AGENCY TO PROVIDE PERSONAL CARE SERVICES IN THE HOME Nevada Revised Statutes (NRS) 449.0021

Sections 1 through 11 are definitions only. Following are interpretive guidelines:

TAG	REGULATION TEXT
0020	 Section 12. 1. In addition to the requirements set forth in NAC 449.011, each applicant for a license to operate an agency shall submit to the Central Repository for Nevada Records of Criminal History two complete sets of fingerprints for submission to the Federal Bureau of Investigation for its report. 2. The Central Repository for Nevada Records of Criminal History shall determine whether the applicant has been convicted of
	a crime listed in paragraph (a) of subsection 1 of NRS 449.188 and immediately informs the administrator of the agency, if any, and the Health Division of whether the applicant has been convicted of such a crime.
	The facility must ensure that each employee, independent contractor and administrator has complied with each requirement of NRS 449.176 to 449.188. You may use the enclosed personnel records checklist to document the review of all staff working in the agency.
0030	 Section 13. 1. Except as otherwise provided in this subsection, each license issued to operate an agency is separate and distinct and is issued to a specific person to operate the agency at a specific location. A person may operate an agency at multiple work stations if the agency maintains the records for the clients, attendants, other members of the staff of the agency and operations of the agency at the specific location designated on the license. 2. The name of the person who is designated as responsible for the conduct of the agency must appear on the face of the license.
	The facility shall ensure that recipient files and employee files are maintained at the location of the licensed agency. If there is a change in the individual who is designated as responsible for the conduct of the agency, the facility shall ensure
	that a change of administrator application is filed with the Bureau of Health Care Quality and Compliance.
0040	 3. Each agency must retain: (a) Proof that it is adequately covered against liabilities resulting from claims incurred in the course of operation; and (b) Proof of compliance with NRS 449.065 and 449.067. 4. The proof of liability coverage and compliance with state statue required by subsection 3 must be verified at the time the agency submits its initial application to the Health Division for a license and upon request by the Health Division.
	The agency shall ensure the following information is included as part of the Certificate of Liability insurance: Bureau of Health Care Quality and Compliance listed as the certificate holder
	 Bureau of Health Care Quality and Compliance listed as the certificate notaer 30 day cancellation notice is included in the cancellation notification section
	 So day curcentation notice is included in the curcentation notification section Agency name and address matches the name and address as they appear on the Health Division license
	application and are documented in the "insured" section of the Certificate of Liability.
0050	Section 14. 1. The administrator of an agency must: (a) Be at least 18 years of age;

	 (b) Have a high school diploma or its equivalent; (c) Be responsible and mature and have the personal qualities which will enable him to understand the problems of elderly persons and persons with disabilities; (d) Understand the provisions of this chapter and chapter 449 of NRS; and (e) Demonstrate the ability to read, write, speak and understand the English language. If the administrator is also the applicant/licensee on the HealthDivision license, the minimum age requirement is 21 years. Proof the agency administrator is at least 18 (copy of a driver's license or passport); An equivalency verification of a high school diploma is required for diplomas issued outside of the United States or its territories; or certified or stamped transcripts from a college or university indicating earned credits will be accepted. A signed statement from the administrator designating an individual to be in charge during his/her absence;
0060	 2. The administrator of an agency shall represent the license in the daily operation of the agency and shall appoint a person to exercise his authority in his absence. The responsibilities of an administrator include, without limitation: (a) Employing qualified personnel and arranging for their training; (b) Ensuring that only trained attendants are providing services to a client of the agency and that such services are provided in accordance with the functional assessment of the client, the service plan established for the client and the policies and procedures of the agency; (c) Developing and implementing an accounting and reporting system that reflects the fiscal experience and current financial position of the agency; (d) Negotiating for services provided by contract in accordance with legal requirements and established policies of the agency; (e) Providing oversight and direction for attendants and other members of the staff of the agency as necessary to ensure that the clients of the agency receive needed services; (f) Developing and implementing policies and procedures for the agency, including, without limitation, policies and procedures concerning terminating the personal care services provided to a client; (g) Designating one or more employees of the agency to be in charge of the agency during those times when the administrator is absent; and (h) Demonstrating to the Health Division upon request that the agency has sufficient resources and the capability to satisfy the requests of each client of the agency related to the provision of the personal care services described in the service plan to the client. <i>A signed statement that the administrator understands the regulations for PCA agencies and the Nevada Revised Statutes (NRS) for chapter 449 (See attached form).</i> <i>Are the</i>

