

KANSAS CARE ACT (HB2058)

COMPARISON TO STATE AND FEDERAL REGULATIONS

CARE Act	KANSAS ADMINISTRATIVE REGULATIONS	THE CENTERS FOR MEDICARE AND MEDICAID SERVICES CONDITIONS OF PARTICIPATION (CoPs)	JOINT COMMISSION ON ACCREDITATION OF HEALTHCARE ORGANIZATIONS	PATIENT PROTECTION AND AFFORDABLE CARE ACT
HB2058 Provision 1. Provide an <u>opportunity</u> for patients upon admission to a hospital to designate a caregiver; record the name of the caregiver in the patient's medical record.	The KAR does not specifically require patients an opportunity to identify a caregiver, or the inclusion of the caregiver's name in the medical record. <u>K.A.R 28-34-9a</u> currently requires hospitals to maintain medical records for each patient admitted for care. <u>Subsection 9a(e)</u> specifies the content of the medical record, but does not require identification of a caregiver as part of the medical record. <u>K.A.R. 28-34-57</u> requires ambulatory surgery centers to maintain medical records for each patient but does not require the identification of a family caregiver.	There are no CoPs that require hospitals to provide patients an opportunity to identify a caregiver, or include the name of the caregiver in the medical record. <u>CoPs currently include requirements for:</u> (a) patient's rights; (b) discharge planning; and (c) notification of family/representative of the patient's admission to a hospital Federal regulations and the CMS State Operations Manual does not require an opportunity to identify and designate a caregiver, or include the name of the caregiver as part of the medical record.	The Joint Commission standards do not require hospitals to provide an opportunity for patients to designate a caregiver, or include the name of the caregiver in the medical record. <u>The Joint Commission standards currently require</u> information in the medical record identifying the patient and "the name of any legally authorized representative." The Commission's standards do not require an opportunity for the patient to identify and designate a caregiver, or include the name of the caregiver, who may/may not be the legally authorized representative, in the medical record.	The ACA does not require hospitals to provide an opportunity for patients to designate a caregiver, or include the name of the caregiver in the medical record. <u>The ACA currently requires,</u> in Section 3026, the establishment of Community-based Care Transitions Program to test models for improving care during transitions from hospitals or other settings, and reduce readmissions for high risk Medicare beneficiaries. Seventy-two community-based organizations (CBOs are testing models across the nation, however, funding for expansion has ended. The pilots are not associated with the CARE ACT.) <i>Brewster Place</i> is the only CBO in Kansas—they support the CARE Act.

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HB2058 Provision. 2. Provide notification to the caregiver if the patient is being transferred or discharged	There are no regulations that require hospitals to notify caregivers if a patient is being transferred or discharged. <u>KAR 28-34-139(c) currently requires</u> abortion discharge instructions. KAR 28-34-141 requires follow-up care after abortions. There are no provisions that require notification to the caregiver of patient transfer or discharge.	There are no CoPs that require hospitals to notify caregivers if a patient is being transferred or discharged. <u>CoPs currently require</u> notification to a family member or legal representative of a patient's hospital admission. It cannot be assumed that the person identified as the family member/legal representative is (a) the caregiver, or (b) inclusive of individuals the patient may want to designate as a caregiver.	The Joint Commission standards do not require hospitals to notify caregivers if a patient is being transferred or discharged. <u>The Joint Commission standards currently require</u> that the patient's family should (a) participate in the patient's discharge or transfer and (b) when family is involved in decision making or in ongoing care they must be included in the discharge process. The Commission's standards do not recognize that the patient's primary caregiver may not be a family member.	The ACA does not address notification of caregivers regarding a patient's transfer or discharge.

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HB2058 Provision 3. Provide discharge instruction of any after care tasks the caregiver will need to perform	There are no regulations that require hospitals to provide discharge instructions to the person designated as the caregiver.	There are no CoPs that require hospitals to provide discharge instructions to the person designated as the caregiver. <u>CoPs currently require</u> that patients and family members/interested persons must be counseled to prepare for post-hospital care, as needed. The “as needed” language allows for the hospital to determine when education/training will be provided to caregivers, which allows them to opt out from providing needed instructions to all caregivers.	The Joint Commission standards do not require aftercare instruction to the caregiver. <u>The Joint Commission standards currently require that</u> (a) patients must be informed before discharge about the type of post-discharge care needed; and (b) patients and family members when they are involved in decision making/ongoing care must be informed of the kinds of continuing care, treatment, and services the patient will need. Informing, however, is (a) not the same as providing instruction and (b) may or may not include the individual designated as the patient’s caregiver.	The ACA does not address discharge instructions.