



OHIO LEGISLATIVE SERVICE COMMISSION

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Fiscal Note & Local Impact Statement

Bill: S.B. 314 of the 131st G.A. **Date:** November 30, 2016
Status: As Reported by Senate Health & Human Services **Sponsor:** Sen. Lehner

Local Impact Statement Procedure Required: No

Contents: Provides for the designation of a lay person to provide aftercare to a hospital inpatient and participate in discharge planning

State Fiscal Highlights

- The Ohio Department of Health may incur a minimal increase in administrative costs if it decides to adopt rules under the bill.
- State government-owned hospitals may realize a minimal increase in administrative costs to record and document information required under the bill and to possibly make modifications to discharge procedures.

Local Fiscal Highlights

- Local government-owned hospitals may realize a minimal increase in administrative costs to record and document information required under the bill and to possibly make modifications to discharge procedures.

Detailed Fiscal Analysis

The bill requires hospitals to offer a patient who is at least 55 years of age, or a patient's guardian an opportunity to designate a lay caregiver for the patient before the patient's discharge. If a patient or guardian makes a lay caregiver designation, the hospital is required under the bill to record certain information about the lay caregiver in the patient's medical record and request consent to disclose the patient's medical information to the lay caregiver. The bill also requires hospitals to create a discharge plan and arrange for the lay caregiver to participate in a review of the discharge plan with the patient or patient's guardian, if the discharging health care professional has determined that the lay caregiver's participation would be appropriate.

The bill specifies that, in accordance with state and federal law and if appropriate, the hospital shall arrange for an interpreter to be present during the instruction given during a review of a discharge plan. The hospital shall also arrange for an employee to provide a live demonstration of each task described in a discharge plan if the discharging health care professional determines it to be appropriate. The hospital is also required to document information concerning the instruction provided in the patient's medical record. The bill states that it is the intent of the General Assembly that the above-mentioned requirements do not unreasonably delay a patient's discharge.

The bill specifies that a discharging health care professional shall not be subject to criminal prosecution or professional disciplinary action, or be liable in a tort action or other civil action, for an event or occurrence that allegedly arises out of his or her determination that a patient's lay caregiver should or should not participate in the review of the patient's discharge plan.

Finally, the Ohio Department of Health (ODH) is permitted to adopt rules as necessary to implement the provisions of the bill.

Fiscal effect

State and local government-owned hospitals may realize a minimal increase in administrative costs to record and document information required under the bill and to possibly make modifications to discharge procedures if needed. ODH may incur a minimal increase in administrative costs if it decides to adopt rules under the bill.