	Are the duties of the administrator also included in the job description for the person designated to be in charge when the administrator is absent?
	Evidence of an accounting and reporting system that reflects the fiscal experience and current financial position of the agency, or a signed statement by the administrator that the agency is solvent financially and will be maintained and operated in that manner.
	The agency must have sufficient numbers of trained staff to meet the client's needs and the financial resources to operate the business at all times.
0070	3. Except as otherwise provided in this subsection and subsection 4 of section 16 of this regulation, an employee designated to be in charge of the agency when the administrator is absent must have access to all records kept at the agency. Confidential information may be removed from a file to which an employee designated to be in charge of the agency has access if the confidential information is maintained separately by the administrator.
0080	 4. The administrator of an agency shall ensure that: (a) The clients of the agency are not abused, neglected or exploited by an attendant or another member of the staff of the agency, or by any person who is visiting client when an attendant or another member of the staff of the agency is present; and (b) Suspected cases of abuse, neglect or exploitation of a client are reported in the manner prescribed in NRS 200.5093 and 632.472.
	It is the responsibility of all personal care attendants and administrators to report suspected cases of abuse, neglect or exploitation of a client to the police department, the Division for Aging Services or Adult Protection Services or Child Protection Services. If it is determined that the notification did not occur the agency will be held responsibility for failure to comply with the NRS. It is not appropriate for a personal care attendant to report suspected cases of abuse, neglect or exploitation to the administrator of the agency only.
0090	Section 15. An agency shall maintain written policies and procedures concerning the qualifications, responsibilities and conditions of employment for each attendant and other members of the staff of the agency. The written policies and procedures must be reviewed and revised as needed. The written policies and procedures must be available to the attendants and other members of the staff of the agency upon hire and whenever revisions are made to those policies and procedures. At a minimum, the policies and procedures must:
0100	1. Provide description of the duties and responsibilities of attendants;
0110	 2. Provide description of any activities that attendants are prohibited from engaging in, including, without limitation: (a) Making a long distance telephone call that is personal in nature: (1) On a telephone owned by or provided by a client; or (2) While on duty providing personal care services to a client:
	(b) Loaning, borrowing or accepting gifts of money or personal items from a client;(c) Accepting or retaining money or gratuities from a client, other than money needed for the purchase of groceries or mediantion for the alignet, and
	medication for the client; and(d) Becoming the legal guardian of a client or being named as an attorney-in- fact in a power of attorney executed by the client;
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0120	3. Set forth the rights of clients;
0130	4. Set forth any requirements relating to ethics governing attendants and other members of the staff of the agency, including,
	without limitation, any requirements concerning the confidentiality of client information;
0140	5. Provide for the prevention, control and investigation of infections and communicable diseases;
0150	6. Provide a description of the personal care services that are provided by the agency to clients;
0160	7. Provide a description of the manner in which the agency assigns attendants to provide personal care services to clients and
	any supervision of those services that will be provided by the agency;
0170	8. Provide for documentation of the needs of each client and the personal care services that are provided to the client;
0180	9. Set forth the emergency responses of the agency to both medical and nonmedical situations;
0190	10. Set forth the roles of the agency and any coordination that the agency will provide with services provided by other
	community service agencies;
	Has the agency identified additional needs the client may have that could be met by community resources other than the
	agency, and if so, did the agency inform the client how to make contact with the appropriate community resource, such as
	Meals on Wheels or Senior Services?
0200	11. Provide for periodic evaluation of the performance of attendants and other members of the staff of the agency;
0210	12. Provide for the maintenance of current personnel records which confirm that the policies and procedures are being followed;
	and
0220	13. Set forth any other specific information that is necessary based on the needs of any special populations served by the
	agency.
0230	Section 16. 1. A separate personnel file must be kept for each attendant of an agency and must include, without limitation:
	(a) The name, address and telephone number of the attendant;
	(b) The date on which the attendant began working for the agency;
	(c) Documentation that the attendant has had the tests or obtained the certificates required by NAC 441A.375;
	(d) Evidence that the references supplied by the attendant were checked by the agency;
	(e) Evidence of compliance with NRS 449.179 by the administrator of the agency or the person licensed to operate with respect
	to the attendant;
	(f) Proof that, within 6 months after the attendant began working for the agency, the attendant obtained a certificate in first aid
	and cardiopulmonary resuscitation issued by the American National Red Cross or an equivalent certificate approved by the
	Health Division;
	(g) Proof that the attendant is at least 18 years of age;
	(h) Proof of possession by the attendant of at least the minimum liability insurance coverage required by state law if the
	attendant will be providing transportation to a client in a motor vehicle; and
	(i) Documentation of all training attended by and performance evaluations of the attendant.
	Ensure that the date the employee began providing services to clients is documented in the employee file and included in the
	review of files by agency administrator or his designee.
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0240	2. The documentation described in paragraph (i) of subsection 1 must include, without limitation, for each training course
	attendant by the attendant:
	(a) A description of the content of the training course;
	(b) The date on which the training course was attended;
	(c) The number of hours of the training course;
	(d) The name and signature of the instructor of the training course; and
	(e) A certificate indicating that the training course was successfully completed by the attendant.
	The certificate must be for each training course including those outlined in section 19.
0250	3. The administrator or his designee shall evaluate the competency of an attendant in each competency area required by the
	agency if the attendant provides written proof of his current or previous training in that competency area. After the initial
	evaluation, any additional training provided to the attendant may be limited to areas in which the attendant needs to improve his
	competency.
0260	4. The administrator may keep personnel files of the agency in a locked cabinet and may, be except as otherwise provided in
	this subsection, restrict access to this cabinet by attendants and other members of the staff of the agency. The administrator shall
	make the personnel files, including, without limitation, any electronic files, available for review by the Health Division upon
	request.
0270	Section 17. 1. The administrator of an agency or his designee shall conduct supervisory home visits or telephone calls to the
	home of client of the agency to ensure that quality personal care services are provided to the client.
0280	2. Each supervisory visit and each telephone call must be documented. The documentation must be dated and signed by the
	administrator or his designee. Each supervisory visit and each telephone call must consist of an evaluation of whether;
	(a) Appropriate and safe techniques have been used in the provision of personal care services to the client;
	(b) The service plan established for the client has been followed;
	(c) The service plan established for the client is meeting the personal care needs of the client;
	(d) The attendant providing the personal care services to the client has received sufficient training relating to the personal care
	services that the attendant is providing to the client; and
	(e) It is necessary for the administrator or his designee to follow up with the attendant or client concerning any problem in the
	personal care services being provided to the client or the service plan established for the client that are identified as the result of
	the supervisory visit or telephone call.
	A supervisory visit or a telephone call must be conducted on each personal care attendant and for each client receiving
	A supervisory visit or a telephone call must be conducted on each personal care altendant and for each client receiving services.
	The documentation must answer whether or not (a) through (d) was provided appropriately; and the resolution of any
	problems identified during the supervisory home visit or telephone call.
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	The onsite supervisory visit should include observation of handwashing technique, the use of protective items that are generally accepted by the application of universal precautions and verify the following:1. Soap and water is easily accessible2. Alcohol-based hand rub is easily accessible3. Staff perform hand hygiene: (a) Before patient contact (even if gloves are worn).(b) After patient contact (even if gloves are worn).(c) After contact with potentially contaminated surfaces (even if gloves are worn).4. Regarding gloves, staff: (a) Wear gloves for procedures that potentially involve contact with blood or body fluids.(b) Wear gloves when handling potentially/known contaminated patient equipment. (c) Remove soiled gloves before moving to next task.
0290	 Section 18. Each attendant of an agency must: 1. Be at least 18 years of age; 2. Be responsible and mature and have personal qualities which will enable him to understand the problems of elderly persons and persons with disabilities; 3. Understand the provisions of this chapter and chapter 449 of NRS; 4. Demonstrate the ability to read, write, speak and communicate effectively with the clients of the agency; 5. Demonstrate the ability to meet the needs of the clients of the agency; and 6. Receive annually not less than 8 hours of training related to providing for the needs of the clients of the agency.
0300	Section 19. 1. Each attendant of an agency shall: (a) Obtain a working knowledge of the provisions of this chapter which govern the licensing of agencies before providing personal care services to the clients of the agency. The agency must provide a copy of those provisions to an attendant before the attendant may provide personal care services to the clients of the agency.
0310	(b) Participate in and complete a training program before independently providing personal care services to the clients of the agency. The training program must include an opportunity for the attendant to receive on-the-job instruction provided by clients of the agency, as long as the administrator of the agency or his designee provides supervision during this instruction to determine whether the attendant is able to provide personal care services successfully and independently to the client.
0320	 (c) Receive training: 1. In the written documentation of: I. Personal care services provided to the clients of the agency; and II. Verification of time records. 2. In the rights of clients, including, without limitation, training in methods to protect client confidentiality pursuant to state and federal regulations. 2. Related to the special needs of elderly persons and persons with disabilities, including, without limitation, training in the sensory, physical and cognitive changes related to the aging process.

