

HOUSE BILL NO. 376

INTRODUCED BY J. GILLETTE, F. ANDERSON, S. KERNS, J. SCHILLINGER, C. KNUDSEN, S. GIST, K. ZOLNIKOV, B. MITCHELL, P. FIELDER, S. VINTON, G. OBLANDER, G. KMETZ, T. FALK, L. DEMING, Z. WIRTH, N. DURAM, E. BUTCHER, N. HASTINGS

A BILL FOR AN ACT ENTITLED: "AN ACT ESTABLISHING A HOSPITAL PATIENT BILL OF RIGHTS."

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

NEW SECTION. **Section 1. Patient bill of rights.** The following rights may be exercised by a patient or, if the patient lacks decisionmaking capacity, is legally incompetent, or is a minor, by a patient's designated surrogate or lay proxy decisionmaker as defined in 50-5-1301:

- (1) The patient has the right to be treated with dignity and respect.
- (2) The patient has the right to and is encouraged to obtain from physicians and other direct caregivers relevant, current, and understandable information concerning diagnosis, treatment, and prognosis.
- (3) Except in emergencies when the patient lacks decisionmaking capacity and the need for treatment is urgent, the patient is entitled to the opportunity to discuss and request information related to the specific procedures and treatments that are recommended or planned, the risks involved, the possible length of recuperation, and the medically reasonable alternatives and their accompanying risks and benefits.
- (4) The patient has the right to know the identity of physicians, nurses, and others involved in the patient's care, as well as whether those involved are students, residents, or other trainees
- (5) The patient has the right to know the immediate and long-term financial implications of treatment choices, to the extent the costs are known.
- (6) (a) The patient has the right to make decisions about the plan of care prior to and during the course of treatment, to refuse a recommended treatment or plan of care, and to be informed of the medical consequences of the decision.
- (b) When the patient refuses a recommended treatment or plan of care, the patient is entitled to other appropriate care and services that the hospital provides or to transfer to another hospital.

1 (c) A hospital shall notify patients of any policy that might affect patient choices within the facility.

2 (7) (a) The patient has the right to have an advance directive, including but not limited to a living
3 will, health care proxy, or health care power of attorney, concerning treatment or designating a surrogate
4 decisionmaker with the expectation that the hospital will honor the intent of the directive. A hospital shall advise
5 a patient of the patient's rights under state law and hospital policy to make informed medical choices, ask if the
6 patient has an advance directive or surrogate decisionmaker, and include that information in the patient's
7 record.

8 (b) The patient has the right to timely information about hospital policy that may limit the hospital's
9 ability to implement fully a legally valid advance directive or surrogate decisionmaker.

10 (8) The patient has the right to visitation privileges that are no more restrictive for nonfamily
11 members than they are for immediate family members and, in an end-of-life situation, has the right to visitation
12 regardless of the patient's diagnosis. If the diagnosis or condition of a person at the end of life requires specific
13 protocols, the hospital shall make accommodations to facilitate visitation in accordance with the protocols and
14 may not eliminate the opportunity for visitation unless allowing visitation would violate federal requirements and
15 result in loss of payment.

16 (9) The patient has the right to every consideration of privacy.

17 (10) The patient has the right to review records pertaining to the patient's medical care and to have
18 the information explained or interpreted as necessary.

19 (11) (a) The patient has the right to expect that, within its capacity and policies, a hospital will make
20 reasonable response to the patient's request for appropriate and medically indicated care and services. The
21 hospital shall provide evaluation, service, or referral as indicated by the urgency of the case.

22 (b) When medically appropriate and legally permissible or on request of the patient, the patient
23 may be transferred to another facility that has accepted the patient for transfer. The patient must have the
24 benefit of complete information and explanation concerning the need for, risks and benefits of, and alternatives
25 to the transfer.

26 (12) The patient has the right to ask and be informed of the existence of business relationships
27 among the hospital, educational institutions, other health care providers, or payers that may influence the
28 patient's care and treatment.

