### HOUSE BILL 124

## 50TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2011

### INTRODUCED BY

### Al Park

# AN ACT

RELATING TO HEALTH CARE; AMENDING SECTIONS OF THE UNIFORM
HEALTH-CARE DECISIONS ACT TO REQUIRE A SUPERVISING HEALTH-CARE
PROVIDER TO MAKE CERTAIN DISCLOSURES TO PATIENTS BEFORE
PROVIDING HEALTH CARE.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. Section 24-7A-1 NMSA 1978 (being Laws 1995, Chapter 182, Section 1, as amended) is amended to read:

"24-7A-1. DEFINITIONS.--As used in the Uniform Health-Care Decisions Act:

- A. "advance health-care directive" means an individual instruction or a power of attorney for health care made, in either case, while the individual has capacity;
- B. "agent" means an individual designated in a power of attorney for health care to make a health-care

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- s ability to quences of proposed health care, including its significant benefits, risks and alternatives to proposed health care and to make and communicate an informed health-care decision. A determination of lack of capacity shall be made only according to the provisions of Section 24-7A-11 NMSA 1978;
- "emancipated minor" means an individual between the ages of sixteen and eighteen who has been married, who is on active duty in the armed forces or who has been declared by court order to be emancipated;
- "emergency" means a situation in which there is an imminent threat of a disaster causing immediate peril to life that timely action can avert or minimize;
- [E.] F. "guardian" means a judicially appointed guardian or conservator having authority to make a health-care decision for an individual;
- [F.] G. "health care" means any care, treatment, service or procedure to maintain, diagnose or otherwise affect an individual's physical or mental condition;
- [G.] H. "health-care decision" means a decision made by an individual or the individual's agent, guardian or surrogate, regarding the individual's health care, including:
  - selection and discharge of health-care (1)

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providers and institutions;

- (2) approval or disapproval of diagnostic tests, surgical procedures, programs of medication and orders not to resuscitate;
- (3) directions relating to life-sustaining treatment, including withholding or withdrawing life-sustaining treatment and the termination of life support; and
- (4) directions to provide, withhold or withdraw artificial nutrition and hydration and all other forms of health care;
- $[H_{\text{\tiny{F}}}]$   $\underline{\text{I.}}$  "health-care institution" means an institution, facility or agency licensed, certified or otherwise authorized or permitted by law to provide health care in the ordinary course of business;
- [1.] J. "health-care provider" means an individual licensed, certified or otherwise authorized or permitted by law to provide health care in the ordinary course of business or practice of a profession;
- $[J_{\bullet}]$   $\underline{K}_{\bullet}$  "individual instruction" means an individual's direction concerning a health-care decision for the individual made while the individual has capacity;
- $[K_{ullet}]$  L. "life-sustaining treatment" means any medical treatment or procedure without which the individual is likely to die within a relatively short time, as determined to a reasonable degree of medical certainty by the primary

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substitutes	for	anothe	r member	r of t	he ·	individual'	s profession:

- $[\frac{1}{100}]$  "person" means an individual, corporation, business trust, estate, trust, partnership, association, joint venture, government, governmental subdivision, agency or instrumentality or any other legal or commercial entity;
- [M.] 0. "physician" means an individual authorized to practice medicine or osteopathy;
- [N.] P. "power of attorney for health care" means the designation of an agent to make health-care decisions for the individual granting the power, made while the individual has capacity;
- [0.] 0. "primary physician" means a physician designated by an individual or the individual's agent, guardian or surrogate to have primary responsibility for the individual's health care or, in the absence of a designation or if the designated physician is not reasonably available, a physician who undertakes the responsibility;
- [P.] R. "principal" means an adult or emancipated minor who, while having capacity, has made a power of attorney for health care by which the adult or emancipated minor delegates the right to make health-care decisions for the adult or emancipated minor to an agent;
- [Q.] S. "protected person" means an adult or .184138.1

