SENATE CHAMBER

STATE OF OKLAHOMA

DISPOSITION

FLOOR AMENDMENT	No	1	
COMMITTEE AMENDMENT			- 6
I move to amend Senate Bill No. 7 #1878) for the title, enacting clause and			(Date) ne attached floor substitute (Request measure.
			Submitted by: Senator McIntosh
I hereby grant poemission for the floor Senator Rosino, Chair (required)	substitu	te to be adop	Senator McIntosh
Senator Stanley Senator Coleman Senator Dossett	<u>/</u>		Senator Nice Senator Pugh Senator Reinhardt
Senator Haste			Senator Standridge
Senator Hicks			Senator Thompson
Senator Paxton, President Pro Tempore	e		Senator Daniels, Majority Floor Leader
Note: Health and Human Services Con	nmittee r	najority req	uires seven (7) members' signatures.
McIntosh-DC-FS-SB761 3/18/2025 8:53 AM			
(Floor Amendments Only) Date and	Time Fi	iled: 3/18	25 5:00 CM
Untimely A	mendme	ent Cycle E	ktended Secondary Amendment

1	STATE OF OKLAHOMA			
2	1st Session of the 60th Legislature (2025)			
3	FLOOR SUBSTITUTE FOR			
4	SENATE BILL NO. 761 By: McIntosh, Sacchieri, and Hamilton of the Senate			
5				
6	and			
7	Gise and Woolley of the House			
8				
9				
10	FLOOR SUBSTITUTE			
11	An Act relating to health care; creating the Lori			
12	Brand Patient Bill of Rights Act of 2025; providing short title; creating a list of rights for a patient seeking treatment; specifying certain responsibilities of patients seeking treatment; creating certain rights for minor patients seeking treatment; specifying certain responsibilities of parents of minor patients seeking treatment; providing certain construction; providing for			
13				
14				
15				
16	codification; and providing an effective date.			
17				
18	BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:			
19	SECTION 1. NEW LAW A new section of law to be codified			
20	in the Oklahoma Statutes as Section 3501 of Title 63, unless there			
21	is created a duplication in numbering, reads as follows:			
22	This act shall be known and may be cited as the "Lori Brand			
23	Patient Bill of Rights Act of 2025".			
24				

- SECTION 2. NEW LAW A new section of law to be codified
 in the Oklahoma Statutes as Section 3501.1 of Title 63, unless there
 is created a duplication in numbering, reads as follows:
 - A. Each patient treated in this state shall have the following rights when being treated:

- 1. The right to considerate and respectful care, provided in a safe environment, free from all forms of abuse, neglect, harassment, or exploitation;
- 2. To receive information in a manner that he or she understands. Communications with the patient shall be effective and provided in a manner that facilitates understanding by the patient. Written information provided will be appropriate to the age and understanding of the patient;
- 3. To receive as much information about any proposed treatment or procedure as he or she may need in order to give informed consent or to refuse the course of treatment. Except in emergencies, this shall include a description of the procedure or treatment, the medically significant risks involved in the procedure or treatment, alternate courses of treatment or nontreatment and the risks involved in each, and the name of the person who will carry out the procedure or treatment;
- 4. To receive the name of the doctor who has primary responsibility for coordinating his or her care;

5. To have an advance directive for health care concerning treatment or to designate a surrogate decision-maker with the expectation that the hospital will honor the intent of that directive to the extent allowed by law and hospital policy. The health care provider must advise a patient of his or her rights under state law and hospital policy to make informed medical decisions, ask if the patient has an advance directive, and include that information in patient records. The patient has the right to timely information about hospital policy that may limit its ability to implement a legally valid advance directive;

- 6. To participate in the development and implementation of his or her plan of care and actively participate in decisions regarding his or her medical care;
 - 7. To accept medical care or to refuse treatment, to the extent permitted by law, and to be informed of the consequences of such refusal;
 - 8. To become informed of his or her rights as a patient in advance of, or when discontinuing, the provision of care. The patient may appoint a representative to receive this information should he or she so desire;
 - 9. To have a family member or representative of his or her choice notified promptly of his or her admission to the hospital;
 - 10. To request that no information regarding his or her admittance, diagnosis, or treatment be released;

11. To full consideration of privacy concerning his or her medical care program. Case discussion, consultation, examination, and treatment are confidential and should be conducted discreetly to protect privacy. The patient has the right to be advised as to the reason for the presence of any individual involved in his or her health care;

- 12. To access his or her medical records, including current medical records, upon a verbal or written request, in the form and format requested by the individual, if it is readily producible in such form and format (including in an electronic form or format when such medical records are maintained electronically); or, if not, in a readable hard copy form or such other form and format as agreed to by the facility and the individual, and within a reasonable time frame. The hospital must not frustrate the legitimate efforts of individuals to gain access to their own medical records and must actively seek to meet these requests as quickly as its recordkeeping system permits;
- 13. To reasonable continuity of care, when appropriate, and to be informed by the doctor and other caregivers of available and realistic patient care options when hospital care is no longer appropriate;
- 14. To confidential treatment of all communications and records pertaining to his or her care and stay at the hospital. The patient's written authorization shall be obtained before his or her

medical records can be made available to anyone not directly concerned with his or her care;