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	3. Related to communication skills, including, without limitation, active listening, problem solving, conflict resolution and techniques for communicating through alternative modes with persons with communication or sensory impairments
0330	(c) Receive training:
0000	5. In first aid and cardiopulmonary resuscitation. A certificate in first aid and cardiopulmonary resuscitation issued by the
	American National Red Cross or an equivalent certificate will be accepted as proof of that training.
0340	(c) Receive training:
	6. That is specifically related to the personal care services provided by the agency, including, as applicable, training in the
	following topics:
	I. Duties and responsibilities of attendants and the appropriate techniques for providing personal care services;
	II. Recognizing and responding to emergencies, including, without limitation, fires and medical emergencies
	III. Dealing with adverse behaviors;
0350	(c) Receive training:
	IV. Nutrition and hydration, including, without limitation, special diets and meal preparation and service;
0360	(c) Receive training:
	V. Bowel and bladder care, including, without limitation, routine care associated with toileting, routine maintenance of an
	indwelling catheter drainage system such as emptying the bag and positioning, routine care of colostomies such as emptying and
	changing the bag, signs and symptoms of urinary tract infections, and common bowel problems, including, without limitation,
	constipation and diarrhea;
0370	(c) Receive training:
	VI. Skin care, including, without limitation, interventions that prevent pressure sores, routine inspections of the skin and
	reporting skin redness, discoloration or breakdown to the client or a representative of the client and to the administrator of the
	agency or his designee;
0200	VII. Methods and techniques to prevent skin breakdown, contractures and falls;
0390	(c) Receive training:
	IX. Body mechanics, mobility and transfer techniques, including, without limitation,
0400	simple nonprescribed range of motion; and (c) Receive training:
0400	X. Maintenance of a clean and safe environment.
0410	2. Each attendant of an agency must be evaluated and determined to be competent by the agency in the required areas of training
0410	set forth in paragraph (c) of subsection 1.
	3. Each attendant of an agency must have evidence of successful completion of a training program that includes the areas of
	training set forth in paragraph (c) of subsection 1 within the 12 months immediately proceeding the date on which the attendant
	first begins providing care to a client.
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	Miscellaneous documents/information needed for review of the training requirements:
	□ A description of the content of each training course; (section 16-2)
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	□ Copies of training certificates which <u>must</u> contain the following information:
	- The title of the course or training;
	- The date of the training;
	- The number of hours of training;
	- The name and signature of the instructor; and
	- A statement indicating that the training course was <u>successfully</u> completed.
	\Box Evidence that each attendant was trained in all of the following areas regardless if the attendant is a CNA or if
	training requirements were waived by another program.
	- How to document personal care services given;
	- Timesheets/timecards, verification of time records;
	- The rights of clients;
	- Client confidentiality;
	- The special needs of the elderly;
	- Communication skills;
	- Duties and responsibilities;
	- Recognizing and responding to emergencies;
	- Dealing with adverse behaviors;
	- Nutrition, hydration, special diets, meal preparation and service;
	- Bowel and bladder care;
	- Skin care;
	- Skin breakdown prevention techniques, contractures and falls;
	- Hand washing and infection control; and
	- Body mechanics, mobility and transfer techniques.
0420	Sec. 20. 1. When a person is accepted as a client by an agency, the agency shall:
	(a) Provide a written disclosure statement to the client;
	(b) Require the client or a representative of the client to sign the written disclosure statement; and
	(c) Ensure that a copy of the written disclosure statement is incorporated into the record of the client.
	Evidence that the agency gave all of this information to the client must be in the client's file.
0430	2. The written disclosure statement must include a description of and information concerning the personal care services offered
	by the agency, including, without limitation:
	(a) A statement which is easily understandable to the client indicating that it is not within the scope of the license of the agency
	to manage the medical and health conditions of clients should the conditions become unstable or unpredictable;
	(b) The qualifications and training requirements for the attendants who provide personal care services to the clients of the
	agency;
	(c) The charges for the personal care services provided by the agency;

