

FINAL BILL REPORT

SHB 2419

FULL VETO

Synopsis as Enacted

Brief Description: Studying barriers to the use of the Washington death with dignity act.

Sponsors: House Committee on Health Care & Wellness (originally sponsored by Representatives Rude, Macri, Kloba, Peterson, Springer, Cody, Ormsby, Riccelli and Doglio).

House Committee on Health Care & Wellness
House Committee on Appropriations
Senate Committee on Health & Long Term Care
Senate Committee on Ways & Means

Background:

Washington's Death with Dignity Act.

The Death with Dignity Act (Act) allows Washington adult residents that have a terminal illness with six months or less to live to request medication that the patient may self-administer to end the patient's life.

Under the Act, the patient must first make an oral request to a physician for medication, followed by a written request, followed by a second oral request. A waiting period of 15 days is required between the time of the first oral request and the writing of the prescription. The patient has the option to rescind the request at any time. Once the request has been processed and fulfilled, the medication may be self-administered.

Health care providers are not required to participate in the provisions of the Act, and health care providers may prohibit others from participating on their premises. Health care providers may sanction other health care providers for participating, unless the participation occurs outside of the course of employment or involves a provider with independent contractor status. No person participating in good faith compliance with the Act shall be subject to civil or criminal liability or professional disciplinary action.

The sale, procurement, or issuance of any life, health, or accident insurance or annuity policy or the rate charged for any policy may not be conditioned upon or affected by the participation in the Act.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

Department of Health Annual Report.

The Department of Health (DOH) collects and reports on information from health care providers regarding participation in the Act. The DOH is also required to review the information for compliance and produce an annual statistical report. The data collection requirements are set by the DOH and include demographic characteristics, aggregate data on the number of participants, information from death certificates and after-death reports, medical history, timing information related to medication self-administration, complications from medication self-administration, and any involvement of emergency medical services after self-administration.

Summary:

The University of Washington (UW) must consult with the Department of Health (DOH) and, with approval from the Washington State Institutional Review Board, conduct a study and report on the barriers facing Washington residents who wish to access the Death with Dignity Act (Act). The report must consider the extent to which the following may be barriers to accessing the Act:

- a lack of awareness of the Act;
- the 15-day waiting period;
- the effectiveness of pain control medication during the 15-day waiting period;
- concerns that inhibit participation of health care providers;
- hospital, medical, hospice, and long-term care providers' policies that restrict the participation and distribution of information about the Act;
- geographic access to pharmacies that dispense medications related to the Act;
- restrictions based on the self-administration requirement;
- lack of insurance coverage for the services and medications necessary to participate in the Act;
- the need for improvements to the data collection system; and
- any other barriers identified in the course of performing the study.

The report is due by June 30, 2021, and must include its findings and any legislative or administrative policy recommendations to the Governor and the committees of the Legislature related to health policy. The UW must enter into a data sharing agreement with the DOH for the purposes of this study and the report must protect patient and health care provider confidentiality.

Votes on Final Passage:

House	67	31
Senate	36	13