Senate Bill 177

Printed pursuant to Senate Interim Rule 213.28 by order of the President of the Senate in conformance with presession filing rules, indicating neither advocacy nor opposition on the part of the President (at the request of Senate Interim Committee on Human Services)

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Requires hospice program licensed by Oregon Health Authority to identify patients in need of palliative care, provide information to patients, residents and families of patients about palliative care and facilitate patient access to palliative care.

Takes effect on 91st day following adjournment sine die.

A BILL FOR AN ACT

2 Relating to palliative care; amending ORS 413.273; and prescribing an effective date.

3 Be It Enacted by the People of the State of Oregon:

4 **SECTION 1.** ORS 413.273 is amended to read:

5 413.273. (1) As used in this section and ORS 413.270 and 413.271:

6 (a) "Appropriate" means consistent with applicable legal, health and professional standards, a

7 patient's clinical and other circumstances, and the patient's known wishes and beliefs.

8 (b) "Health facility" includes:

1

9 (A) Hospitals and long term care facilities licensed under ORS 441.025; [and]

10 (B) Residential facilities licensed under ORS 443.415; and

11 (C) Hospice programs licensed under ORS 443.860.

12 (c) "Medical care" means professional services for a patient that are provided, requested or 13 supervised by a physician, nurse practitioner or physician assistant.

(d)(A) "Palliative care" means patient-centered and family-centered medical care that optimizes
a patient's quality of life by anticipating, preventing and treating the suffering caused by serious
illness and involves addressing the patient's physical, social and spiritual needs and facilitating the
patient's autonomy, access to information and choice.

18 (B) "Palliative care" includes, but is not limited to:

19 (i) Discussing a patient's goals for treatment;

20 (ii) Discussing the treatment options that are appropriate for the patient; and

21 (iii) Comprehensive pain and symptom management.

(e) "Serious illness" means any illness, physical injury or condition that substantially impairs a patient's quality of life for more than a short period of time.

24 (2) A health facility shall:

25 (a) Establish a system for identifying patients or residents who could benefit from palliative 26 care;

27 (b) Provide information to patients, residents and their families about palliative care; and

28 (c) Coordinate with a patient's or resident's primary care provider, if practicable, to facilitate

29 the access of patients and residents with serious illnesses to appropriate palliative care.

$\rm SB~177$

- 1 SECTION 2. This 2019 Act takes effect on the 91st day after the date on which the 2019
- 2 regular session of the Eightieth Legislative Assembly adjourns sine die.

3