 6. **Violations; penalties.** Any provider who knowingly or willfully violates this
3.23 section is subject to a civil penalty of \$500 per day of violation.

3.24 Subd. 7. **Liability of provider.** Unless expressly required by federal law or regulation,
3.25 no action shall be taken against a provider for:

3.26 (1) giving a support person access to a provider's facility;

3.27 (2) failing to protect or otherwise ensure the safety or comfort of a support person given
3.28 access to a provider's facility;

3.29 (3) choosing not follow the Centers for Disease Control and Prevention or other national
3.30 guidelines that require or recommend restricting support person access; or

3.31 (4) the acts or omissions of any support person who is given access to a provider's facility.

4.1 Subd. 8. Exemption. (a) Facilities are not required to allow a support person to enter
4.2 an operating room, isolation room, isolation unit, behavioral health setting, or other typically
4.3 restricted area or to remain present during the administration of emergency care in critical
4.4 situations.

4.5 (b) Facilities are not required to allow a support person access beyond the rooms, units,
4.6 or wards in which the patient or resident the support person is visiting is receiving care or
4.7 beyond general common areas in the provider's facility.

4.8 (c) Support person access may be restricted:

4.9 (1) at the request of the patient, resident, or a law enforcement agency;

4.10 (2) due to a court order;

4.11 (3) if the support person has symptoms of a transmissible infection;

4.12 (4) if the support person is determined to be a danger to the patient or in cases of
4.13 suspected abuse;

4.14 (5) if support persons are engaging in disruptive, threatening, or violent behavior toward
4.15 any staff member, patient, or other visitor; or

4.16 (6) if support persons are noncompliant with hospital policy.