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	 (d) A description of billing methods, payment systems, due dates for bills for personal care services and the policy for notifying clients of increases in the costs of personal care services provided by the agency; (e) The criteria, circumstances or conditions which may result in the termination of personal care services by the agency and the policy for notifying clients of such termination of personal care services; (f) Procedures for contacting the administrator of the agency or his designee during all hours in which personal care services are provided and the on-call policy of the agency; and (g) Information concerning the rights of clients and the grievance procedure of the agency.
0440	Sec. 21. 1. The administrator of an agency shall ensure that a client is not prohibited from speaking to any person who advocates for the rights of the clients of the agency.
	How did you provide this information to the client? Evidence of having provided the information to the client must be in each client's file.
0450	2. The administrator of an agency shall establish and enforce a procedure to respond to grievances, incidents and complaints concerning the agency in accordance with the written policies and procedures of the agency. The procedure established and enforced by the administrator must include a method for ensuring that the administrator or his designee is notified of each grievance, incident or complaint. The administrator or his designee shall personally investigate the matter in a timely manner. A client who files a grievance or complaint or reports an incident concerning the agency must be notified of the action taken in response to the grievance, complaint or report or must be given a reason why no action was taken. Please note that agencies contracting with Medicaid must comply with the requirement for responding to grievances within
0460	 <i>10 calendar days of receipt of a grievance from a client.</i> 3. The administrator of an agency shall ensure that the agency is in compliance with NRS 449.700 to 449.730, inclusive.
0400	See attached statutory language
0470	4. The agency shall develop a written description of the rights of clients and provide a copy to each client or a representative of the client upon initiation of the service plan established for the client. A signed and dated copy of the receipt of this information by the client or a representative of the client must be maintained in the record of the client.
0480	 5. The written description of the rights of clients developed pursuant to subsection 4 must include, without limitation, at statement that each client has the right: (a) To receive considerate and respectful care that recognizes the inherent worth and dignity of each client; (b) To participate in the development of the service plan established for the client and to receive an explanation of the personal care services provided pursuant to the service plan and a copy of the service plan; (c) To receive the telephone number of the Bureau which may be contacted for complaints

