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State of Minnesota
HOUSE OF REPRESENTATIVES

EIGHTY-SIXTH
SESSION

HOUSE FILE No. **3070**

February 18, 2010

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The bill was read for the first time and referred to the Committee on Health Care and Human Services Policy and Oversight

A bill for an act

relating to health; requiring ethics training from home health aides; instructing the commissioner of health to amend rules; amending Minnesota Statutes 2008, section 144A.44, subdivision 1; Minnesota Statutes 2009 Supplement, section 144A.45, subdivision 1.

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

Section 1. Minnesota Statutes 2008, section 144A.44, subdivision 1, is amended to read:

Subdivision 1. **Statement of rights.** A person who receives home care services has these rights:

(1) the right to receive written information about rights in advance of receiving care or during the initial evaluation visit before the initiation of treatment, including what to do if rights are violated;

(2) the right to receive care and services according to a suitable and up-to-date plan, and subject to accepted medical or nursing standards, to take an active part in creating and changing the plan and evaluating care and services;

(3) the right to be told in advance of receiving care about the services that will be provided, the disciplines that will furnish care, the frequency of visits proposed to be furnished, other choices that are available, and the consequences of these choices including the consequences of refusing these services;

(4) the right to be told in advance of any change in the plan of care and to take an active part in any change;

(5) the right to refuse services or treatment;

(6) the right to know, in advance, any limits to the services available from a provider, and the provider's grounds for a termination of services;

2.1 (7) the right to know in advance of receiving care whether the services are covered
2.2 by health insurance, medical assistance, or other health programs, the charges for services
2.3 that will not be covered by Medicare, and the charges that the individual may have to pay;

2.4 (8) the right to know what the charges are for services, no matter who will be
2.5 paying the bill;

2.6 (9) the right to know that there may be other services available in the community,
2.7 including other home care services and providers, and to know where to go for information
2.8 about these services;

2.9 (10) the right to choose freely among available providers and to change providers
2.10 after services have begun, within the limits of health insurance, medical assistance,
2.11 or other health programs;

2.12 (11) the right to have personal, financial, and medical information kept private,
2.13 and to be advised of the provider's policies and procedures regarding disclosure of such
2.14 information;

2.15 (12) the right to be allowed access to records and written information from records
2.16 in accordance with sections 144.291 to 144.298;

2.17 (13) the right to be served by people who are properly trained and competent
2.18 to perform their duties;

2.19 (14) the right to be treated with courtesy and respect, and to have the patient's
2.20 property treated with respect;

2.21 (15) the right to be free from physical and verbal abuse;

2.22 (16) the right to reasonable, advance notice of changes in services or charges,
2.23 including at least ten days' advance notice of the termination of a service by a provider,
2.24 except in cases where:

2.25 (i) the recipient of services engages in conduct that alters the conditions of
2.26 employment as specified in the employment contract between the home care provider
2.27 and the individual providing home care services, or creates an abusive or unsafe work
2.28 environment for the individual providing home care services; or

2.29 (ii) an emergency for the informal caregiver or a significant change in the recipient's
2.30 condition has resulted in service needs that exceed the current service provider agreement
2.31 and that cannot be safely met by the home care provider;

2.32 (17) the right to a coordinated transfer when there will be a change in the provider of
2.33 services;

2.34 (18) the right to voice grievances regarding treatment or care that is, or fails to
2.35 be, furnished, or regarding the lack of courtesy or respect to the patient or the patient's
2.36 property;

3.1 (19) the right to know how to contact an individual associated with the provider who
 3.2 is responsible for handling problems and to have the provider investigate and attempt to
 3.3 resolve the grievance or complaint;

3.4 (20) the right to know the name and address of the state or county agency to contact
 3.5 for additional information or assistance; ~~and~~

3.6 (21) the right to verify that the person who is providing care is in compliance with
 3.7 professional continuing education requirements; and

3.8 ~~(21)~~ (22) the right to assert these rights personally, or have them asserted by the
 3.9 patient's family or guardian when the patient has been judged incompetent, without
 3.10 retaliation.

3.11 Sec. 2. Minnesota Statutes 2009 Supplement, section 144A.45, subdivision 1, is
 3.12 amended to read:

3.13 Subdivision 1. **Rules.** The commissioner shall adopt rules for the regulation of
 3.14 home care providers pursuant to sections 144A.43 to 144A.47. The rules shall include
 3.15 the following:

3.16 (1) provisions to assure, to the extent possible, the health, safety and well-being, and
 3.17 appropriate treatment of persons who receive home care services;

3.18 (2) requirements that home care providers furnish the commissioner with specified
 3.19 information necessary to implement sections 144A.43 to 144A.47;

3.20 (3) standards of training of home care provider personnel, which may vary according
 3.21 to the nature of the services provided or the health status of the consumer;

3.22 (4) standards for medication management which may vary according to the nature of
 3.23 the services provided, the setting in which the services are provided, or the status of the
 3.24 consumer. Medication management includes the central storage, handling, distribution,
 3.25 and administration of medications;

3.26 (5) standards for supervision of home care services requiring supervision by a
 3.27 registered nurse or other appropriate health care professional which must occur on site
 3.28 at least every 62 days, or more frequently if indicated by a clinical assessment, and in
 3.29 accordance with sections 148.171 to 148.285 and rules adopted thereunder, except that a
 3.30 person performing home care aide tasks for a class B licensee providing paraprofessional
 3.31 services does not require nursing supervision;

3.32 (6) standards for client evaluation or assessment which may vary according to the
 3.33 nature of the services provided or the status of the consumer;

4.1 (7) requirements for the involvement of a consumer's physician, the documentation
4.2 of physicians' orders, if required, and the consumer's treatment plan, and the maintenance
4.3 of accurate, current clinical records;

4.4 (8) the establishment of different classes of licenses for different types of providers
4.5 and different standards and requirements for different kinds of home care services; ~~and~~

4.6 (9) operating procedures required to implement the home care bill of rights;

4.7 (10) standards and requirements for home health aides to complete a class on ethical
4.8 practice prior to employment and at least one hour annually as a component of the 12-hour
4.9 continuing education requirement; and

4.10 (11) requirements for home care providers to establish employee drug and alcohol
4.11 testing policies and procedures that comply with sections 181.950 to 181.957.