

## HB 2217 STAFF MEASURE SUMMARY

### House Committee On Health Care

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**Meeting Dates:** 3/19

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#### **WHAT THE MEASURE DOES:**

Prohibits anyone other than a patient from administering medication to end patient's life. Defines "self-administer" to mean a qualified patient's act of ingesting or delivering medication to end his or her life in a humane and dignified manner. Takes effect on 91st day following adjournment sine die.

*REVENUE: May have revenue impact, but no statement yet issued.*

*FISCAL: May have fiscal impact, but no statement yet issued.*

#### **ISSUES DISCUSSED:**

#### **EFFECT OF AMENDMENT:**

No amendment.

#### **BACKGROUND:**

In 1994, Oregon voters passed the Death with Dignity Act (DWDA) that allows terminally ill residents to obtain and use prescriptions to end their lives through the voluntary self-administration of a lethal doses of medications, becoming the first state to allow this practice. In 1997 Oregon voters elected to retain the DWDA. The law set requirements for an individual to be eligible> The individual must be: 1) 18 years of age or older, 2) a state resident, 3) capable of making and communicating health care decisions to health care practitioners, and 4) diagnosed with a terminal illness that will lead to death within six months (Oregon Health Authority 2018).

Patients that meet the requirements are eligible to request a prescription from a participating licensed physician if a number of steps are fulfilled. Physicians, pharmacists, and health care systems voluntarily participate in the DWDA.

According to the Oregon Health Authority (OHA), in 2018, 249 adults received prescriptions under the DWDA from 103 physicians, with 168 individuals having died in 2018 from ingesting the prescribed medications. Most of these patients were aged 65 years or older (79.2 percent) with cancer being the most common medical diagnosis (62.5 percent).

House Bill 2217 defines "self-administer" in Oregon's Death with Dignity Act.