

# D R A F T

## SUMMARY

Requires Department of Human Services to administer palliative care pilot project to support provision of community-based end of life care. Specifies eligibility, services, provider qualifications and reimbursement. Requires department to report evaluation of pilot project to interim committees of Legislative Assembly no later than September 15, 2022.

Sunset January 2, 2024.

## A BILL FOR AN ACT

Relating to palliative care.

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

**SECTION 1. (1) The Department of Human Services shall administer a palliative care pilot project to support the provision of community-based end of life care. The department shall adopt by rule application and eligibility requirements, provider qualifications, services to be provided and rates of reimbursement, consistent with the following guidelines:**

**(a) A patient shall qualify for palliative care through the pilot project if the patient:**

**(A) Has a prognosis of death in 12 months or less;**

**(B) Has received medical therapy and no longer wants medical therapy or medical therapy is no longer effective;**

**(C) Has frequent visits to the emergency department or frequent hospital admissions;**

**(D) Is diagnosed with chronic heart failure, chronic obstructive coronary disease, late stage liver disease, advanced cancer or other**

1 **life-threatening disease prescribed by the department by rule; and**

2 **(E) Is not eligible for Medicare.**

3 **(b) The palliative care must be provided by licensed clinical staff**  
4 **with palliative care training or certification.**

5 **(c) The palliative care must be provided in the patient's home or in**  
6 **a skilled nursing facility as:**

7 **(A) Short-term palliative care provided for a period of up to seven**  
8 **days; or**

9 **(B) Intensive palliative care provided by a multidisciplinary team**  
10 **in two-week increments for up to 12 months.**

11 **(d) The services that must be provided include, but are not limited**  
12 **to:**

13 **(A) Palliative care assessment;**

14 **(B) Advanced care planning;**

15 **(C) Completion of a POLST, as defined in ORS 127.663;**

16 **(D) Care management and coordination;**

17 **(E) Pain and symptom management;**

18 **(F) Mental health and medical social services;**

19 **(G) Twenty-four hour telephone support; and**

20 **(H) Chaplain services.**

21 **(e) Providers shall be reimbursed by:**

22 **(A)(i) An engagement fee per patient for short-term palliative care;**

23 **or**

24 **(ii) A biweekly fee per patient for intensive palliative care;**

25 **(B) An all-inclusive rate per member;**

26 **(C) A fee for completion of a POLST;**

27 **(D) A hospital avoidance incentive for each 14-day period; and**

28 **(E) Any other quality incentives prescribed by the department by**  
29 **rule.**

30 **(2) The department shall conduct an evaluation of the pilot project**  
31 **every six months based on patient satisfaction surveys and reduced**

1 overall costs of care.

2 (3) The department shall report to the interim committees of the  
3 Legislative Assembly related to health, no later than September 15,  
4 2022, on the results of the department's evaluations under subsection  
5 (2) of this section and the department's assessment of the pilot project  
6 overall.

7 SECTION 2. Section 1 of this 2019 Act is repealed on January 2, 2024.

8

---