

SENATE BILL REPORT

SHB 2326

As Reported by Senate Committee On:
Health & Long Term Care, February 26, 2020

Title: An act relating to hospital end-of-life care policies.

Brief Description: Reporting end-of-life care policies.

Sponsors: House Committee on Health Care & Wellness (originally sponsored by Representatives Macri, Robinson, Rude, Cody, Leavitt, Thai, Ormsby, Wylie, Doglio, Kloba, Riccelli, Tharinger and Appleton).

Brief History: Passed House: 2/14/20, 89-9.

Committee Activity: Health & Long Term Care: 2/24/20, 2/26/20 [DP, w/oRec, DNP].

Brief Summary of Bill

- Requires hospitals to submit their end-of-life care policies to the Department of Health.

SENATE COMMITTEE ON HEALTH & LONG TERM CARE

Majority Report: Do pass.

Signed by Senators Cleveland, Chair; Randall, Vice Chair; Conway, Dhingra, Frockt, Keiser, Muzzall and Van De Wege.

Minority Report: That it be referred without recommendation.

Signed by Senator Rivers.

Minority Report: Do not pass.

Signed by Senators O'Ban, Ranking Member; Becker.

Staff: LeighBeth Merrick (786-7445)

Background: Access to Care Policies. The Governor's Directive 13-12, directed the Department of Health (DOH) to adopt rules requiring hospitals to supply their non-discrimination, end-of-life care, and reproductive health care policies for consumers to access on DOH's webpage. DOH's rules require every hospital to submit these policies to DOH and

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the policies be posted on the hospital and DOH's websites. In 2019, legislation was enacted requiring every hospital to submit to DOH its policies on admission, nondiscrimination, and reproductive health care using a form created by DOH, the Washington State Hospital Association and patient advocacy groups. The form must provide the public with specific information about what reproductive health care services are and are not performed at each hospital. Submitted policies and the form must be posted on the hospital and DOH's website.

Death with Dignity Act. In 2008, voters approved initiative 1000 which established The Death with Dignity Act (Act). The Act allows terminally-ill adult Washington residents with six months or less to live to request medication that they may self administer to end their life. Physicians, pharmacists, and health care providers are not required to participate, and health care providers may prohibit participation on their premises. Facilities that prohibit participation may not sanction physicians or pharmacists for participating under certain circumstances.

Summary of Bill: Every hospital must submit its policies regarding end-of-life care and the Act to DOH, in addition to its admission, nondiscrimination and reproductive health care policies. By August 1, 2020, DOH must create an additional form related to end-of life care and the Act for hospitals to use to submit along with their other access to care policies. The form must provide the public with specific information about which end-of-life services are and are not generally available at each hospital.

Appropriation: None.

Fiscal Note: Not requested.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: This bill takes effect 90 days after adjournment of the session in which the bill is passed, except for section 1, relating to hospital submission of end-of-life care policies, which takes effect September 1, 2020.

Staff Summary of Public Testimony: PRO: Many people do not know where they can access end-of-life care and it can be stressful for terminally ill individuals and their families to decipher the options. The existing policies that are provided to DOH are incomplete, vague and difficult for the average consumer to understand. This bill requires DOH to work with stakeholders to develop a standardized form for hospitals to use when submitting their information to DOH. This follows the same process that the Legislature authorized last year for reproductive health care and will ensure consumers receive consistent and clear information about what end-of-life care services are available at each hospital. It is helpful to have the end-of-life care form separate from the reproductive health form since consumers seeking information about each of these services are often in different phases in their lives.

Persons Testifying: PRO: Representative Nicole Macri, Prime Sponsor; Nancy Sapiro, End of Life Washington; Leah Rutman, ACLU; Lisa Thatcher, Washington State Hospital Association.

Persons Signed In To Testify But Not Testifying: No one.