

Second Regular Session  
Seventy-third General Assembly  
STATE OF COLORADO

REVISED

*This Version Includes All Amendments Adopted  
on Second Reading in the Second House*

LLS NO. 22-0583.01 Kristen Forrestal x4217

SENATE BILL 22-053

SENATE SPONSORSHIP

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Appropriations

**House Committees**

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A BILL FOR AN ACT

101 CONCERNING VISITATION RIGHTS AT HEALTH-CARE FACILITIES, AND,  
102 IN CONNECTION THEREWITH, MAKING AN APPROPRIATION.

Bill Summary

*(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://leg.colorado.gov>.)*

The bill specifies that a patient admitted to a hospital for inpatient care and a resident of a nursing care facility or assisted living residence may have at least one visitor of the patient's or resident's choosing during the stay or residency. A hospital, a nursing care facility, and an assisted living residence (collectively referred to as "health-care facility") must have written policies and procedures regarding the visitation rights of

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.  
Capital letters or bold & italic numbers indicate new material to be added to existing statute.  
Dashes through the words indicate deletions from existing statute.

HOUSE  
Amended 2nd Reading  
May 10, 2022

SENATE  
3rd Reading Unamended  
March 29, 2022

SENATE  
Amended 2nd Reading  
March 25, 2022

patients and residents, including policies and procedures setting forth any clinically necessary or reasonable restriction or limitation that the health-care facility may need to place on patient and resident visitation rights and the reasons for the restriction or limitation.

The bill prohibits a health-care facility from adopting policies or procedures that prohibit visitation of a patient or resident if the sole reason for the prohibition is to reduce the risk of transmission of a pandemic disease, but a health-care facility may impose specified restrictions and limitations for visitors to reduce the risk of transmission of the pandemic disease.

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1 *Be it enacted by the General Assembly of the State of Colorado:*

2 **SECTION 1.** In Colorado Revised Statutes, 25-1-120, **amend**  
3 (1)(b) as follows:

4 **25-1-120. Nursing facilities - rights of patients.** (1) The  
5 department shall require all skilled nursing facilities and intermediate care  
6 facilities to adopt and make public a statement of the rights and  
7 responsibilities of the patients who are receiving treatment in such  
8 facilities and to treat their patients in accordance with the provisions of  
9 said statement. The statement shall ensure each patient the following:

10 (b) The right to have private and unrestricted communications  
11 with any person of ~~his~~ THE PATIENT'S choice, EXCEPT AS SPECIFIED IN  
12 SECTION 25-3-125 (2) AND (3);

13 **SECTION 2.** In Colorado Revised Statutes, **recreate and**  
14 **reenact, with amendments,** 25-3-125 as follows:

15 **25-3-125. Visitation rights - hospital patients - residents in**  
16 **nursing care facilities or assisted living residences - limitations during**  
17 **a pandemic - definitions - short title.** (1) THE SHORT TITLE OF THIS  
18 SECTION IS THE "NO PATIENT OR RESIDENT LEFT ALONE ACT".

19 (2) (a) SUBJECT TO THE RESTRICTIONS AND LIMITATIONS FOR  
20 SKILLED NURSING FACILITY AND NURSING FACILITY RESIDENTS' VISITATION

1 RIGHTS SPECIFIED IN 42 U.S.C. 1396r(c)(3)(C); 42 U.S.C. 1395i(c)(3)(C);  
2 42 CFR 483.10 (a), (b), AND (f); THE RIGHTS FOR ASSISTED LIVING  
3 RESIDENTS SPECIFIED IN RULE PURSUANT TO SECTION 25-27-104; THE  
4 RESTRICTIONS AND LIMITATIONS SPECIFIED BY A HEALTH-CARE FACILITY  
5 PURSUANT TO SUBSECTION (3) OF THIS SECTION; RESTRICTIONS AND  
6 LIMITATIONS SPECIFIED IN STATE OR LOCAL PUBLIC HEALTH ORDERS; AND  
7 THE COMMUNICATIONS EXCEPTION SPECIFIED IN SECTION 25-1-120, IN  
8 ADDITION TO HOSPITAL PATIENT VISITATION RIGHTS IN 42 CFR 482.13 (h),  
9 A PATIENT OR RESIDENT OF A HEALTH-CARE FACILITY MAY HAVE AT LEAST  
10 ONE VISITOR OF THE PATIENT'S OR RESIDENT'S CHOOSING DURING THE  
11 PATIENT'S STAY OR RESIDENCY AT THE HEALTH-CARE FACILITY,  
12 INCLUDING:

13 (I) A VISITOR TO PROVIDE A COMPASSIONATE CARE VISIT TO  
14 ALLEVIATE THE PATIENT'S OR RESIDENT'S PHYSICAL OR MENTAL DISTRESS;

15 (II) A VISITOR OR SUPPORT PERSON DESIGNATED PURSUANT TO  
16 SUBSECTION (2)(b) OF THIS SECTION FOR A PATIENT OR RESIDENT WITH A  
17 DISABILITY; AND

18 (III) FOR A PATIENT WHO IS UNDER EIGHTEEN YEARS OF AGE, THE  
19 PARENT OR LEGAL GUARDIAN OF, OR THE PERSON STANDING IN LOCO  
20 PARENTIS TO, THE PATIENT.