	(d) To receive notification of any authority of the Health Division to examine the records of the client as related to the regulation and evaluation of the agency by the Health Division;
	(e) To receive from the agency, within the limits set by the service plan established for the client and within the program criteria, responses to reasonable requests for assistance; and
	(f) To receive information, upon request, concerning the policies and procedures of the agency, including, without limitation, the policies and procedures of the agency relating to charges, reimbursements and determinations concerning service plans
0490	Sec. 22. 1. The administrator of an agency or his designee shall conduct an initial screening to evaluate each prospective client's requests for personal care services and to develop a service plan for the client or to accept a service plan established for the client.
	2. The initial screening and the development or acceptance of a service plan must be documented. The documentation must be dated and signed by the person who conducted the initial screening and developed or accepted the service plan.
	Evidence of this documentation must be in the client's file.
0500	3. The agency shall complete the following tasks before providing the personal care services outlined in the service plan established for the client and as often as necessary if the service plan is revised:
	(a) Evaluate whether the agency has sufficient resources and the capability to satisfy the requests of the client and to provide the
	client with the personal care services described in the service plan; (b) Review the service plan with the client, including, without limitation, the schedule for the provision of personal care services
	to the client, the procedure to follow if an attendant fails to provide personal care services in accordance with the service plan, the hiring and training policies of the agency, the responsibilities of the agency, the procedure for filing a grievance or complaint
	and any personal care services that an attendant is prohibited from providing pursuant to section 23 of this regulation; (c) Review the procedure to be followed if an attendant does not appear for a scheduled visit and the procedure to be followed if an additional visit from an attendant is required;
	(d) Ensure that the personal care services requested by the client are services which assist the client with the activities of daily living; and
	(e) Ensure that the agency is coordinating the personal care services that it will be providing to the client with the care and services available to the client from other organizations and persons.
0510	Sec. 23. 1. The administrator of an agency shall ensure that each attendant working for the agency is working within his scope of service and conducts himself in a professional manner. An attendant is prohibited from providing any of the services listed in
	subsection 2 to a client. 2. The services an attendant must not provide to a client include, without limitation:
	(a) Insertion or irrigation of a catheter;
	(b) Irrigation of any body cavity, including, without limitation, irrigation of the ear, insertion of an enema or a vaginal douche;
	(c) Application of a dressing involving prescription medication or aseptic techniques, including, without limitation, the treatment
	of moderate or severe conditions of the skin;
L	(d) Administration of injections of fluids into veins, muscles or the skin;

