SENATE SUBSTITUTE

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HOUSE COMMITTEE SUBSTITUTE

FOR

HOUSE BILLS NOS. 2116, 2097, 1690 & 2221

AN ACT

To amend chapters 191 and 630, RSMo, by adding thereto three new sections relating to the visitation rights of patients.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Chapters 191 and 630, RSMo, are amended by adding thereto three new sections, to be known as sections 191.1400, 191.2290, and 630.202, to read as follows:

191.1400. 1. This section shall be known and may be cited as the "Compassionate Care Visitation Act". 2. For purposes of this section, the following terms mean:

5 (1) "Compassionate care visitor", a patient's or

6 resident's friend, family member, or other person requested

7 by the patient or resident for the purpose of a

8 compassionate care visit;

9 (2) "Compassionate care visit", a visit necessary to 10 meet the physical or mental needs of the patient or

11 resident, including, but not limited to:

12 (a) For end-of-life situations, including making

13 decisions regarding end-of-life care during in-person

14 contact or communication with the compassionate care visitor;

15 (b) For adjustment support or communication support,

16 including, but not limited to, assistance with hearing and

17 speaking;

18	(c) For emotional support;
19	(d) For physical support after eating or drinking
20	issues, including weight loss or dehydration; or
21	(e) For social support;
22	(3) "Health care facility", a hospital, as defined in
23	section 197.020, a long-term care facility licensed under
24	chapter 198, or a hospice facility certified under chapter
25	<u>197.</u>
26	3. A health care facility shall allow a patient or
27	resident, or his or her legal guardian, to permit at least
28	two compassionate care visitors simultaneously to have in-
29	person contact with the patient or resident during visiting
30	hours. Compassionate care visitation hours shall be no less
31	than six hours daily and shall include evenings, weekends,
32	and holidays. Health care facilities shall be permitted to
33	place additional restrictions on children under the age of
34	fourteen who are compassionate care visitors.
34 35	fourteen who are compassionate care visitors. <u>4. Health care facilities shall have a visitation</u>
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35 36	4. Health care facilities shall have a visitation policy that allows, at a minimum:
35 36 37	4. Health care facilities shall have a visitation policy that allows, at a minimum: (1) Twenty-four hour attendance by a compassionate
35 36 37 38	4. Health care facilities shall have a visitation policy that allows, at a minimum: (1) Twenty-four hour attendance by a compassionate care visitor when reasonably appropriate;
35 36 37 38 39	4. Health care facilities shall have a visitation policy that allows, at a minimum: (1) Twenty-four hour attendance by a compassionate care visitor when reasonably appropriate; (2) A compassionate care visitor to leave and return
35 36 37 38 39 40	4. Health care facilities shall have a visitation policy that allows, at a minimum: (1) Twenty-four hour attendance by a compassionate care visitor when reasonably appropriate; (2) A compassionate care visitor to leave and return within the hours of the visitation policy. A patient or
35 36 37 38 39 40 41	4. Health care facilities shall have a visitation policy that allows, at a minimum: (1) Twenty-four hour attendance by a compassionate care visitor when reasonably appropriate; (2) A compassionate care visitor to leave and return within the hours of the visitation policy. A patient or resident may receive multiple compassionate care visitors during visitation hours, subject to the provisions of subsection 3 of this section; and
35 36 37 38 39 40 41 42	<u>4. Health care facilities shall have a visitation</u> <u>policy that allows, at a minimum:</u> <u>(1) Twenty-four hour attendance by a compassionate</u> <u>care visitor when reasonably appropriate;</u> <u>(2) A compassionate care visitor to leave and return</u> <u>within the hours of the visitation policy. A patient or</u> <u>resident may receive multiple compassionate care visitors</u> <u>during visitation hours, subject to the provisions of</u>
35 36 37 38 39 40 41 42 43	4. Health care facilities shall have a visitation policy that allows, at a minimum: (1) Twenty-four hour attendance by a compassionate care visitor when reasonably appropriate; (2) A compassionate care visitor to leave and return within the hours of the visitation policy. A patient or resident may receive multiple compassionate care visitors during visitation hours, subject to the provisions of subsection 3 of this section; and
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 35 36 37 38 39 40 41 42 43 44 45 46 	4. Health care facilities shall have a visitation policy that allows, at a minimum: (1) Twenty-four hour attendance by a compassionate care visitor when reasonably appropriate; (2) A compassionate care visitor to leave and return within the hours of the visitation policy. A patient or resident may receive multiple compassionate care visitors during visitation hours, subject to the provisions of subsection 3 of this section; and (3) Parents with custody or unsupervised visitation rights, legal guardians, and other persons standing in loco parentis to be physically present with a minor child while

