



OHIO LEGISLATIVE SERVICE COMMISSION

Bill Analysis

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H.B. 286

132nd General Assembly
(As Introduced)

Rep. LaTourette

BILL SUMMARY

- Creates the Palliative Care and Quality of Life Interdisciplinary Council to consult with and advise the Ohio Department of Health on matters related to palliative care initiatives.
 - Establishes the Palliative Care Consumer and Professional Information and Education Program in the Department of Health and requires the Department to publish on its website certain information regarding palliative care.
 - Requires specified health care facilities to establish a system for identifying patients or residents who could benefit from palliative care and to facilitate access to palliative care for individuals with a serious illness.
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CONTENT AND OPERATION

Palliative Care and Quality of Life Interdisciplinary Council

The bill creates the Palliative Care and Quality of Life Interdisciplinary Council and requires it to consult with and advise the Director of the Ohio Department of Health on matters related to the establishment, maintenance, operation, and evaluation of palliative care initiatives in Ohio.¹ For the purposes of the bill, palliative care is defined as "treatment for a patient with a serious or life-threatening illness directed at controlling pain, relieving other symptoms, and enhancing the quality of life of the patient and the patient's family rather than treatment for the purpose of cure."²

¹ R.C. 3701.36.

² R.C. 3712.01, not in the bill.

Council membership

The Director is charged with appointing council members. They must include individuals with expertise in palliative care who represent the following constituencies or professions:

- (1) Patients;
- (2) Family caregivers;
- (3) Clergy or spiritual advisers;
- (4) Physicians;
- (5) Physician assistants;
- (6) Registered nurses, licensed practical nurses, and advanced practice registered nurses;
- (7) Professional clinical counselors or professional counselors;
- (8) Independent social workers or social workers;
- (9) Pharmacists.

The bill requires all of the professional members to be licensed or authorized to practice in Ohio.

The membership must also include individuals who have worked with differing age groups and those who have experience or expertise in various palliative care delivery models, including acute care, long-term care, hospice, and home health agency. Employees of state agencies that administer programs pertaining to palliative care or are otherwise concerned with the delivery of palliative care in Ohio also may be members.

Although the bill requires that at least two members of the Council be physicians or nurses who are board-certified in hospice or palliative care, it does not specify a total number of members.

Initial appointments

The Director must make initial appointments not later than 90 days after the bill's effective date.



Membership terms

Terms of office are for three years. Each member holds office from the date of appointment until the end of the term for which the member was appointed. A member must continue in office after the member's term expires until the member's successor takes office, or until a period of 60 days has elapsed, whichever occurs first. In the event of a member's death, removal, resignation, or incapacity, the Director must appoint a successor to hold office for the remainder of the predecessor's term.

Meetings and chairpersons

The Council must meet at the call of the Director, but not less than twice a year. Each year, the Council must select from among its members a chairperson and vice-chairperson. The duties of the chairperson and vice-chairperson are to be established by the Council.

Compensation

A member must serve without compensation, except to the extent that serving on the Council is considered part of the member's regular employment duties.

Other duties

In addition to consulting with and advising the Director on matters related to palliative care initiatives, the Council must consult with the Department about both of the following matters:

(1) The Palliative Care Consumer and Professional Information and Education Program;

(2) The duties of health care facilities to identify those who could benefit from palliative care, provide information to such individuals, and facilitate their access to palliative care.

Administrative support

The bill requires the Department to provide administrative support to the Council.



Sunset review

The bill specifies that the Council is not subject to the law governing the sunset review of agencies.³

Palliative Care Consumer and Professional Information and Education Program

The bill establishes the Palliative Care Consumer and Professional Information and Education Program in the Department of Health.⁴ It specifies that the Program's purpose is to maximize the effectiveness of palliative care initiatives in Ohio by ensuring that comprehensive and accurate information and education on palliative care is available to the public, health care providers, and health care facilities. As part of the Program, the Department must consult with the Palliative Care and Quality of Life Interdisciplinary Council.

Department website

The bill requires the Department to publish on its website information about palliative care, including all of the following:

- (1) Continuing education opportunities for health care professionals;
- (2) Information about palliative care delivery in a patient's home or in primary, secondary, or tertiary environments;
- (3) Best practices for palliative care delivery;
- (4) Consumer educational materials and referral information for palliative care, including hospice.

Program initiatives

Under the bill, the Department may develop and implement any other initiatives regarding palliative care services and education it determines necessary.

Duties of health care facilities

The bill requires that certain health care facilities establish a system for identifying patients or residents who could benefit from palliative care. It also requires each facility to provide information on and facilitate access to appropriate palliative

³ R.C. 101.82 to 101.87, not in the bill.

⁴ R.C. 3701.361.



care services for a patient or resident with a serious illness.⁵ Under the bill, a serious illness is any medical illness or physical injury or condition that substantially impacts quality of life for more than a short period of time and includes cancer; heart, renal, or liver failure; lung disease; or Alzheimer's disease or related dementias.

The health care facilities subject to the bill's provisions include hospitals, ambulatory surgical facilities, nursing homes, residential care facilities, county or district homes, veterans' homes, home health agencies, hospice care programs, and pediatric respite care programs.

HISTORY

ACTION	DATE
Introduced	06-22-17

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⁵ R.C. 3701.362.

