

By: Senator(s) Chism

To: Public Health and Welfare

SENATE BILL NO. 2063

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 RESIDENT AT, THE PROVIDER'S
 4 FACILITY IN ACCORDANCE WITH RULES PROMULGATED BY THE DEPARTMENT OF
 5 HEALTH; TO REQUIRE A PROVIDER TO ALLOW IN-PERSON VISITS IN CERTAIN
 6 CIRCUMSTANCE; TO PROVIDE THAT IF CIRCUMSTANCES REQUIRE A PROVIDER
 7 TO RESTRICT PUBLIC ACCESS TO THE FACILITY DUE TO HEALTH OR SAFETY
 8 CONCERNS, THE PROVIDER SHALL DEVELOP ALTERNATE VISITATION
 9 PROTOCOLS THAT ALLOW VISITATION TO THE GREATEST EXTENT POSSIBLE
 10 WHILE MAINTAINING CLIENT HEALTH AND SAFETY; TO PROVIDE THAT IF A
 11 PROVIDER DOES NOT CORRECT A VIOLATION IN THE TIME SPECIFIED BY THE
 12 DEPARTMENT OF HEALTH OR REPEATS A VIOLATION, THE DEPARTMENT OF
 13 HEALTH SHALL IMPOSE AN ADMINISTRATIVE FINE OF AT LEAST \$500.00 PER
 14 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



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

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

30 (a) End-of-life situations;

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

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

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

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

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

46 (4) To ensure the health and safety of clients, a provider
47 may require visitors to adhere to infection control protocols,
48 including passing a health screening and wearing personal
49 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 30 days after receiving the report.

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



74 occurrence and each day that the violation continues constitutes a
75 separate violation.

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

78 **SECTION 3.** This act shall take effect and be in force from
79 and after July 1, 2024.

