J1 2lr0806

By: Delegates Hucker, Cullison, Hubbard, and Tarrant

Introduced and read first time: February 10, 2012 Assigned to: Health and Government Operations

A BILL ENTITLED

1 AN ACT concerning

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Health - Palliative Care - Services and Education

FOR the purpose of requiring certain hospitals to implement a palliative care program on or before a certain date; requiring the palliative care programs to provide and facilitate access to certain information and palliative care services and to implement certain policies and procedures; requiring certain health care providers to provide certain information and counseling about palliative care options to certain patients and proxy decision makers under certain circumstances; requiring counseling regarding palliative care to include certain information; authorizing counseling regarding palliative care to include certain discussions; providing that counseling regarding palliative care may occur over a series of meetings with a health care provider or other counseling provider; authorizing a health care provider or other counseling provider to encourage the patient or proxy decision maker to include certain individuals in counseling; requiring certain health care providers to make a certain referral and provide a patient or proxy decision maker with certain information under certain circumstances; establishing a Statewide Palliative Care Education Program in the Department of Health and Mental Hygiene; providing for the purpose of the Program; requiring the Department to publish certain information regarding palliative care on its Web site; authorizing the Department to develop and implement certain initiatives regarding palliative care education and services that the Department determines further certain purposes; defining certain terms; and generally relating to palliative care services and education.

24 BY adding to

Article – Health – General

Section 19–2401 through 19–2404 to be under the new subtitle "Subtitle 24.

Palliative Care"

28 Annotated Code of Maryland

29 (2009 Replacement Volume and 2011 Supplement)

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



$\frac{1}{2}$	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:
3	Article – Health – General
4	SUBTITLE 24. PALLIATIVE CARE.
5	19–2401.
6 7	(A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.
8 9	(B) "CHRONIC OR SERIOUS CONDITION OR ILLNESS" MEANS A MEDICAL CONDITION THAT:
10 11 12	(1) CAUSES SIGNIFICANT FUNCTIONAL AND QUALITY OF LIFE IMPAIRMENTS THAT ARE NOT LIKELY TO BE REVERSIBLE BY CURATIVE THERAPIES;
13	(2) IS LIKELY TO PROGRESS OVER TIME; AND
14 15	(3) MAY ULTIMATELY CONTRIBUTE TO THE PHYSIOLOGICAL AND FUNCTIONAL DECLINE AND SHORTENED SURVIVAL OF AN INDIVIDUAL.
16 17 18 19	(C) "DISEASE-TARGETED TREATMENT" MEANS TREATMENT DIRECTED AT THE UNDERLYING DISEASE OR CONDITION THAT IS INTENDED TO ALTER THE PROGRESSION OF THE DISEASE OR CONDITION, REGARDLESS OF WHETHER A CURE IS POSSIBLE.
20	(D) "HEALTH CARE PROVIDER" MEANS:
21	(1) A LICENSED PHYSICIAN;
22	(2) A CERTIFIED NURSE PRACTITIONER; OR
23	(3) A CERTIFIED PHYSICIAN ASSISTANT.
24 25 26 27 28	(E) "PALLIATIVE CARE" MEANS MEDICAL TREATMENT OR INTERDISCIPLINARY CARE PROVIDED TO A PATIENT OR CONSULTATION PROVIDED TO A PATIENT, A PROXY, OR A RELATIVE OR FRIEND OF THE PATIENT THAT IS INTENDED TO PREVENT OR ALLEVIATE SYMPTOMS, PAIN, AND SUFFERING AND ENHANCE THE PATIENT'S QUALITY OF LIFE.