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(e) Administration of medication, including, without limitation, the insertion of rectal suppositories, the application of a prescribed topical lotion for the skin and the administration of drops in the eyes;
(f) Performing physical assessments;
(g) Monitoring vital signs;
(h) Using specialized feeding techniques
(i) Performing a digital rectal examination;
(j) Trimming or cutting toenails;
(k) Massage;
(l) Providing medical case management, including, without limitation, accompanying a client to the office of a physician to provide medical information to the physician concerning the client or to receive medical information from the physician concerning the client; and
(n) Any task identified in chapter 632 of NRS and the regulations adopted by the State Board of Nursing as requiring skilled nursing care, including, without limitation, any services that are within the scope and practice of a certified nursing assistant.

Please refer to section 21 Clients rights:

NRS 449.700 Facility or home to provide necessary services or arrange for transfer of patient; explanation of need for transfer and alternatives available.

1. Every medical facility, facility for the dependent and home for individual residential care must provide the services necessary to treat properly a patient in a particular case or must be able to arrange the transfer of the patient to another facility or home which can provide that care.

2. A patient may be transferred to another facility or home only if the patient has received an explanation of the need to trans fer him and the alternatives available, unless his condition necessitates an immediate transfer to a facility for a higher level of care and he is unable to understand the explanation.

(Added to NRS by 1983, 820; A 1985, 1747; <u>1999, 1051</u>)

NRS 449.705 Facility or home to forward medical records upon certain transfers of patient.

