

1 STATE OF OKLAHOMA

2 1st Session of the 60th Legislature (2025)

3 HOUSE BILL 1600

By: Gise and Williams

6 AS INTRODUCED

7 An Act relating to health care; enacting the Lori  
8 Brand Patient Bill of Rights Act of 2025; creating a  
9 list of rights for a patient seeking treatment;  
specifying certain responsibilities of patients  
seeking treatment; creating certain rights for minor  
patients seeking treatment; specifying certain  
responsibilities of parents of minor patients seeking  
treatment in this state; providing for codification;  
and providing an effective date.

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14 BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

15 SECTION 1. NEW LAW A new section of law to be codified  
16 in the Oklahoma Statutes as Section 3401 of Title 63, unless there  
17 is created a duplication in numbering, reads as follows:

18 This act shall be known and may be cited as the "Lori Brand  
19 Patient Bill of Rights Act of 2025".

20 SECTION 2. NEW LAW A new section of law to be codified  
21 in the Oklahoma Statutes as Section 3401.1 of Title 63, unless there  
22 is created a duplication in numbering, reads as follows:

23 A. Each patient treated in this state shall have the following  
24 rights when being treated:

1       1. The right to considerate and respectful care, provided in a  
2 safe environment, free from all forms of abuse, neglect, harassment,  
3 and exploitation;

4       2. To receive information in a manner that he or she  
5 understands. Communications with the patient shall be effective and  
6 provided in a manner that facilitates understanding by the patient.  
7 Written information provided will be appropriate to the age,  
8 understanding, and, as appropriate, the language of the patient. As  
9 appropriate, communications specific to the vision-, speech-,  
10 hearing-, cognitive-, and language-impaired patient will be  
11 provided. The hospital shall meet the requirements of federal  
12 regulations that require program and facility accessibility;

13       3. To receive as much information about any proposed treatment  
14 or procedure as he or she may need in order to give informed consent  
15 or to refuse the course of treatment. Except in emergencies, this  
16 shall include a description of the procedure or treatment, the  
17 medically significant risks involved in the procedure or treatment,  
18 alternate courses of treatment or nontreatment and the risks  
19 involved in each, and the name of the person who will carry out the  
20 procedure or treatment;

21       4. To receive the name of the doctor who has primary  
22 responsibility for coordinating his or her care and the names and  
23 professional relationships of other doctors, nurses, and health care  
24 providers who will see him or her;

1       5. To have an advance directive attorney for health care  
2 concerning treatment or to designate a surrogate decision-maker with  
3 the expectation that the hospital will honor the intent of that  
4 directive to the extent allowed by law and hospital policy. The  
5 health care provider must advise a patient of his or her rights  
6 under state law and hospital policy to make informed medical  
7 decisions, ask if the patient has an advance directive, and include  
8 that information in patient records. The patient has the right to  
9 timely information about hospital policy that may limit its ability  
10 to implement a legally valid advance directive;

11       6. To participate in the development and implementation of his  
12 or her plan of care and actively participate in decisions regarding  
13 his or her medical care;

14       7. To accept medical care or to refuse treatment, to the extent  
15 permitted by law, and to be informed of the consequences of such  
16 refusal;

17       8. To become informed of his or her rights as a patient in  
18 advance of, or when discontinuing, the provision of care. The  
19 patient may appoint a representative to receive this information  
20 should he or she so desire;

21       9. To leave the hospital, even against the advice of his or her  
22 doctor;

1       10. To be informed by his or her doctor or a delegate of his or  
2 her doctor about the continuing health care requirements following  
3 his or her discharge from the hospital;

4       11. To have a family member or representative of his or her  
5 choice notified promptly of his or her admission to the hospital;

6       12. To request that no information regarding his or her  
7 admittance, diagnosis, or treatment be released;

8       13. To full consideration of privacy concerning his or her  
9 medical care program. Case discussion, consultation, examination,  
10 and treatment are confidential and should be conducted discreetly to  
11 protect privacy. The patient has the right to be advised as to the  
12 reason for the presence of any individual involved in his or her  
13 health care;