- 1 (F) "PROXY" MEANS AN INDIVIDUAL LEGALLY AUTHORIZED TO MAKE 2 HEALTH CARE DECISIONS FOR A PATIENT.
- 3 **19–2402.**
- 4 (A) THIS SECTION APPLIES TO HOSPITALS THAT HAVE **50** OR MORE 5 BEDS.
- 6 (B) ON OR BEFORE JANUARY 1, 2016, EACH HOSPITAL SHALL 7 IMPLEMENT A PALLIATIVE CARE PROGRAM THAT MEETS THE REQUIREMENTS 8 OF THIS SECTION.
- 9 (C) A HOSPITAL'S PALLIATIVE CARE PROGRAM SHALL:
- 10 (1) PROVIDE ACCESS TO INFORMATION AND COUNSELING
- 11 REGARDING PALLIATIVE CARE SERVICES APPROPRIATE TO A PATIENT WITH A
- 12 CHRONIC OR SERIOUS CONDITION OR ILLNESS WHO MAY BENEFIT FROM
- 13 PALLIATIVE CARE SERVICES;
- 14 (2) FACILITATE ACCESS TO APPROPRIATE PALLIATIVE CARE
- 15 CONSULTATIONS AND SERVICES INCLUDING ASSOCIATED PAIN MANAGEMENT
- 16 CONSULTATIONS AND SERVICES CONSISTENT WITH A PATIENT'S NEEDS AND
- 17 PREFERENCES; AND
- 18 (3) IMPLEMENT POLICIES AND PROCEDURES ESTABLISHED BY
- 19 THE HOSPITAL TO IDENTIFY THE PROXY OF AN INDIVIDUAL WHO LACKS
- 20 CAPACITY TO MAKE HEALTH CARE DECISIONS IN ORDER TO PROVIDE THE
- 21 PROXY ACCESS TO INFORMATION AND COUNSELING REGARDING OPTIONS FOR
- 22 PALLIATIVE CARE FOR THE PATIENT.
- 23 **19–2403**.

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- 24 (A) WHEN A PATIENT IS DIAGNOSED WITH A CHRONIC OR SERIOUS
- 25 CONDITION OR ILLNESS, THE PHYSICIAN MAKING THE DIAGNOSIS SHALL
- 26 INFORM THE PATIENT OR PROXY THAT THE PATIENT MAY RECEIVE COUNSELING
- 27 REGARDING PALLIATIVE CARE OPTIONS THAT ARE AVAILABLE UNDER THE LAW.
- 28 (B) IF A PATIENT OR PROXY DECIDES TO RECEIVE COUNSELING
- 29 REGARDING PALLIATIVE CARE, A HEALTH CARE PROVIDER SHALL:
 - (1) PROVIDE THE COUNSELING; OR

- 1 (2) COMPLY WITH THE REQUIREMENTS OF SUBSECTION (F) OF 2 THIS SECTION.
- 3 (C) IF A PATIENT OR PROXY DECIDES TO RECEIVE COUNSELING 4 REGARDING PALLIATIVE CARE, THE COUNSELING SHALL INCLUDE THE 5 FOLLOWING INFORMATION REGARDING THE RIGHT OF THE PATIENT TO:
- 6 (1) (I) CONTINUE TO PURSUE DISEASE-TARGETED TREATMENT WITH OR WITHOUT CONCURRENT PALLIATIVE CARE; AND
- 8 (II) RECEIVE COMPREHENSIVE PAIN AND SYMPTOM 9 MANAGEMENT, INCLUDING ADEQUATE PAIN MEDICATION; OR
- 10 (2) IF THE PATIENT HAS AN END-OF-LIFE CONDITION:
- 11 (I) RECEIVE COMPREHENSIVE PAIN AND SYMPTOM 12 MANAGEMENT AND OTHER CLINICAL TREATMENTS USEFUL WHEN A PATIENT
- 13 HAS AN END-OF-LIFE CONDITION;
- 14 (II) MAKE AN ADVANCE DIRECTIVE UNDER TITLE 5, 15 SUBTITLE 6 OF THIS ARTICLE;
- 16 (III) REFUSE OR WITHDRAW FROM ANY LIFE-SUSTAINING 17 PROCEDURE; AND
- 18 (IV) REQUEST THAT AN EMERGENCY MEDICAL SERVICES 19 "DO NOT RESUSCITATE" ORDER BE ENTERED INTO THE PATIENT'S MEDICAL 20 RECORD.
- 21 (D) COUNSELING REGARDING PALLIATIVE CARE MAY INCLUDE:
- 22 (1) DISCUSSIONS ABOUT THE DESIRED TREATMENT OUTCOMES
- 23 FOR THE PATIENT, INCLUDING SYMPTOM MANAGEMENT, BASED ON THE
- 24 PATIENT'S WISHES REGARDING THE USE OF TREATMENTS, OR IF THE PATIENT'S
- 25 WISHES ARE UNKNOWN OR UNCLEAR, BASED ON THE BEST INTERESTS OF THE
- 26 PATIENT; AND
- 27 (2) A DISCUSSION OF THE BENEFITS AND BURDENS OF
- 28 TREATMENT OPTIONS IN A MANNER THAT THE PATIENT, THE PROXY, AND THE
- 29 PATIENT'S RELATIVES AND FRIENDS CAN EASILY UNDERSTAND.

