

By: Senator(s) Chism

To: Public Health and
Welfare

SENATE BILL NO. 2036

1 AN ACT TO ENACT THE NO PATIENT LEFT ALONE ACT; TO PROVIDE
2 THAT A HEALTH CARE PROVIDER SHALL ALLOW CLIENTS TO RECEIVE
3 VISITORS DURING THEIR ADMISSION TO, OR RESIDENCY AT, THE
4 PROVIDER'S FACILITY IN ACCORDANCE WITH RULES PROMULGATED BY THE
5 DEPARTMENT OF HEALTH; TO REQUIRE A PROVIDER TO ALLOW IN-PERSON
6 VISITS IN CERTAIN CIRCUMSTANCES; TO PROVIDE THAT IF CIRCUMSTANCES
7 REQUIRE A PROVIDER TO RESTRICT PUBLIC ACCESS TO THE FACILITY DUE
8 TO HEALTH OR SAFETY CONCERNS, THE PROVIDER SHALL DEVELOP ALTERNATE
9 VISITATION PROTOCOLS THAT ALLOW VISITATION TO THE GREATEST EXTENT
10 POSSIBLE WHILE MAINTAINING CLIENT HEALTH AND SAFETY; TO PROVIDE
11 THAT IF A PROVIDER DOES NOT CORRECT A VIOLATION IN THE TIME
12 SPECIFIED BY THE DEPARTMENT OF HEALTH OR REPEATS A VIOLATION, THE
13 DEPARTMENT OF HEALTH SHALL IMPOSE AN ADMINISTRATIVE FINE OF AT
14 LEAST \$500.00 PER VIOLATION; AND FOR RELATED PURPOSES.

15 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

16 **SECTION 1.** This act shall be known and may be cited as the
17 "No Patient Left Alone Act."

18 **SECTION 2.** (1) A health care provider shall allow clients
19 to receive visitors during their admission to, or residency at,
20 the provider's facility in accordance with rules promulgated by
21 the Department of Health.

22 (2) If circumstances require a provider to restrict public
23 access to the facility due to health or safety concerns, the
24 provider shall develop alternate visitation protocols that allow



visitation to the greatest extent possible while maintaining client health and safety.

(3) A provider that admits clients to its facility or serves clients who are residents in the provider's facility must allow in-person visits in all of the following circumstances:

(a) End-of-life situations;

(b) A client who was living with his or her family before recently being admitted to the provider's facility and who is struggling with the change in environment and lack of physical family support;

(c) A client who is grieving the loss of a friend or family member who recently died;

(d) A client who needs cueing or encouragement to eat or drink and was previously provided such cueing or encouragement by a family member or caregiver, and the client is experiencing weight loss or dehydration;

(e) A client who previously talked and interacted with others and is experiencing emotional distress, is seldom speaking or is crying more frequently than he or she did previously; and

(f) Any other circumstance the Department of Health deems appropriate.

(4) To ensure the health and safety of clients, a provider may require visitors to adhere to infection control protocols, including passing a health screening and wearing personal protective equipment while on the premises of the provider's



50 facility. A provider may refuse visitation if the visitor does
51 not pass a health screening or refuses to comply with the
52 provider's infection control protocols.

53 (5) Providers shall submit their visitation policies to the
54 Department of Health by January 1 each year for approval. If the
55 Department of Health finds any provision of a provider's
56 visitation policy deficient or not in compliance with this section
57 or the department's rules, the provider must submit an updated
58 policy conforming such provision within thirty (30) days after the
59 department's notice.

60 (6) Providers must notify clients and, if possible, their
61 family members or caregivers of their visitation rights under this
62 section and provide them with the contact information for the
63 Department of Health and the link to the dedicated webpage on the
64 department's website specified in subsection (7).

65 (7) The Department of Health must dedicate a webpage on its
66 website to explain visitation rights authorized under this section
67 and provide a method for individuals to report violations of this
68 section to the department. The department shall investigate a
69 report of a violation within thirty (30) days after receiving the
70 report.

71 (8) If a provider does not correct a violation in the time
72 specified by the Department of Health or repeats a violation, the
73 Department of Health shall impose an administrative fine of at
74 least Five Hundred Dollars (\$500.00) per violation. Each



75 occurrence and each day that the violation continues shall
76 constitute a separate violation.

77 (9) The Department of Health shall adopt rules to implement
78 this section.

79 **SECTION 3.** This act shall take effect and be in force from
80 and after July 1, 2025.

