## House Bill 2981

Sponsored by Representatives NOSSE, WILDE

## SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure as introduced.

Requires Oregon Health Authority to establish and administer program to provide palliative care services and support provision of home- and community-based end of life care. Specifies eligibility, services and provider qualifications.

## A BILL FOR AN ACT

Relating to palliative care. 2

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Be It Enacted by the People of the State of Oregon: 3

SECTION 1. The Oregon Health Authority shall establish and administer, through fee-4 for-service payment or through coordinated care organizations, a program to provide  $\mathbf{5}$ palliative care services and support the provision of home- and community-based end of life 6 care. The authority shall adopt by rule eligibility requirements, provider qualifications, ser-7 8 vices to be provided and rates of reimbursement, consistent with the following guidelines: (1) A patient shall qualify for palliative care if: 9 (a) The patient has been diagnosed with a serious illness with a life-limiting prognosis 10

of 24 months or less that negatively impacts the patient's or caregiver's quality of life; 11

(b) Palliative care is ordered by a physician or primary health care provider; and 12

(c) The patient may be at risk for frequent emergency department visits or frequent 1314 hospitalizations.

(2) The palliative care services must be provided by an interdisciplinary team of providers 15 who are trained or certified in palliative care. A team must include: 16

(a) A case manager who is a registered nurse under ORS 678.010 to 678.410; 17

- (b) A medical social worker; and 18
- 19 (c) A physician or other primary health care provider.
- (3) The palliative care must be provided in the patient's residence of choice, which may 20 include a long term care facility, as defined in ORS 442.015. 21

22(4) The services that must be provided, as determined by the team, include, but are not 23limited to:

- (a) Palliative care assessment; 24
- 25(b) Advanced care planning including discussion regarding completion of a POLST, as 26 defined in ORS 127.663;
- (c) Case management and care coordination provided by a registered nurse under ORS 27 678.010 to 678.410; 28
- (d) Pain and symptom management; 29
- 30 (e) Mental health and medical social work services;
- (f) Twenty-four hour clinical telephone support; and 31

1 (g) Spiritual care services.

2 (5) Providers of palliative care under this section must be reimbursed through agree-

3 ments with coordinated care organizations or by fee-for-service payment per episode of care

4 or through a mutually agreed upon payment structure.

5 <u>SECTION 2.</u> (1) Section 1 of this 2021 Act becomes operative on the later of July 1, 2022, 6 or the date that the Centers for Medicare and Medicaid Services approves the implementa-7 tion of section 1 of this 2021 Act.

8 (2) The Oregon Health Authority shall immediately notify the Legislative Counsel if the

9 Centers for Medicare and Medicaid Services approves or disapproves, in whole or in part, the 10 implementation of section 1 of this 2021 Act.

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