50	(1) Provide patients or residents with effective
51	communication supports or other reasonable accommodations in
52	accordance with federal and state laws to assist in remote
53	personal contact; and
54	(2) Comply with the provisions of the Americans with
55	Disabilities Act of 1990, 42 U.S.C. Section 12101 et seq.
56	6. A health care facility may limit:
57	(1) The number of visitors per patient or resident at
58	one time based on the size of the building and physical
59	space;
60	(2) Movement of visitors within the health care
61	facility, including restricting access to operating rooms,
62	isolation rooms or units, behavioral health units, or other
63	commonly restricted areas; and
64	(3) Access of any person to a patient:
65	(a) At the request of the patient or resident, or the
66	legal guardian of such;
67	(b) At the request of a law enforcement agency for a
68	person in custody;
69	(c) Due to a court order;
70	(d) To prevent substantial disruption to the care of a
71	patient or resident or the operation of the facility;
72	(e) During the administration of emergency care in
73	critical situations;
74	(f) If the person has measurable signs and symptoms of
75	a transmissible infection; except that, the health care
76	facility shall allow access through telephone or other means
77	of telecommunication that ensure the protection of the
78	patient or resident;
79	(g) If the health care facility has reasonable cause
80	to suspect the person of being a danger or otherwise
81	contrary to the health or welfare of the patient or
82	resident, other patients or residents, or facility staff; or

83	(h) If, in the clinical judgment of the patient's or
84	resident's attending physician, the presence of visitors
85	would be medically or therapeutically contraindicated to the
86	health or life of the patient or resident, and the attending
87	physician attests to such in the patient's or resident's
88	chart.
89	7. Nothing in this section shall limit a health care
90	facility from limiting or redirecting visitors of a patient
91	or resident in a shared room to ensure the health and safety
92	of the patients or residents in the shared room. Nothing in
93	this section shall be construed to prohibit health care
94	facilities from adopting reasonable safety or security
95	restrictions or other requirements for visitors.
96	8. Nothing in this section shall be construed to waive
97	or change long-term care facility residents' rights under
98	sections 198.088 and 198.090.
99	9. No later than January 1, 2023, the department of
100	health and senior services shall develop informational
101	materials for patients, residents, and their legal
102	guardians, regarding the provisions of this section. A
103	health care facility shall make these informational
104	materials accessible upon admission or registration and on
105	the primary website of the health care facility.
106	10. A compassionate care visitor of a patient or
107	resident of a health care facility may report any violation
108	of the provisions of this section by a health care facility
109	to the department of health and senior services. The
110	department shall begin investigating any such complaint
111	filed under this subsection within thirty-six hours of
112	receipt of the complaint. The purpose of such investigation
113	shall be to ensure compliance with the provisions of this
114	section and any such investigation shall otherwise comply
115	with the complaint processes established by section 197.080

116	for a hospital, section 197.268 for a hospice facility, and
117	section 198.532 for a long-term care facility.
118	11. No health care facility shall be held liable for
119	damages in an action involving a liability claim against the
120	facility arising from the compliance with the provisions of
121	this section. The immunity described in this subsection
122	shall not apply to any act or omission by a facility, its
123	employees, or its contractors that constitutes recklessness
124	or willful misconduct and shall be provided in addition to,
125	and shall in no way limit, any other immunity protections
126	that may apply in state or federal law.
127	12. The provisions of this section shall not be
128	terminated, suspended, or waived except by a declaration of
129	emergency under chapter 44, during which time the provisions
130	of sections 191.2290 and 630.202 shall apply.
	191.2290. 1. The provisions of this section and
2	section 630.202 shall be known and may be cited as the
3	"Essential Caregiver Program Act".
4	2. As used in this section, the following terms mean:
5	(1) "Department", the department of health and senior
6	services;
7	(2) "Essential caregiver", a family member, friend,
8	guardian, or other individual selected by a facility
9	resident or patient who has not been adjudged incapacitated
10	under chapter 475, or the guardian or legal representative
11	of the resident or patient;
12	(3) "Facility", a hospital licensed under chapter 197
13	or a facility licensed under chapter 198.
14	3. During a state of emergency declared pursuant to
15	chapter 44 relating to infectious, contagious, communicable,
16	or dangerous diseases, a facility shall allow a resident or
17	patient who has not been adjudged incapacitated under
18	chapter 475, a resident's or patient's guardian, or a