- 1 (E) (1) COUNSELING REGARDING PALLIATIVE CARE MAY OCCUR 2 OVER A SERIES OF MEETINGS WITH A HEALTH CARE PROVIDER OR OTHER 3 COUNSELING PROVIDER BASED ON THE PATIENT'S NEEDS.
- 4 (2) A HEALTH CARE PROVIDER OR OTHER COUNSELING 5 PROVIDER MAY ENCOURAGE THE PATIENT OR PROXY TO INCLUDE THE 6 PATIENT'S RELATIVES AND FRIENDS IN COUNSELING REGARDING PALLIATIVE 7 CARE.
- 8 (F) IF A HEALTH CARE PROVIDER DOES NOT WISH TO PROVIDE 9 COUNSELING REGARDING PALLIATIVE CARE, THE HEALTH CARE PROVIDER 10 SHALL:
- 11 (1) INFORM THE PATIENT OR PROXY THAT THE HEALTH CARE PROVIDER DOES NOT WISH TO PROVIDE COUNSELING;
- 13 (2) REFER OR TRANSFER THE PATIENT TO ANOTHER HEALTH 14 CARE PROVIDER; AND
- 15 (3) PROVIDE THE PATIENT OR PROXY WITH INFORMATION ON PROCEDURES TO TRANSFER TO ANOTHER HEALTH CARE PROVIDER.
- 17 **19–2404.**
- 18 (A) THERE IS A STATEWIDE PALLIATIVE CARE EDUCATION PROGRAM
 19 IN THE DEPARTMENT.
- 20 (B) THE PURPOSE OF THE STATEWIDE PALLIATIVE CARE EDUCATION
 21 PROGRAM IS TO MAXIMIZE THE EFFECTIVENESS OF PALLIATIVE CARE
 22 INITIATIVES IN THE STATE TO ENSURE THAT COMPREHENSIVE AND ACCURATE
 23 INFORMATION ABOUT PALLIATIVE CARE IS AVAILABLE TO THE PUBLIC.
- 24 (C) (1) THE DEPARTMENT SHALL PUBLISH ON ITS WEB SITE A COMPREHENSIVE CLEARINGHOUSE OF INFORMATION ABOUT PALLIATIVE CARE.
- 26 (2) THE CLEARINGHOUSE SHALL INCLUDE RESOURCES AND LINKS TO RESOURCES ABOUT PALLIATIVE CARE FOR INDIVIDUALS, PALLIATIVE CARE PROVIDERS, HEALTH CARE PROVIDERS, AND HEALTH CARE FACILITIES.
- (D) THE DEPARTMENT MAY DEVELOP AND IMPLEMENT ANY OTHER INITIATIVES REGARDING PALLIATIVE CARE SERVICES AND EDUCATION THAT THE DEPARTMENT DETERMINES WOULD FURTHER THE PURPOSES OF THIS SUBTITLE.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2012.