

Enrolled House Bill 2981

Sponsored by Representatives NOSSE, WILDE; Representatives DEXTER, NOBLE, PRUSAK,
SCHOUTEN, Senator PATTERSON

CHAPTER

AN ACT

Relating to palliative care.

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

SECTION 1. (1) As used in this section:

(a) “Interdisciplinary team” means a group composed of the following individuals who are trained or certified in palliative care:

- (A) A case manager who is a registered nurse licensed under ORS 678.010 to 678.410;**
- (B) A medical social worker; and**
- (C) A physician or other primary care provider.**

(b) “Palliative care services” includes:

- (A) Palliative care assessment;**
- (B) Advanced care planning including a discussion regarding completing a POLST;**
- (C) Case management and care coordination provided by a registered nurse in an interdisciplinary team;**

- (D) Pain and symptom management;**
- (E) Mental health and medical social work services;**
- (F) Twenty-four hour clinical telephone support;**
- (G) Spiritual care services; and**

(H) Other services prescribed by the Oregon Health Authority by rule.

(c) “POLST” has the meaning given that term in ORS 127.663.

(d) “Residential care facility” has the meaning given that term in ORS 443.400.

(e) “Skilled nursing facility” has the meaning given that term in ORS 442.015.

(2) The authority shall administer a program to provide palliative care services through coordinated care organizations. The authority shall adopt by rule the eligibility requirements and provider qualifications for the program including but not limited to all of the following:

(a) A patient qualifies for palliative care services under the program if the patient:

- (A) Has been diagnosed with a serious illness with a life-limiting prognosis that negatively impacts the patient’s quality of life or the quality of life of the patient’s caregiver; and**
- (B) Palliative care is ordered by the patient’s physician or other primary care provider.**

(b) The palliative care services, as determined and provided by an interdisciplinary team, must be provided in the patient’s choice of residence.

(c) A provider of palliative care services under the program and a coordinated care organization shall determine the reimbursement paid for services by mutual agreement.

(3) A residential care facility or a skilled nursing facility is not subject to the rules adopted by the authority under subsection (2) of this section in the provision or arrangement of palliative care services for residents of the facilities.

Passed by House June 16, 2021

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Timothy G. Sekerak, Chief Clerk of House

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Tina Kotek, Speaker of House

Passed by Senate June 22, 2021

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Peter Courtney, President of Senate

Received by Governor:

.....M,....., 2021

Approved:

.....M,....., 2021

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Kate Brown, Governor

Filed in Office of Secretary of State:

.....M,....., 2021

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Shemia Fagan, Secretary of State