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- [R.] T. "qualified health-care professional" means a health-care provider who is a physician, physician assistant, nurse practitioner, nurse, psychologist or social worker;
- [S.] U. "reasonably available" means readily able to be contacted without undue effort and willing and able to act in a timely manner considering the urgency of the patient's health-care needs:
- $[T_{\bullet}]$  V. "state" means a state of the United States, the District of Columbia, the commonwealth of Puerto Rico or a territory or insular possession subject to the jurisdiction of the United States;
- [U.] W. "supervising health-care provider" means the primary physician or, if there is no primary physician or the primary physician is not reasonably available, the healthcare provider who has undertaken primary responsibility for an individual's health care; and
- $[rac{V_{\bullet}}{I}]$  X. "surrogate" means an individual, other than a patient's agent or guardian, authorized under the Uniform Health-Care Decisions Act to make a health-care decision for the patient."
- SECTION 2. Section 24-7A-7 NMSA 1978 (being Laws 1995, Chapter 182, Section 7, as amended) is amended to read:
  - "24-7A-7. OBLIGATIONS OF HEALTH-CARE PROVIDER.--
- Before implementing a health-care decision made .184138.1

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for a patient, a supervising health-care provider shall promptly communicate to the patient the decision made and the identity of the person making the decision.

B. Except as required in an emergency, before a supervising health-care provider provides health care to a patient, the health-care provider shall clearly communicate to the patient or to the patient's agent, guardian or surrogate or any other person with the right to make health-care decisions on the patient's behalf:

- (1) the health-care provider's identity;
- (2) whether the health-care provider is

  licensed as a medical doctor, a doctor of osteopathy, a

  physician assistant, a certified nurse practitioner or a nurse
  or is practicing as a resident or a fellow; and
- (3) whether the health-care provider is administering health care as a locum tenens or on a temporary basis through a staffing agency at the health-care institution at which the patient is receiving or will receive health care.
- [B.] C. A supervising health-care provider who knows of the existence of an advance health-care directive, a revocation of an advance health-care directive, a challenge to a determination of lack of capacity or a designation or disqualification of a surrogate shall promptly record its existence in the patient's health-care record and, if it is in writing, shall request a copy and, if one is furnished, shall

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arrange for its maintenance in the health-care record.

[C.] D. A supervising health-care provider who makes or is informed of a determination that a patient lacks or has recovered capacity or that another condition exists that affects an individual instruction or the authority of an agent, guardian or surrogate shall promptly record the determination in the patient's health-care record and communicate the determination to the patient and to any person then authorized to make health-care decisions for the patient.

- $[D_{\bullet}]$  E. Except as provided in Subsections [E and ] F and G of this section, a health-care provider or health-care institution providing care to a patient shall comply:
- (1) before and after the patient is determined to lack capacity, with an individual instruction of the patient made while the patient had capacity;
- (2) with a reasonable interpretation of [that] the individual instruction made by a person then authorized to make health-care decisions for the patient; and
- (3) with a health-care decision for the patient that is not contrary to an individual instruction of the patient and is made by a person then authorized to make health-care decisions for the patient, to the same extent as if the decision had been made by the patient while having capacity.
- $[E_{\bullet}]$   $F_{\bullet}$  A health-care provider may decline to .184138.1

comply with an individual instruction or health-care decision for reasons of conscience. A health-care institution may decline to comply with an individual instruction or health-care decision if the instruction or decision is contrary to a policy of the health-care institution that is expressly based on reasons of conscience and if the policy was timely communicated to the patient or to a person then authorized to make health-care decisions for the patient.

- [F.] G. A health-care provider or health-care institution may decline to comply with an individual instruction or health-care decision that requires medically ineffective health care or health care contrary to generally accepted health-care standards applicable to the health-care provider or health-care institution. "Medically ineffective health care" means treatment that would not offer the patient any significant benefit, as determined by a physician.
- [G.] H. A health-care provider or health-care institution that declines to comply with an individual instruction or health-care decision shall:
- (1) promptly so inform the patient, if possible, and any person then authorized to make health-care decisions for the patient;
- (2) provide continuing care to the patient until a transfer can be effected; and
- (3) unless the patient or person then .184138.1

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authorized to make health-care decisions for the patient refuses assistance, immediately make all reasonable efforts to assist in the transfer of the patient to another health-care provider or health-care institution that is willing to comply with the individual instruction or decision.

[H.] I. A health-care provider or health-care institution may not require or prohibit the execution or revocation of an advance health-care directive as a condition for providing health care.

 $[\frac{1}{1}]$  J. The Uniform Health-Care Decisions Act does not require or permit a health-care institution or health-care provider to provide any type of health care for which the health-care institution or health-care provider is not licensed, certified or otherwise authorized or permitted by law to provide."

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