21 (b) (I) A PATIENT OR RESIDENT OF A HEALTH-CARE FACILITY MAY  
22 DESIGNATE, ORALLY OR IN WRITING, A SUPPORT PERSON WHO SUPPORTS  
23 THE PATIENT OR RESIDENT DURING THE COURSE OF THE PATIENT'S STAY OR  
24 RESIDENCY AT A HEALTH-CARE FACILITY AND WHO MAY VISIT THE  
25 PATIENT OR RESIDENT AND EXERCISE THE PATIENT'S OR RESIDENT'S  
26 VISITATION RIGHTS ON BEHALF OF THE PATIENT OR RESIDENT WHEN THE  
27 PATIENT OR RESIDENT IS INCAPACITATED OR OTHERWISE UNABLE TO

1 COMMUNICATE.

2 (II) WHEN A PATIENT OR RESIDENT HAS NOT DESIGNATED A  
3 SUPPORT PERSON PURSUANT TO SUBSECTION (2)(b)(I) OF THIS SECTION  
4 AND IS INCAPACITATED OR OTHERWISE UNABLE TO COMMUNICATE THE  
5 PATIENT'S OR RESIDENT'S WISHES AND AN INDIVIDUAL PROVIDES AN  
6 ADVANCE MEDICAL DIRECTIVE DESIGNATING THE INDIVIDUAL AS THE  
7 PATIENT'S OR RESIDENT'S SUPPORT PERSON OR OTHER TERM INDICATING  
8 THE INDIVIDUAL IS AUTHORIZED TO EXERCISE RIGHTS COVERED BY THIS  
9 SECTION ON BEHALF OF THE PATIENT OR RESIDENT, THE HEALTH-CARE  
10 FACILITY SHALL ACCEPT THIS DESIGNATION AND ALLOW THE INDIVIDUAL  
11 TO EXERCISE THE PATIENT'S OR RESIDENT'S VISITATION RIGHTS ON THE  
12 PATIENT'S OR RESIDENT'S BEHALF.

13 (3) (a) CONSISTENT WITH 42 CFR 482.13 (h); 42 U.S.C.  
14 1396r (c)(3)(C); 42 U.S.C. 1395i (c)(3)(C); 42 CFR 483.10 (a), (b), AND  
15 (f); AND SECTION 25-27-104, A HEALTH-CARE FACILITY SHALL HAVE  
16 WRITTEN POLICIES AND PROCEDURES REGARDING THE VISITATION RIGHTS  
17 OF PATIENTS AND RESIDENTS, INCLUDING POLICIES AND PROCEDURES  
18 SETTING FORTH ANY [REDACTED] NECESSARY OR REASONABLE RESTRICTION OR  
19 LIMITATION TO ENSURE HEALTH AND SAFETY OF PATIENTS, STAFF, OR  
20 VISITORS THAT THE HEALTH-CARE FACILITY MAY NEED TO PLACE ON  
21 PATIENT OR RESIDENT VISITATION RIGHTS AND THE REASONS FOR THE  
22 RESTRICTION OR LIMITATION.

23 (b) (I) DURING A PERIOD WHEN THE RISK OF TRANSMISSION OF A  
24 COMMUNICABLE DISEASE IS HEIGHTENED, [REDACTED] A HEALTH-CARE FACILITY  
25 MAY:

26 (A) REQUIRE VISITORS TO ENTER THE HEALTH-CARE FACILITY  
27 THROUGH A SINGLE, DESIGNATED ENTRANCE;

1 (B) DENY ENTRANCE TO A VISITOR WHO HAS KNOWN SYMPTOMS  
2 OF THE COMMUNICABLE DISEASE AND SHOULD ENCOURAGE THE VISITOR  
3 TO SEEK CARE;

4 (C) REQUIRE VISITORS TO USE MEDICAL MASKS, FACE COVERINGS,  
5 OR OTHER PERSONAL PROTECTIVE EQUIPMENT WHILE ON THE  
6 HEALTH-CARE FACILITY PREMISES OR IN SPECIFIC AREAS OF THE  
7 HEALTH-CARE FACILITY; [REDACTED]