14       14. To review the records and obtain a copy of the medical  
15 records pertaining to his or her medical care and to have the  
16 information explained or interpreted as necessary, except when  
17 restricted by law;

18       15. To reasonable continuity of care, when appropriate, and to  
19 be informed by the doctor and other caregivers of available and  
20 realistic patient care options when hospital care is no longer  
21 appropriate;

22       16. To confidential treatment of all communications and records  
23 pertaining to his or her care and stay at the hospital. The  
24 patient's written authorization shall be obtained before his or her

1 medical records can be made available to anyone not directly  
2 concerned with his or her care;

3       17. To expect that, within its capacity and policies, the  
4 hospital will make a reasonable response to the request of a patient  
5 for appropriate and medically directed care and services. The  
6 hospital must provide evaluation, service, and a referral as  
7 indicated by the urgency of the case. When medically appropriate  
8 and legally permissible, or when a patient has requested a transfer,  
9 that patient may be transferred to another facility. That facility  
10 must have first accepted the patient for transfer. The patient must  
11 also have the benefit of the complete information and explanation  
12 concerning the need for, risks and benefits of, and alternatives to  
13 such a transfer;

14       18. The patient or patient's representative has the right to  
15 participate in the consideration of ethical issues that might arise  
16 in the care of the patient. The hospital shall have a mechanism for  
17 the consideration of ethical issues arising in the care of patients  
18 and to provide education to caregivers and patients on ethical  
19 issues in health care;

20       19. To exercise these rights without regard to sex, cultural,  
21 economic, educational, or religious background, or the source of  
22 payment for care;

23       20. To be advised of the hospital's complaint or grievance  
24 process should the patient wish to communicate a concern regarding

1 the quality of care he or she receives. This includes whom to  
2 contact to file a complaint. The patient will be provided with a  
3 written notice of the complaint determination that contains the name  
4 of the hospital's contact person, the steps taken on his or her  
5 behalf to investigate the complaint, the results of the complaint  
6 and, when possible, the resolution of the complaint concerning the  
7 quality of care;

8       21. To know which hospital rules, regulations, and policies  
9 apply to the patient's conduct while receiving treatment at a  
10 hospital;

11       22. If the patient is sixty-five (65) years of age or older,  
12 the message from Medicare outlining the rights of the elderly shall  
13 be provided to the patient at the time of his or her admission to  
14 the hospital;

15       23. To access protective and advocacy services or have these  
16 services accessed on the patient's behalf;

17       24. To be advised if a hospital or doctor proposes to engage in  
18 research studies or human experimentation affecting the patient's  
19 care or treatment. The patient has the right to consent or refuse  
20 to participate in such research studies and to have those studies  
21 fully explained prior to consent. All information provided to  
22 subjects shall be contained in the medical record or research file,  
23 along with the consent forms. Refusal to participate or

1 discontinuation of participation shall not compromise the patient's  
2 right to access care, treatment, or services;

3       25. To examine and receive an explanation of his or her bill  
4 regardless of source of payment;

5       26. To ask and be informed of the existence of business  
6 relationships among the hospital, educational institutions, health  
7 care providers, or payers that may influence the patient's treatment  
8 and care;

9       27. To remain free from restraints or seclusion in any forms  
10 that are not medically necessary or are used as a means of coercion,  
11 discipline, convenience, or retaliation by staff;

12       28. To information about pain and pain-relief measures, staff  
13 committed to pain prevention and pain management, health  
14 professionals who respond quickly to reports of pain, health  
15 professionals who believe reports of pain, and state-of-the-art pain  
16 management;

17       29. To receive the visitors whom he or she designates,  
18 including, but not limited to, a spouse, a domestic partner,  
19 including a same-sex domestic partner, another family member, or a  
20 friend. The patient has the right to withdraw or deny consent at  
21 any time. Visitation will not be restricted, limited, or otherwise  
22 denied on the basis of race, color, national origin, religion, sex,  
23 or disability; and

1       30. Through use of the hospital-issued notice of noncoverage,  
2 Medicare beneficiaries have the right to be informed in advance of  
3 procedures or treatment for which Medicare may deny payment, and  
4 that the beneficiary may be personally responsible for full payment  
5 if Medicare denies payment.

