

**HB 2217 A STAFF MEASURE SUMMARY**

Carrier: Rep. Greenlick

**House Committee On Health Care****Action Date:** 04/09/19**Action:** Do pass with amendments. (Printed A-Eng.)**Vote:** 7-4-0-0**Yeas:** 7 - Alonso Leon, Greenlick, Keny-Guyer, Mitchell, Nosse, Prusak, Salinas**Nays:** 4 - Boles, Drazan, Hayden, Noble**Fiscal:** No fiscal impact**Revenue:** No revenue impact**Prepared By:** Oliver Droppers, LPRO Analyst**Meeting Dates:** 3/19, 4/9**WHAT THE MEASURE DOES:**

Prohibits anyone other than the patient from administering medication to end the patient's life. Defines self-administer to mean "a qualified patient's affirmative, conscious and voluntary act to take into his or her body medication to end his or her life in a humane and dignified manner." Takes effect on 91st day following adjournment *sine die*.

**ISSUES DISCUSSED:**

- Oregon's Death with Dignity Program, legislative history including legislative intent of the original Death with Dignity Act
- Individuals qualified to use the program who are physically unable to self-administer medications through self-ingestion (e.g., unable to swallow)
- Current wording of the Death with Dignity Program and proposed clarification
- Modalities an individual may use to end their life beyond oral ingestion; measures that qualify as ingestion
- Evaluation process an individual goes through as part of the Death with Dignity Program
- Euthanasia, suicide, and active participation by health care professionals; involuntary participation and conscious protections

**EFFECT OF AMENDMENT:**

Defines self-administer to mean "a qualified patient's affirmative, conscious and voluntary act to take into his or her body medication to end his or her life in a humane and dignified manner."

**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 dose of medications, becoming the first state to allow this practice. In 1997, Oregon voters elected to retain the DWDA. To obtain the relevant prescription, an individual must be at least 18 years old, a state resident, capable of making and communicating health care decisions to health care practitioners, and diagnosed with a terminal illness that will lead to death within six months. Eligible patients may request the prescription from a participating licensed physician if a number of other steps are fulfilled. Physicians, pharmacists, and health care systems participate in the DWDA voluntarily.

According to the Oregon Health Authority (OHA), in 2018, 249 adults received prescriptions under the DWDA from 103 physicians, and 168 individuals exercised their right to die. 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-A defines "self-administer" for purposes of Oregon's Death with Dignity Act.