8 (D) FOR A HOSPITAL, REQUIRE VISITORS TO SIGN A WAIVER  
9 ACKNOWLEDGING THE RISKS OF ENTERING THE HEALTH-CARE FACILITY,  
10 WAIVING ANY CLAIMS AGAINST THE HEALTH-CARE FACILITY IF THE  
11 VISITOR CONTRACTS THE COMMUNICABLE DISEASE WHILE ON THE  
12 HEALTH-CARE FACILITY PREMISES, AND ACKNOWLEDGING THAT MENACING  
13 AND PHYSICAL ASSAULTS ON HEALTH-CARE WORKERS AND OTHER  
14 EMPLOYEES OF THE HEALTH-CARE FACILITY WILL NOT BE TOLERATED,  
15 AND, IF SUCH ABUSE OCCURS, A HOSPITAL MAY RESTRICT THE VISITOR'S  
16 CURRENT OR FUTURE ACCESS; AND

17 (E) FOR ALL OTHER HEALTH-CARE FACILITIES, REQUIRE VISITORS  
18 TO SIGN A DOCUMENT ACKNOWLEDGING THE RISKS OF ENTERING THE  
19 HEALTH-CARE FACILITY AND ACKNOWLEDGING THAT MENACING AND  
20 PHYSICAL ASSAULTS ON HEALTH-CARE WORKERS AND OTHER EMPLOYEES  
21 OF THE HEALTH-CARE FACILITY WILL NOT BE TOLERATED.

22 [REDACTED]  
23 (F) REQUIRE ALL VISITORS, BEFORE ENTERING THE HEALTH-CARE  
24 FACILITY, TO BE SCREENED FOR SYMPTOMS OF THE COMMUNICABLE  
25 DISEASE AND DENY ENTRANCE TO ANY VISITOR WHO HAS SYMPTOMS OF  
26 THE COMMUNICABLE DISEASE; AND

27 (G) REQUIRE ALL VISITORS TO THE HEALTH-CARE FACILITY TO BE

1 TESTED FOR THE COMMUNICABLE DISEASE AND DENY ENTRY FOR THOSE  
2 WHO HAVE A POSITIVE TEST RESULT; AND

3 (H) RESTRICT THE MOVEMENT OF VISITORS WITHIN THE  
4 HEALTH-CARE FACILITY, INCLUDING RESTRICTING ACCESS TO WHERE  
5 IMMUNOCOMPROMISED OR OTHERWISE VULNERABLE POPULATIONS ARE AT  
6 GREATER RISK OF BEING HARMED BY A COMMUNICABLE DISEASE.

7 (II) FOR VISITATION OF A PATIENT OR RESIDENT WITH A  
8 COMMUNICABLE DISEASE WHO IS ISOLATED, THE HEALTH-CARE FACILITY  
9 MAY:

10 (A) LIMIT VISITATION TO ESSENTIAL CAREGIVERS WHO ARE  
11 HELPING TO PROVIDE CARE TO THE PATIENT OR RESIDENT;

12 (B) LIMIT VISITATION TO ONE CAREGIVER AT A TIME PER PATIENT  
13 OR RESIDENT WITH A COMMUNICABLE DISEASE;

14 (C) SCHEDULE VISITORS TO ALLOW ADEQUATE TIME FOR  
15 SCREENING, EDUCATION, AND TRAINING OF VISITORS AND TO COMPLY WITH  
16 ANY LIMITS ON THE NUMBER OF VISITORS PERMITTED IN THE ISOLATED  
17 AREA AT ONE TIME; AND

18  
19 (D) PROHIBIT THE PRESENCE OF VISITORS DURING  
20 AEROSOL-GENERATING PROCEDURES OR DURING COLLECTION OF  
21 RESPIRATORY SPECIMENS.

22 (4) IF A HEALTH-CARE FACILITY REQUIRES, PURSUANT TO  
23 SUBSECTION (3) OF THIS SECTION, THAT A VISITOR USE A MEDICAL MASK,  
24 FACE COVERING, OR OTHER PERSONAL PROTECTIVE EQUIPMENT, OR TAKE  
25 A TEST FOR A COMMUNICABLE DISEASE, IN ORDER TO VISIT A PATIENT OR  
26 RESIDENT AT THE HEALTH-CARE FACILITY, NOTHING IN THIS SECTION:

27 (a) REQUIRES THE HEALTH-CARE FACILITY, IF THE REQUIRED

1 EQUIPMENT OR TEST IS NOT AVAILABLE DUE TO LACK OF SUPPLY, TO  
2 ALLOW A VISITOR TO ENTER THE FACILITY;

3 (b) REQUIRES THE HEALTH-CARE FACILITY TO SUPPLY THE  
4 REQUIRED EQUIPMENT OR TEST TO THE VISITOR OR BEAR THE COST OF THE  
5 EQUIPMENT FOR THE VISITOR; OR

6 (c) PRECLUDES THE HEALTH-CARE FACILITY FROM SUPPLYING THE  
7 REQUIRED EQUIPMENT OR TEST TO THE VISITOR.

