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SECRETARY OF STATE

## **WEST VIRGINIA LEGISLATURE**

vetted

FIRST REGULAR SESSION, 2005

# ENROLLED

## COMMITTEE SUBSTITUTE FOR House Bill No. 2381

(By Delegates Amores, Webster, Palumbo and Kominar)

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Passed April 5, 2005

In Effect Ninety Days from Passage

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OFFICE WEST VIRGINIA SECRETARY OF STATE

### ENROLLED

#### COMMITTEE SUBSTITUTE

#### FOR

## H. B. 2381

(BY DELEGATES AMORES, WEBSTER, PALUMBO AND KOMINAR)

[Passed April 5,2005; in effect ninety days from passage.]

AN ACT to amend the Code of West Virginia, 1931, as amended, by adding thereto a new section, designated §16-5B-14; and to amend said code by amending and reenacting §16-5C-5, §16-5D-5, §16-5E-1a, and §16-5N-5, all relating to patient or resident visitation rights; requiring public or private hospitals to permit patient visitation privileges for nonrelatives under certain circumstances; and requiring the director to propose legislative rules for certain resident visitation rights at nursing homes, assisted living residences, legally unlicensed health care homes and residential care communities.

Be it enacted by the Legislature of West Virginia:

That the Code of West Virginia, 1931, as amended, be amended by adding thereto a new section, designated §16B-5B-14; and that

§16-5C-5, §16-5E-1a and §16-5N-5 of said code be amended and reenacted, all to read as follows:

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#### ARTICLE 5B. HOSPITALS AND SIMILAR INSTITUTIONS.

#### §16-5B-14. Hospital visitation.

1 (a) A public or private hospital licensed pursuant to the 2 provisions of section two of this article is required to permit 3 patient visitation privileges for nonrelatives unless otherwise 4 requested by the patient or legal designee. For purposes of this section, the term "legal designee" means and includes those 5 persons eighteen years of age or older, appointed by the patient 6 7 to make health care decisions for the patient pursuant to the 8 provisions of section six, article thirty of this chapter.

9 (b) It is the intent of the Legislature that this section 10 facilitate a patient's visitation with nonrelative individuals, and 11 may not, in any way, restrict or limit allowable uses and 12 disclosures of protected health information pursuant to the 13 Health Insurance Portability and Accountability Act, 42 U.S.C. 14 §1320d-2 and the accompanying regulations in 45 CFR 15 164.500.

(c) No provision of this section may be construed to prevent
a hospital from otherwise restricting visitation privileges in
order to prevent harm to the patient or disruption to the facility.

#### ARTICLE 5C. NURSING HOMES.

#### §16-5C-5. Rules; minimum standards for nursing homes.

(a) All rules shall be proposed for legislative approval in
 accordance with the provisions of article three, chapter
 twenty-nine-a of this code. The director shall recommend the
 adoption, amendment or repeal of such rules as may be neces sary or proper to carry out the purposes and intent of this
 article. (b) The director shall recommend rules establishing

7 minimum standards of operation of nursing homes including,8 but not limited to, the following:

9 (1) Administrative policies, including: (A) An affirmative 10 statement of the right of access to nursing homes by members of recognized community organizations and community legal 11 12 services programs whose purposes include rendering assistance 13 without charge to residents, consistent with the right of resi-14 dents to privacy; and (B) a statement of the rights and responsi-15 bilities of residents in nursing homes which prescribe, as a 16 minimum, such a statement of residents' rights as included in 17 the United States Department of Health and Human Services 18 regulations, in force on the effective date of this article, 19 governing participation of nursing homes in the Medicare and 20 Medicaid programs pursuant to titles eighteen and nineteen of 21 the Social Security Act;

(2) Minimum numbers of administrators, medical directors,
nurses, aides and other personnel according to the occupancy of
the facility;

(3) Qualifications of facility's administrators, medicaldirectors, nurses, aides, and other personnel;

- 27 (4) Safety requirements;
- 28 (5) Sanitation requirements;
- 29 (6) Personal services to be provided;
- 30 (7) Dietary services to be provided;
- 31 (8) Medical records;
- 32 (9) Social and recreational activities to be made available;
- 33 (10) Pharmacy services;