1. If a patient in a medical facility or facility for the dependent is transferred to another medical facility or facility for the dependent, a division facility or a physician licensed to practice medicine, the facility shall forward a copy of the medical records of the patient, on or before the date the patient is transferred, to the other medical facility or facility for the dependent, the division facility or the physician. The facility is not required to obtain the oral or written consent of the patient to forward a copy of the medical records.

2. If a person receiving services in a home for individual residential care is transferred to another home, the home shall forward a copy of his medical records to the other home in the manner provided in subsection 1.

3. As used in this section:

(a) "Division facility" means any unit or subunit operated by a division of the Department of Health and Human Services pursuant to title 39 of NRS.

(b) "Medical records" includes a medical history of the patient, a summary of the current physical condition of the patient and a discharge summary which contains the information necessary for the proper treatment of the patient.

(Added to NRS by 1991, 2349; A 1993, 2725; 1999, 1051)

NRS 449.710 Specific rights: Information concerning facility; treatment; billing; visitation. Every patient of a medical facility, facility for the dependent or home for individual residential care has the right to:

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1. Receive information concerning any other medical or educational facility or facility for the dependent associated with the facility at which he is a patient which relates to his care.

2. Obtain information concerning the professional qualifications or associations of the persons who are treating him.

3. Receive the name of the person responsible for coordinating his care in the facility or home.

4. Be advised if the facility in which he is a patient proposes to perform experiments on patients which affect his own care or treatment.

5. Receive from his physician a complete and current description of his diagnosis, plan for treatment and prognosis in terms which he is able to understand. If it is not medically advisable to give this information to the patient, the physician shall:

(a) Provide the information to an appropriate person responsible for the patient; and

(b) Inform that person that he shall not disclose the information to the patient.

6. Receive from his physician the information necessary for him to give his informed consent to a procedure or treatment. Except in an emergency, this information must not be limited to a specific procedure or treatment and must include:

(a) A description of the significant medical risks involved;

(b) Any information on alternatives to the treatment or procedure if he requests that in formation;

(c) The name of the person responsible for the procedure or treatment; and

(d) The costs likely to be incurred for the treatment or procedure and any alternative treatment or procedure.

7. Examine the bill for his care and receive an explanation of the bill, whether or not he is personally responsible for payment of the bill.

8. Know the regulations of the facility or home concerning his conduct at the facility or home.

9. Receive, within reasonable restrictions as to time and place, visitors of his choosing, including, without limitation, friends and members of his family.

(Added to NRS by 1983, 820; A 1985, 906, 1748; 1999, 1052; 2001, 3047)

NRS 449.715 Specific rights: Designation of persons authorized to visit patient in facility.

1. If, as a result of the incapacitation of the patient or his inability to communicate, a patient of a medical facility, facility for the dependent or home for individual residential care who is 18 years of age or older is unable to inform the staff of the facility or home of the persons whom the patient authorizes to visit the patient at the facility or home, the facility or home shall allow visitation rights to any person designated by the patient in a letter, form or other document authorizing visitation executed in accordance with subsection 2. The visitation rights required by this subsection must be:

(a) Provided in accordance with the visitation policies of the facility or home; and

(b) The same visitation rights that are provided to a member of the patient's family who is legally related to the patient.

2. A person 18 years of age or older wishing to designate a person for the purposes of establishing visitation rights in a medical facility, facility for the dependent or home for individual residential care may execute a letter, form or other document authorizing visitation in substantially the following form:

(Date).....

NRS 449.720 Specific rights: Care; refusal of treatment and experimentation; privacy; notice of appointments and need for care; confidentiality of information concerning patient.

1. Every patient of a medical facility, facility for the dependent or home for individual residential care has the right to:

(a) Receive considerate and respectful care.

(b) Refuse treatment to the extent permitted by law and to be informed of the consequences of that refusal.

(c) Refuse to participate in any medical experiments conducted at the facility.

- (d) Retain his privacy concerning his program of medical care.
- (e) Have any reasonable request for services reasonably satisfied by the facility or home considering its ability to do so.