19 resident's or patient's legally authorized representative to 20 designate an essential caregiver for in-person contact with 21 the resident or patient in accordance with the standards and guidelines developed by the department under this section. 22 23 Essential caregivers shall be considered as part of the 24 resident's or patient's care team, along with the resident's or patient's health care providers and facility staff. 25 26 4. The facility shall inform, in writing, residents and patients who have not been adjudged incapacitated under 27 28 chapter 475, or guardians or legal representatives of residents or patients, of the "Essential Caregiver Program" 29 30 and the process for designating an essential caregiver. 31 5. The department shall develop standards and quidelines concerning the essential caregiver program, 32 including, but not limited to, the following: 33 34 (1) The facility shall allow at least two individuals per resident or patient to be designated as essential 35 36 caregivers, although the facility may limit the in-person 37 contact to one caregiver at a time. The caregiver shall not 38 be required to have previously served in a caregiver capacity prior to the declared state of emergency; 39 40 (2) The facility shall establish a reasonable inperson contact schedule to allow the essential caregiver to 41 42 provide care to the resident or patient for at least four hours each day, including evenings, weekends, and holidays, 43 44 but shall allow for twenty-four-hour in-person care as 45 necessary and appropriate for the well-being of the resident or patient. The essential caregiver shall be permitted to 46 leave and return during the scheduled hours or be replaced 47 by another essential caregiver; 48 (3) The facility shall establish procedures to enable 49 physical contact between the resident or patient and the 50 51 essential caregiver. The facility may not require the

52	essential caregiver to undergo more stringent screening,
53	testing, hygiene, personal protective equipment, and other
54	infection control and prevention protocols than required of
55	facility employees;
56	(4) The facility shall specify in its protocols the
57	criteria that the facility will use if it determines that in-
58	person contact by a particular essential caregiver is
59	inconsistent with the resident's or patient's therapeutic
60	care and treatment or is a safety risk to other residents,
61	patients, or staff at the facility. Any limitations placed
62	upon a particular essential caregiver shall be reviewed and
63	documented every seven days to determine if the limitations
64	remain appropriate; and
65	(5) The facility may restrict or revoke in-person
66	contact by an essential caregiver who fails to follow
67	required protocols and procedures established under this
68	subsection.
69	6. (1) A facility may request from the department a
70	suspension of in-person contact by essential caregivers for
71	a period not to exceed seven days. The department may deny
72	the facility's request to suspend in-person contact with
73	essential caregivers if the department determines that such
74	in-person contact does not pose a serious community health
75	risk. A facility may request from the department an
76	extension of a suspension for more than seven days;
77	provided, that the department shall not approve an extension
78	period for longer than seven days at a time. A facility
79	shall not suspend in-person caregiver contact for more than
80	fourteen consecutive days in a twelve-month period or for
81	more than forty-five total days in a twelve-month period.
82	(2) The department shall suspend in-person contact by
83	essential caregivers under this section if it determines
84	that doing so is required under federal law, including a

85 determination that federal law requires a suspension of inperson contact by members of the resident's or patient's 86 87 care team. (3) The attorney general shall institute all suits 88 89 necessary on behalf of the state to defend the right of the 90 state to implement the provisions of this section to ensure access by residents and patients to essential caregivers as 91 92 part of their care team. 93 The provisions of this section shall not be 7. 94 construed to require an essential caregiver to provide 95 necessary care to a resident or patient and a facility shall 96 not require an essential caregiver to provide necessary care. 97 8. The provisions of this section shall not apply to those residents or patients whose particular plan of 98 99 therapeutic care and treatment necessitates restricted or 100 otherwise limited visitation for reasons unrelated to the 101 stated reasons for the declared state emergency. 102 9. A facility, its employees, and its contractors 103 shall be immune from civil liability for an injury or harm 104 caused by or resulting from: 105 (1) Exposure to a contagious disease or other harmful agent that is specified during the state of emergency 106 107 declared pursuant to chapter 44; or (2) Acts or omissions by essential caregivers who are 108 109 present in the facility; 110 as a result of the implementation of the essential caregiver program under this section. The immunity described in this 111 subsection shall not apply to any act or omission by a 112 facility, its employees, or its contractors that constitutes 113 recklessness or willful misconduct. 114 630.202. 1. As used in this section, the following 2 terms mean:

3 (1) "Department", the department of mental health;

