

COMMITTEE ON HEALTH AND HUMAN SERVICES

SENATE AMENDMENTS TO S.B. 1157

(Reference to printed bill)

- 1 Page 1, line 7, strike the comma insert "OR"; strike "OR BEHAVIORAL"
2 Line 8, strike "HEALTH RESIDENTIAL FACILITY"
3 Line 14, strike the comma insert "OR"
4 Line 15, strike "OR BEHAVIORAL HEALTH RESIDENTIAL FACILITY"
5 Line 23, after "AND" insert "BASIC"
6 Line 25, after "DATES" insert "OF RECENT EPISODES"
7 Line 29, strike the comma insert "OR"
8 Line 30, strike "OR BEHAVIORAL HEALTH RESIDENTIAL FACILITY"
9 Line 31, strike "PERSON'S"; after the comma insert "IF AVAILABLE,"; strike
10 "THIS"
11 Line 32, strike "PERSON" insert "A POINT OF CONTACT"
12 Line 33, after "PROVIDED" insert "TWENTY-FOUR HOURS A DAY, SEVEN DAYS A WEEK"
13 Between lines 33 and 34, insert:
14 "8. A COPY OF THE RESIDENT'S HEALTH INSURANCE PORTABILITY AND
15 ACCOUNTABILITY ACT RELEASE AUTHORIZING A RECEIVING HOSPITAL TO COMMUNICATE
16 WITH THE ASSISTED LIVING CENTER OR ASSISTED LIVING HOME TO PLAN FOR THE
17 RESIDENT'S DISCHARGE.
18 B. THE ASSISTED LIVING CENTER OR ASSISTED LIVING HOME MUST NOTIFY
19 THE RESIDENT'S AUTHORIZED REPRESENTATIVE THAT THE RESIDENT WAS TRANSPORTED
20 TO A HOSPITAL AND PROVIDE THE NAME AND LOCATION OF THE HOSPITAL."
21 Reletter to conform
22 Line 39, strike the comma insert "OR"; strike "OR"
23 Line 40, strike "BEHAVIORAL HEALTH RESIDENTIAL FACILITY"

1 Page 2, strike lines 3 through 11, insert:

2 "2. INCLUDE POINT-OF-CONTACT INFORMATION FOR THE DISCHARGING
3 HOSPITAL, INCLUDING A TELEPHONE NUMBER, EMAIL ADDRESS AND, IF AVAILABLE, A
4 CELL PHONE NUMBER, THAT WILL BE MONITORED AND RESPONDED TO TWENTY-FOUR
5 HOURS A DAY, SEVEN DAYS A WEEK. THE DISCHARGING HOSPITAL'S DESIGNATED
6 POINT OF CONTACT MUST BE AVAILABLE TO CONSULT WITH THE RECEIVING ASSISTED
7 LIVING CENTER OR ASSISTED LIVING HOME TO ASSIST IN RETURNING OR ADMITTING
8 THE PATIENT TO THE FACILITY AND TO CLARIFY ANY NEEDED INFORMATION IN THE
9 DISCHARGE PLAN BEFORE OR IMMEDIATELY AFTER THE PATIENT IS DISCHARGED IN
10 ORDER FOR THE RECEIVING FACILITY TO PROVIDE APPROPRIATE CARE TO THE
11 PATIENT. IF THE POINT OF CONTACT IS NOT A LICENSED MEDICAL OR NURSING
12 PROFESSIONAL AND THE CONSULTATION REQUIRES A QUALIFIED LICENSED MEDICAL OR
13 NURSING PROFESSIONAL, THE DISCHARGING HOSPITAL WILL IMPLEMENT PROCEDURES TO
14 PROVIDE SUCH CONSULTATION."

15 Line 29, strike the comma insert "OR"

16 Line 30, strike "OR BEHAVIORAL HEALTH RESIDENTIAL FACILITY"

17 Line 43, strike the second comma insert "OR"; strike "OR"

18 Line 44, strike "BEHAVIORAL HEALTH RESIDENTIAL FACILITY"

19 Page 3, line 3, strike "EACH" insert "ANY NEW"

20 Line 4, strike "ADMINISTERED" insert "PRESCRIBED"

21 Strike line 5, insert "THAT THE PATIENT IS EXPECTED TO CONTINUE AFTER
22 DISCHARGE."

23 Line 7, strike the comma insert "OR"; strike "OR BEHAVIORAL HEALTH
24 RESIDENTIAL"

25 Line 8, strike "FACILITY"

26 Between lines 9 and 10, insert:

27 "10. DOCUMENT THAT THE DISCHARGING HOSPITAL NOTIFIED THE PATIENT'S
28 AUTHORIZED REPRESENTATIVE THAT THE PATIENT WAS DISCHARGED AND PROVIDED THE
29 NAME, LOCATION AND CONTACT INFORMATION OF THE RECEIVING FACILITY."

30 Line 11, strike the comma insert "OR"

31 Line 12, strike "OR BEHAVIORAL HEALTH RESIDENTIAL FACILITY"

32 Line 14, strike the comma insert "OR"; strike "OR BEHAVIORAL"

- 1 Page 3, line 15, strike "HEALTH RESIDENTIAL FACILITY"; strike "VISUAL"
- 2 Line 19, strike "BY CONTACTING" insert "WITH"; strike the comma insert "OR";
- 3 after "HOME" insert a period
- 4 Strike lines 20 through 23
- 5 Line 24, strike "HOME OR BEHAVIORAL HEALTH RESIDENTIAL FACILITY AND" insert
- 6 "THE HOSPITAL"
- 7 Line 25, after the period insert "THE ASSISTED LIVING CENTER OR ASSISTED
- 8 LIVING HOME SHALL PERFORM THE ASSESSMENT WITHIN EIGHT HOURS AFTER RECEIVING
- 9 NOTIFICATION FROM THE HOSPITAL."
- 10 Line 37, strike "C" insert "D"
- 11 Line 38, strike the comma insert "OR"; strike "OR BEHAVIORAL HEALTH"
- 12 Line 39, strike "RESIDENTIAL FACILITY"
- 13 Amend title to conform

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C: MH