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34 (11) Nursing services;

- 35 (12) Medical services;
- 36 (13) Physical facility;
- 37 (14) Resident rights;
- 38 (15) Visitation privileges that:

(A) Permit immediate access to a resident, subject to the
resident's right to deny or withdraw consent at any time, by
immediate family or other relatives of the resident;

42 (B) Permit immediate access to a resident, subject to
43 reasonable restrictions and the resident's right to deny or
44 withdraw consent at any time, by others who are visiting with
45 the consent of the resident; and

46 (C) Permit access to other specific persons or classes of47 persons consistent with state and federal law.

48 (16) Admission, transfer and discharge rights.

#### ARTICLE 5D. ASSISTED LIVING RESIDENCES.

#### §16-5D-5. Rules; minimum standards for assisted living residences.

1 (a) The secretary shall propose rules for legislative approval 2 in accordance with the provisions of article three, chapter 3 twenty-nine-a of this code to carry out the purposes and intent 4 of this article and to enable the secretary to exercise the powers 5 and perform the duties conferred upon the secretary by this 6 article.

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7 (b) The secretary shall propose rules establishing minimum
8 standards of operation of assisted living residences, including,
9 but not limited to, the following:

10 (1) Administrative policies, including:

(A) An affirmative statement of the right of access to
assisted living residences by members of recognized community organizations and community legal services programs
whose purposes include rendering assistance without charge to
residents, consistent with the right of residents to privacy; and

16 (B) A statement of the rights and responsibilities of 17 residents;

(2) Minimum numbers and qualifications of personnel,
including management, medical and nursing, aides, orderlies
and support personnel, according to the size and classification
of the assisted living residence;

- 22 (3) Safety requirements;
- 23 (4) Sanitation requirements;
- 24 (5) Protective and personal services to be provided;
- 25 (6) Dietary services to be provided;
- 26 (7) Maintenance of health records;
- 27 (8) Social and recreational activities to be made available;
- 28 (9) Physical facilities;

(10) Requirements related to provision of limited andintermittent nursing;

(11) Visitation privileges governing access to a resident by
immediate family or other relatives of the resident and by other
persons who are visiting with the consent of the resident;

34 (12) Such other categories as the secretary determines to be35 appropriate to ensure resident's health, safety and welfare.

36 (c) The secretary shall include in rules detailed standards
37 for each of the categories of standards established pursuant to
38 subsections (b) and (d) of this section and shall classify such
39 standards as follows:

(1) Class I standards are standards the violation of which,
as the secretary determines, would present either an imminent
danger to the health, safety or welfare of any resident or a
substantial probability that death or serious physical harm
would result;

(2) Class II standards are standards which the secretary
determines have a direct or immediate relationship to the
health, safety or welfare of any resident, but which do not
create imminent danger;

49 (3) Class III standards are standards which the secretary
50 determines have an indirect or a potential impact on the health,
51 safety or welfare of any resident.

(d) An assisted living residence shall attain substantial
compliance with standards established pursuant to this section
and such other requirements for a license as may be established
by rule under this article.

#### ARTICLE 5E. REGISTRATION AND INSPECTION OF SERVICE PROVID-ERS IN LEGALLY UNLICENSED HEALTH CARE HOMES.

§16-5E-1a. Powers, rights and duties of the director.

In the administration of this article, the director shall have
 the following powers, duties and rights:

(a) To promulgate and enforce rules governing complaint
investigations within the homes of legally unlicensed health
care providers registered under this article. Such rules shall
include the minimum health, safety and welfare standards in the
following areas:

8 (1) Physical environment;

9 (2) Nutrition;

10 (3) Requirements related to limited and intermittent nursing11 care;

12 (4) Medication administration;

13 (5) Protective and personal services to be provided;

14 (6) Treatment;

(7) Visitation privileges governing access to a resident by
immediate family or other relatives of the resident and by other
persons who are visiting with the consent of the resident;

(8) Such other categories as the director determines to beappropriate to ensure residents' health, safety and welfare.