4	(2) "Essential caregiver", a family member, friend,
5	guardian, or other individual selected by a facility
6	resident or client who has not been adjudged incapacitated
7	under chapter 475, or the guardian or legal representative
8	of the resident or client;
9	(3) "Facility", a facility operated, licensed, or
10	certified by the department.
11	2. During a state of emergency declared pursuant to
12	chapter 44 relating to infectious, contagious, communicable,
13	or dangerous diseases, a facility shall allow a resident or
14	client who has not been adjudged incapacitated under chapter
15	475, a resident's or client's guardian, or a resident's or
16	client's legally authorized representative to designate an
17	essential caregiver for in-person contact with the resident
18	or client in accordance with the standards and guidelines
19	developed by the department under this section. Essential
20	caregivers shall be considered a part of the resident's or
21	client's care team, along with the resident's or client's
22	health care providers and facility staff.
23	3. The facility shall inform, in writing, residents
24	and clients who have not been adjudged incapacitated under
25	chapter 475, or guardians or legal representatives of
26	residents or clients, of the "Essential Caregiver Program"
27	and the process for designating an essential caregiver.
28	4. The department shall develop standards and
29	guidelines concerning the essential caregiver program,
30	including, but not limited to, the following:
31	(1) The facility shall allow at least two individuals
32	per resident or client to be designated as essential
33	caregivers, although the facility may limit the in-person
34	contact to one caregiver at a time. The caregiver shall not
35	be required to have previously served in a caregiver
36	capacity prior to the declared state of emergency;

27	(2) The featlity shall establish a measurable in
37	(2) The facility shall establish a reasonable in-
38	person contact schedule to allow the essential caregiver to
39	provide care to the resident or client for at least four
40	hours each day, including evenings, weekends, and holidays,
41	but shall allow for twenty-four-hour in-person care as
42	necessary and appropriate for the well-being of the resident
43	or client and consistent with the safety and security of the
44	facility's staff and other residents or clients. The
45	essential caregiver shall be permitted to leave and return
46	during the scheduled hours or be replaced by another
47	essential caregiver;
48	(3) The facility shall establish procedures to enable
49	physical contact between the resident or client and the
50	essential caregiver. The facility may not require the
51	essential caregiver to undergo more stringent screening,
52	testing, hygiene, personal protective equipment, and other
53	infection control and prevention protocols than required of
54	facility employees;
55	(4) The facility shall specify in its protocols the
56	criteria that the facility will use if it determines that in-
57	person contact by a particular essential caregiver is
58	inconsistent with the resident's or client's therapeutic
59	care and treatment or is a safety risk to other residents,
60	clients, or staff at the facility. Any limitations placed
61	upon a particular essential caregiver shall be reviewed and
62	documented every seven days to determine if the limitations
63	remain appropriate; and
64	(5) The facility may restrict or revoke in-person
65	contact by an essential caregiver who fails to follow
66	required protocols and procedures established under this
67	subsection.
68	5. (1) A facility may request from the department a
69	suspension of in-person contact by essential caregivers for

a period not to exceed seven days. The department may deny 70 71 the facility's request to suspend in-person contact with 72 essential caregivers if the department determines that such in-person contact does not pose a serious community health 73 risk. A facility may request from the department an 74 extension of a suspension for more than seven days; 75 provided, that the department shall not approve an extension 76 77 period for longer than seven days at a time. A facility shall not suspend in-person caregiver visitation for more 78 79 than fourteen consecutive days in a twelve-month period or for more than forty-five total days in a twelve-month period. 80 81 (2) The department shall suspend in-person contact by 82 essential caregivers under this section if it determines that doing so is required under federal law, including a 83 determination that federal law requires a suspension of in-84 85 person contact by members of the resident's or client's care 86 team. 87 (3) The attorney general shall institute all suits 88 necessary on behalf of the state to defend the right of the state to implement the provisions of this section to ensure 89 access by residents and clients to essential caregivers as 90 part of their care team. 91 92 The provisions of this section shall not be 6. 93 construed to require an essential caregiver to provide 94 necessary care to a resident or client and a facility shall 95 not require an essential caregiver to provide necessary care. 96 7. The provisions of this section shall not apply to those residents or clients whose particular plan of 97 therapeutic care and treatment necessitates restricted or 98 99 otherwise limited visitation for reasons unrelated to the 100 stated reason for the declared state of emergency.

101	8. A facility, its employees, and its contractors
102	shall be immune from civil liability for an injury or harm
103	caused by or resulting from:
104	(1) Exposure to a contagious disease or other harmful
105	agent that is specified during the state of emergency
106	declared pursuant to chapter 44; or
107	(2) Acts or omissions by essential caregivers who are
108	present in the facility;
109	as a result of the implementation of the essential caregiver
110	program under this section. The immunity described in this
111	subsection shall not apply to any act or omission by a
112	facility, its employees, or its contractors that constitutes
113	recklessness or willful misconduct.