8 (5) AS USED IN THIS SECTION, UNLESS THE CONTEXT OTHERWISE  
9 REQUIRES:

10 (a) "ADVANCE MEDICAL DIRECTIVE" HAS THE SAME MEANING AS  
11 SET FORTH IN SECTION 15-18.7-102 (2).

12 (b) "CAREGIVER" MEANS A PARENT, SPOUSE, OR OTHER FAMILY  
13 MEMBER OR FRIEND OF A PATIENT WHO PROVIDES CARE TO THE PATIENT.

14 (c) "COMMUNICABLE DISEASE" HAS THE SAME MEANING AS SET  
15 FORTH IN SECTION 25-1.5-102 (1)(a)(IV).

16 (d) (I) "COMPASSIONATE CARE VISIT" MEANS A VISIT WITH A  
17 FRIEND OR FAMILY MEMBER THAT IS NECESSARY TO MEET THE PHYSICAL  
18 OR MENTAL NEEDS OF A PATIENT OR RESIDENT WHEN THE PATIENT OR  
19 RESIDENT IS EXHIBITING SIGNS OF PHYSICAL OR MENTAL DISTRESS,  
20 INCLUDING:

21 (A) END-OF-LIFE SITUATIONS;

22 (B) ADJUSTMENT SUPPORT AFTER MOVING TO A NEW FACILITY OR  
23 ENVIRONMENT;

24 (C) EMOTIONAL SUPPORT AFTER THE LOSS OF A FRIEND OR FAMILY  
25 MEMBER;

26 (D) PHYSICAL SUPPORT AFTER EATING OR DRINKING ISSUES,  
27 INCLUDING WEIGHT LOSS OR DEHYDRATION; OR


1 (E) SOCIAL SUPPORT AFTER FREQUENT CRYING, DISTRESS, OR  
2 DEPRESSION.

3 (II) "COMPASSIONATE CARE VISIT" INCLUDES A VISIT FROM:

4 (A) A CLERGY MEMBER OR LAYPERSON OFFERING RELIGIOUS OR  
5 SPIRITUAL SUPPORT; OR

6 (B) OTHER PERSONS REQUESTED BY THE PATIENT OR RESIDENT FOR  
7 THE PURPOSE OF A COMPASSIONATE CARE VISIT.

8 (e) "HEALTH-CARE FACILITY" MEANS A HOSPITAL, NURSING CARE  
9 FACILITY, OR ASSISTED LIVING RESIDENCE LICENSED OR CERTIFIED BY THE  
10 DEPARTMENT PURSUANT TO SECTION 25-3-101.

11   
12 (f) "PATIENT OR RESIDENT WITH A DISABILITY" MEANS A PATIENT  
13 OR RESIDENT WHO NEEDS ASSISTANCE TO EFFECTIVELY COMMUNICATE  
14 WITH HEALTH-CARE FACILITY STAFF, MAKE HEALTH-CARE DECISIONS, OR  
15 ENGAGE IN ACTIVITIES OF DAILY LIVING DUE TO A DISABILITY SUCH AS:

16 (I) A PHYSICAL, INTELLECTUAL, BEHAVIORAL, OR COGNITIVE  
17 DISABILITY;

18 (II) DEAFNESS, BEING HARD OF HEARING, OR OTHER  
19 COMMUNICATION BARRIERS;

20 (III) BLINDNESS;

21 (IV) AUTISM SPECTRUM DISORDER; OR

22 (V) DEMENTIA.

23 **SECTION 3. Appropriation.** For the 2022-23 state fiscal year,  
24 \$45,409 is appropriated to the department of public health and  
25 environment for use by the health facilities and emergency medical  
26 services division. This appropriation is from the general fund and is based  
27 on an assumption that the division will require an additional 0.6 FTE. To



1 implement this act, the division may use this appropriation for the nursing  
2 and acute care facility survey.

3 **SECTION 4. Safety clause.** The general assembly hereby finds,  
4 determines, and declares that this act is necessary for the immediate  
5 preservation of the public peace, health, or safety.