6           B. A patient, guardian of a patient, or legally authorized  
7 representative of a patient shall have the following  
8 responsibilities:

9           1. To provide accurate and complete information concerning the  
10 patient's present complaints, past illnesses, hospitalizations,  
11 medications, and other matters relating to his or her health;

12           2. To report perceived risks in the patient's care and  
13 unexpected changes in his or her condition to the responsible health  
14 care provider;

15           3. For the patient's actions should he or she refuse treatment  
16 or not follow his or her doctor's orders;

17           4. To ask questions when the patient does not understand what  
18 he or she has been told about the patient's care or what he or she  
19 is expected to do;

20           5. To be considerate of the rights of other patients and  
21 hospital personnel;

22           6. To participate in educational and discharge planning  
23 activities necessary to ensure that he or she has adequate knowledge

1 and support services to provide him or her with a safe environment  
2 upon discharge from the hospital;

3       7. To ask the doctor or nurse what to expect regarding pain  
4 management, to discuss pain relief options with doctors and nurses  
5 and to help develop a pain management plan, to ask for pain relief  
6 when pain first begins, to help doctors and nurses assess the  
7 patient's pain, to tell the doctors and nurses if his or her pain is  
8 not relieved, and to tell doctors and nurses about any concerns  
9 about taking pain medication;

10      8. For keeping appointments and for notifying the hospital or  
11 doctor when he or she is unable to do so;

12      9. Being respectful of his or her personal property and that of  
13 other patients in the hospital;

14      10. Following hospital procedures; and

15      11. Assuring that the financial obligations of his or her care  
16 is fulfilled as promptly as possible.

17      C. Any minor patient has the following rights when being  
18 treated in this state:

19      1. To be treated with respect in regards to:

- 20       a. each child and adolescent as a unique individual, and  
21       b. the caretaking role and individual response of the  
22                  parent and legal guardian;

1       2. To provisions for normal physical and physiological needs of  
2       a growing child including nutrition, rest, sleep, warmth, activity,  
3       and freedom to move and explore. Minors shall have the right to:

- 4           a. appropriate treatment in the least restrictive  
5            setting,  
6           b. not receive unnecessary or excessive medication,  
7           c. an individualized treatment plan and the right to  
8            participate in the plan,  
9           d. a humane treatment environment that provides  
10          reasonable protection from harm and appropriate  
11          privacy for personal needs,  
12          e. separation from adult patients when possible, and  
13          f. regular communication between the minor patient and  
14           the patient's family or legal guardian;

15       3. To consistent, supportive, and nurturing care which:

- 16           a. meets the emotional and psychosocial needs of the  
17            minor, and  
18           b. fosters open communication;

19       4. To provisions for self-esteem needs which will be met by  
20       attempts to give the minor:

- 21           a. the reassuring presence of a caring person, especially  
22            a parent,  
23           b. freedom to express feelings or fears with appropriate  
24            reactions,

- c. as much control as possible over both self and situation,
- d. opportunities to work through experiences before and after they occur, verbally, in play, or in other appropriate ways, and
- e. recognition for coping well during difficult situations;

8        5. To provisions for varied and normal stimuli of life which  
9 contributes to cognitive, social, emotional, and physical  
10 developmental needs such as play, educational, and social activities  
11 essential to all children and adolescents;

12        6. To information about what to expect prior to, during, and  
13 following a procedure or experience and support in coping with it;

14       7. To participate in decisions affecting their own medical  
15 treatment; and

16        8. To the minimization of stay duration by recognizing  
17 discharge planning needs.

18 D. All parents and legal guardians of minor patients in this  
19 state shall have the following responsibilities:

20       1. To continue in their parenting role to the extent of their  
21 ability; and

22        2. To be available to participate in decision-making and  
23 provide staff with knowledge of other parent or family whereabouts.

1 SECTION 3. This act shall become effective November 1, 2025.

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