- 15. To expect that, within its capacity and policies, the hospital will make a reasonable response to the request of a patient for appropriate and medically directed care and services. The hospital must provide evaluation, service, and or a referral as indicated by the urgency of the case. When medically appropriate and legally permissible, or when a patient has requested a transfer, that patient may be transferred to another facility. The receiving facility must have first accepted the patient for transfer. The patient must also have the benefit of the complete information and explanation concerning the need for, risks and benefits of, and alternatives to such a transfer;
 - 16. The patient and the patient's representative have the right to participate in the consideration of ethical issues that might arise in the care of the patient. The hospital shall have a mechanism for the consideration of ethical issues arising in the care of patients and to provide education to caregivers and patients on ethical issues in health care;
 - 17. To be advised of the hospital's complaint or grievance process should the patient wish to communicate a concern regarding the quality of care he or she receives. This process shall include whom to contact to file a complaint. The patient shall be provided with a written notice of the complaint determination that contains

the contact information of the patient advocate or similar person or department, the steps taken on his or her behalf to investigate the complaint, the results of the complaint and, when possible, the resolution of the complaint concerning the quality of care;

- 18. If the patient is sixty-five (65) years of age or older, the message from Medicare outlining the rights of the elderly shall be provided to the patient at the time of his or her admission to the hospital;
- 19. To be advised if a hospital or doctor proposes to engage in medical education, training examinations with students or other personnel, research studies, or human experimentation affecting the patient's care or treatment. The patient has the right to consent or refuse to participate in and to have such education, training examinations, research studies, or experiments fully explained prior to consent. All information provided to subjects shall be contained in the medical record and research file, as appropriate, along with the consent forms. Refusal to participate or discontinuation of participation shall not compromise the patient's right to access care, treatment, or services;
- 20. To examine and receive an explanation of his or her bill regardless of source of payment;
- 21. To find publicly disclosed on any website for the hospital any language that would put a reasonable person on notice as to whether the hospital may be corporately owned or physician-owned.

- For purposes of this section, a public website for the hospital does not include, by way of example: social media websites, electronic payment portals, electronic patient care portals, or electronic health information exchanges;
 - 22. To remain free from restraints or seclusion in any forms that are not medically necessary or are used as a means of coercion, discipline, convenience, or retaliation by staff;

- 23. To receive the visitors whom he or she designates, including, but not limited to, a spouse, a domestic partner, another family member, or a friend. The patient has the right to withdraw or deny consent at any time. Visitation shall not be restricted, limited, or otherwise denied on the basis of race, color, national origin, religion, sex, disease type or state, or disability; and
- 24. Through use of the Hospital-Issued Notice of Noncoverage, Medicare beneficiaries have the right to be informed in advance of procedures or treatment for which Medicare may deny payment, and that the beneficiary may be personally responsible for full payment if Medicare denies payment.
- B. A patient, guardian of a patient, or legally authorized representative of a patient shall have the following responsibilities:
- 1. To provide accurate and complete information concerning the patient's present complaints, past illnesses, hospitalizations, medications, and other matters relating to his or her health;

2. To report perceived risks in the patient's care and unexpected changes in his or her condition to the responsible health care provider;

- 3. For the patient's actions should he or she refuse treatment or not follow his or her doctor's orders;
- 4. To ask questions when the patient does not understand what he or she has been told about the patient's care or what he or she is expected to do;
- 5. To be considerate of the rights of other patients and hospital personnel;
- 6. To participate in educational and discharge planning activities necessary to ensure that he or she has adequate knowledge and support services to provide him or her with a safe environment upon discharge from the hospital;
- 7. To ask the doctor or nurse what to expect regarding pain management, to discuss pain relief options with doctors and nurses and to help develop a pain management plan, to ask for pain relief when pain first begins, to help doctors and nurses assess the patient's pain, to tell the doctors and nurses if his or her pain is not relieved, and to tell doctors and nurses about any concerns about taking pain medication;
- 8. For keeping appointments and for notifying the hospital or doctor when he or she is unable to do so;

- 9. Being respectful of his or her personal property and that of other patients in the hospital;
 - 10. Following hospital procedures; and

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

- 11. Assuring that the financial obligations of his or her care are fulfilled as promptly as possible.
- C. Any minor patient has the following rights, in accordance with the laws of this state pertaining to parental consent and parental rights, when being treated in this state:
 - 1. To be treated with respect in regards to:
 - a. each child and adolescent as a unique individual, and
 - b. the role of the parent and legal guardian;
- 2. To provisions for normal physical and physiological needs of a growing child including nutrition, rest, sleep, warmth, activity, and freedom to move and explore. Minors shall, in accordance with the laws of this state pertaining to parental consent and parental rights, have the right to:
 - a. appropriate treatment in the least restrictive setting,
 - b. not receive unnecessary or excessive medication,
 - c. an individualized treatment plan,
 - d. a humane treatment environment that provides reasonable protection from harm and appropriate privacy,
 - e. separation from adult patients when possible, and

- f. regular communication between the minor patient and the patient's family or legal guardian;
 - 3. To consistent, supportive, and nurturing care;

4

5

6

7

15

22

24

- 4. To the reassuring presence of a parent, guardian, or designee of the parent or guardian;
- 5. To information about what to expect prior to, during, and following a procedure or experience and support in coping with it; and
- 9 6. To the minimization of stay duration by recognizing 10 discharge planning needs.
- D. All parents and legal guardians of minor patients in this state shall have the following responsibilities:
- 13 1. To continue in their parenting role to the extent of their ability; and
 - 2. To be available to participate in decision-making.
- E. Nothing in this section shall be construed to supersede,
 limit, or otherwise alter a parent or legal guardian's authority to
 make medical decisions on behalf of his or her minor child or
 exercise any other parental right conferred by state law including,
 but not limited to, the Parents' Bill of Rights.
- 21 SECTION 3. This act shall become effective November 1, 2025.

23 60-1-1878 DC 3/18/2025 5:21:57 PM