Department of Legislative Services

Maryland General Assembly 2002 Session

FISCAL NOTE Revised

House Bill 1141

(Delegate Frush, et al.)

Environmental Matters

Education, Health, and Environmental Affairs

State Advisory Council on Quality Care at the End of Life

This bill creates a 20-member State Advisory Council on Quality Care at the End of Life. The advisory council must: (1) monitor trends in the provision of care to State residents with life-limiting illnesses; (2) study the impact of State statutes, regulations, policies, and other aspects of public policy on the provision of care at the end of life; (3) make recommendations regarding end-of-life care to the Office of the Attorney General, the Department of Health and Mental Hygiene (DHMH), the Department of Aging, and other State agencies; (4) advise the General Assembly on end-of-life care legislative proposals; (5) promote public and professional education in this area; and (6) carry out other duties requested by the Governor or the General Assembly. The Department of Aging and the Office of the Attorney General must jointly provide staff support and technical assistance to the council.

Fiscal Summary

State Effect: Any expense reimbursements for advisory council members and staffing costs for the council are assumed to be minimal and absorbable within existing budgeted resources.

Local Effect: None.

Small Business Effect: None.

Analysis

Current Law: The Health Care Decisions Act (Chapter 372 of 1993) sets procedures for individuals to determine under what conditions they want to receive health care services

and under what conditions they do not. Any competent individual may make a written advance directive regarding the providing, withholding, or withdrawing of health care. An advanced directive is a witnessed written document voluntarily executed by the individual or a witnessed oral statement made by the individual. An advance directive becomes effective when the individual's attending physician and a second physician certify in writing that the patient is incapable of making an informed decision. If a patient is unconscious or unable to communicate by any means, the certification of a second physician is not required.

An individual is incapable of making an informed decision regarding specific medical treatment when the patient is unable to understand the nature, extent, or probable consequences of the proposed treatment; is unable to make a rational evaluation of the burdens, risks, and benefits of the treatment; or is unable to communicate a decision.

An individual may revoke the advance directive at any time.

Each health care facility must provide every patient with information about their rights to make health care decisions, including the right to accept or refuse treatment and the right to make an advance directive, including a living will.

Additional Information

Prior Introductions: None.

Cross File: None.

Information Source(s): Department of Health and Mental Hygiene, Department of

Legislative Services

Fiscal Note History: First Reader - March 7, 2002

ncs/cer Revised - House Third Reader - April 1, 2002

Revised - Enrolled Bill - April 30, 2002

Analysis by: Lisa A. Daigle Direct Inquiries to:

John Rixey, Coordinating Analyst

(410) 946-5510 (301) 970-5510