(b) To exercise as sole authority all powers relating to
issuance, suspension and revocation of registration of legally
unlicensed homes providing health care;

23 (c) To issue directed plans of correction for deficiencies24 identified during complaint investigations;

(d) To order closure of any home for failure to comply witha directed plan of corrections;

27 (e) To take all actions required under the provisions of 28 sections three, four, five and six of this article; and

29 (f) To deny registration to any operator of a legally unli-30 censed home who is listed on the state abuse registry.

#### **ARTICLE 5N. RESIDENTIAL CARE COMMUNITIES.**

#### §16-5N-5. Rules: minimum standards for residential care communities.

1 (a) The secretary shall, by the first day of July, one thou-2 sand nine hundred ninety-eight, propose all rules that may be 3 necessary or proper to implement or effectuate the purposes and intent of this article and to enable the director to exercise the 4 powers and perform the duties conferred herein. All rules 5 authorized or required pursuant to this article shall be proposed 6 7 by the secretary and promulgated in accordance with the 8 provisions governing legislative rules, contained in article three, 9 chapter twenty-nine-a of this code.

10 (b) The secretary shall propose rules establishing minimum standards for the operation of residential care communities, 11 12 including, but not limited to, the following:

13 (1) Administrative policies, including: (i) An affirmative statement of the right of access to residential care communities 14 15 by members of recognized community organizations and community legal services programs whose purposes include 16 rendering assistance without charge to residents, consistent with 17 18 the right of residents to privacy; and (ii) a statement of the 19 rights and responsibilities of residents;

20 (2) Minimum numbers and qualifications of residential care 21 community personnel according to the size, classification and 22 health care needs of the residential care community;

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(3) Safety requirements, except for those fire and life safety
requirements under the jurisdiction of the State Fire Marshal;

25 (4) Sanitation requirements;

26 (5) Protective and personal services required to be pro-27 vided;

28 (6) Dietary services required to be provided;

29 (7) Maintenance of health records, including confidential-30 ity;

31 (8) Social and recreational activities required to be made32 available;

33 (9) Physical facilities;

34 (10) Requirements related to limited and intermittent35 nursing care;

(11) Visitation privileges governing access to a resident by
immediate family or other relatives of the resident and by other
persons who are visiting with the consent of the resident;

39 (12) Other items or considerations that the secretary
40 considers appropriate to ensure the health, safety and welfare of
41 residents of residential care communities.

42 (c) The secretary shall propose rules that include detailed
43 specifications for each category of standards required under
44 subsections (b) and (d) of this section, and shall classify these
45 standards as follows:

46 (1) Class I standards, the violation of which presents either
47 an imminent danger to the health, safety or welfare of a resident
48 or a substantial probability that death or serious physical harm
49 may result;

50 (2) Class II standards, the violation of which directly 51 implicates the health, safety or welfare of a resident, but which 52 does not present imminent danger thereto; and

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(3) Class III standards, the violation of which has an
indirect or potential impact on the health, safety or welfare of
any resident.

(d) A residential care community shall attain substantial
compliance in every category of standard enumerated in this
section in order to be considered as being in substantial
compliance with the requirements of this article and the rules
promulgated hereunder.

61 (e) Until such time as the secretary proposes rules govern-62 ing residential care communities under this section, existing 63 rules governing residential board and care homes shall apply to 64 residential care communities and shall be construed so as to 65 conform with the provisions of this article in their application to residential care communities: Provided, That to the extent 66 67 any provisions of the rule governing residential board and care 68 homes conflict with the provisions of this article, the provisions 69 of this article shall govern.

That Joint Committee on Enrolled Bills hereby certifies that the foregoing bill is correctly enrolled.

Chairman Senate Commi Chairman House Committee

Originating in the House.

In effect ninety days from passage.

Clerk of the Senate

Brigg to. Bar Clerk of the House of Delegates President of the Senate

of the House of Delegates Speaker

The within 10 lisappi Md this the day of \_ 2005. Governor

PRESENTED TO THE GOVERNOR ς 2 Date Time 0