SPONSOR: Franklin

COMMITTEE ACTION: Voted "Do Pass with HCS" by the Standing Committee on Health and Mental Health Policy by a vote of 6 to 2. Voted "Do Pass" by the Standing Committee on Rules- Administrative Oversight by a vote of 8 to 0.

This bill creates the "Caregiver, Advise, Record, and Enable (CARE) Act," which requires a hospital or ambulatory surgical center to provide each patient or patient's legal guardian with an opportunity to designate a caregiver prior to the patient's discharge. Such caregiver designation, or lack thereof, must be documented by the hospital or ambulatory surgical center. The hospital or ambulatory surgical center must notify a patient's caregiver of the patient's discharge or transfer as soon as practicable. Hospitals, ambulatory surgical centers, or employees or contractors of such entities must not be liable in any way for the actions of a caregiver. This bill shall not interfere with the rights of an attorney in fact under a durable power of health care.

The Department of Health and Senior Services will provide a standard form that can be used to satisfy the requirements of the CARE Act. However, a hospital or ambulatory surgical center can continue to use their current forms to satisfy these requirements if the form is compliant with Centers for Medicare and Medicaid Services standards.

This bill is similar to HB 796 (2017) and SB 1102 (2016).

PROPONENTS: Supporters say that this bill will allow patients additional freedoms by having a caregiver assist with care at home.

Testifying for the bill were Representative Franklin; AARP; Virginia Hopp; and the American Cancer Society Cancer Action Network.

OPPONENTS: Those who oppose the bill say that the requirements of the CARE Act are already required by CMS and that there should not be burdensome duplicative or repetitive requirements.

Testifying against the bill were the Missouri Ambulatory Sugery Center Association and Cindy Young, Farmington Surgery Center.