(f) Receive continuous care from the facility or home. The patient must be informed:

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(1) Of his appointments for treatment and the names of the persons available at the facility or home for those treatments; and

(2) By his physician or an authorized representative of the physician, of his need for continuing care.

2. Except as otherwise provided in <u>NRS 108.640</u>, <u>239.0115</u>, <u>439.538</u>, <u>442.300</u> to <u>442.330</u>, inclusive, and <u>449.705</u> and <u>chapter 629</u> of NRS, discussions of the care of a patient, consultation with other persons concerning the patient, examinations or treatments, and all communications and records concerning the patient are confidential. The patient must consent to the presence of any person who is not directly involved with his care during any examination, con sultation or treatment.

(Added to NRS by 1983, 821; A 1985, 1748; 1989, 2057; 1991, 2350; 1999, 1052, 3512; 2007, 1979, 2110)

NRS 449.730 Patient to be informed of rights upon admission to facility or home for individual care; required disclosures and notices.

1. Every medical facility, facility for the dependent and home for individual residential care shall inform each patient or his legal representative, upon his admission to the facility or home, of the patient's rights as listed in <u>NRS 449.700</u>, <u>449.710</u>, <u>449.715</u> and <u>449.720</u>.

2. In addition to the requirements of subsection 1, if a person with a disability is a patient at a facility, as that term is defined in <u>NRS 449.771</u>, the facility shall inform the patient of his rights pursuant to <u>NRS 449.765</u> to $\frac{449.786}{449.786}$, inclusive.

3. In addition to the requirements of subsections 1 and 2, every hospital shall, upon the admission of a patient to the hospital, provide to the patient or his legal representative a written disclosure approved by the Director, which written disclosure must set forth:

(a) Notice of the existence of the Bureau for Hospital Patients created pursuant to NRS 223.575;

(b) The address and telephone number of the Bureau; and

(c) An explanation of the services provided by the Bureau, including, without limitation, the services for dispute resolution described in subsection 3 of <u>NRS 223.575</u>.

4. In addition to the requirements of subsections 1, 2 and 3, every hospital shall, upon the discharge of a patient from the hospital, provide to the patient or his legal representative a written disclosure approved by the Director, which written disclosure must set forth:

(a) If the hospital is a major hospital:

(1) Notice of the reduction or discount available pursuant to <u>NRS 439B.260</u>, including, without limitation, notice of the criteria a patient must satisfy to qualify for a reduction or discount under that section; and

(2) Notice of any policies and procedures the hospital may have adopted to reduce charges for services provided to persons or to provide discounted services to persons, which policies and procedures are in addition to any reduction or discount required to be provided pursuant to <u>NRS 439B.260</u>. The notice required by this subparagraph must describe the criteria a patient must satisfy to qualify for the additional reduction or discount, including, without limitation, any relevant limitations on income and any relevant requirements as to the period within which the patient must arrange to make payment.

(b) If the hospital is not a major hospital, notice of any policies and procedures the hospital may have adopted to reduce charges for services provided to persons or to provide discounted services to persons. The notice required by this paragraph must describe the criteria a patient must satis fy to qualify for the reduction or discount, including, without limitation, any relevant limitations on income and any relevant requirements as to the period within which the patient must arrange to make payment. \rightarrow As used in this subsection, "major hospital" has the meaning ascribed to it in NRS 439B.115.

5. In addition to the requirements of subsections 1 to 4, inclusive, every hospital shall post in a conspicuous place in each public waiting room in the hospital a legible sign or notice in 14-point type or larger, which sign or notice must:

(a) Provide a brief description of any policies and procedures the hospital may have adopted to reduce charges for services provided to persons or to provide discounted services to persons, including, without limitation:

(1) Instructions for receiving additional information regarding such policies and procedures; and

(2) Instructions for arranging to make payment;

(b) Be written in language that is easy to understand; and

(c) Be written in English and Spanish.

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