

## HB 2981 STAFF MEASURE SUMMARY

### House Committee On Health Care

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**Prepared By:** Oliver Droppers, LPRO Analyst

**Sub-Referral To:** Joint Committee On Ways and Means

**Meeting Dates:** 2/18

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

Directs Oregon Health Authority to create and administer a program to provide palliative care services. Allows OHA to establish, by rule, eligibility requirements, provider qualifications, services, and reimbursement rates in accordance with specified guidelines. Specifies palliative care providers are to be reimbursed through arrangements with coordinated care organizations or on a fee-for-service basis. Requires OHA to notify Legislative Counsel if the Centers for Medicare and Medicaid Services approves or disapproves creation of, and payment for, services administered through the program. 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:**

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 a serious illness, regardless of prognosis. The care involves addressing the patient's physical, social, and spiritual needs, as well as facilitating the patient's authority, access to information, and choice. Palliative care includes, but is not limited to: discussing a patient's goals for treatment; discussing the treatment options that are appropriate for the patient; and comprehensive pain and symptom management. In comparison, hospice care may be provided to an individual with a terminal illness whose health care professional certifies they have six-months or less to live and has also decided to no longer receive treatment for their illness (e.g., end-of-life care).

Medicare and most Medicaid programs and private insurers cover one form of supportive care—hospice—for patients who are dying. Coverage of, and reimbursement for, palliative care services by Medicaid varies by state. According to the National Academy for State Health Policy, as of January 2021, six states provided funds for palliative care programs and education.

House Bill 2981 requires the Oregon Health Authority to establish and administer a program to provide palliative care services.