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**HOUSE BILL 1577**

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**State of Washington**

**69th Legislature**

**2025 Regular Session**

**By** Representatives Bernbaum, Tharinger, Gregerson, Wylie, Simmons, and Reed

Read first time 01/24/25. Referred to Committee on Health Care & Wellness.

1 AN ACT Relating to the provision of palliative care services by  
2 volunteer organizations that provide hospice care without  
3 compensation; amending 2024 c 166 s 1 (uncodified); and declaring an  
4 emergency.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

6 **Sec. 1.** 2024 c 166 s 1 (uncodified) is amended to read as  
7 follows:

8 (1) The office of the insurance commissioner, in consultation  
9 with the health care authority, shall convene a work group to design  
10 the parameters of a palliative care benefit and payment model for the  
11 benefit of fully insured health plans, as defined in RCW 48.43.005.  
12 The work group must coordinate its work with the ongoing work at the  
13 health care authority related to designing a palliative care benefit  
14 for the state medicaid program and the employee and retiree benefits  
15 program.

16 (2) (a) The work group shall consider the following elements of a  
17 palliative care benefit:

18 ~~((a))~~ (i) Clinical eligibility criteria;

19 ~~((b))~~ (ii) The services included in a palliative care benefit;

20 ~~((e))~~ (iii) Appropriate staffing, including staffing models and  
21 provider training;

1       ~~((d))~~ (iv) Evaluation criteria and reporting requirements; and  
2       ~~((e))~~ (v) Payment models.

3       (b) Any recommendations related to the palliative care benefit  
4 developed under (a) of this subsection must permit volunteer  
5 organizations that provide hospice care without receiving  
6 compensation pursuant to RCW 70.127.050 to provide palliative care  
7 without meeting the elements of the palliative care benefit or having  
8 to receive a license to provide palliative care services.

9       (3) The commissioner may contract with a vendor to conduct  
10 actuarial analysis if necessary.

11       (4) The work group shall consist of the following members:

12       (a) One representative from the office of the insurance  
13 commissioner to be appointed by the commissioner;

14       (b) One representative from the health care authority to be  
15 selected by the director of the health care authority;

16       (c) One representative from the department of social and health  
17 services to be appointed by the secretary of the department;

18       (d) One representative from the department of health in-home  
19 services program to be appointed by the secretary of health;

20       (e) One representative from the Washington health benefit  
21 exchange to be appointed by the chief executive officer of the  
22 exchange;

23       (f) One representative from the Washington state hospice and  
24 palliative care organization;

25       (g) Four representatives currently providing palliative care,  
26 either as clinicians or operational leaders for a hospice or  
27 palliative care program, including at least one physician, to be  
28 selected by the Washington state hospice and palliative care  
29 organization;

30       (h) One representative from the association of Washington health  
31 care plans;

32       (i) One representative from a commercial health carrier and one  
33 representative from a medicaid managed care organization to be  
34 selected by the association of Washington health care plans;

35       (j) One representative from the Washington state hospital  
36 association;

37       (k) One representative from the home care association of  
38 Washington;

39       (l) One representative from the Washington health alliance;

40       ~~((and))~~

1 (m) One representative from the Washington state nurses  
2 association; and

3 (n) One representative from a volunteer organization that  
4 provides hospice care without receiving compensation pursuant to RCW  
5 70.127.050.

6 (5) The work group shall convene its first meeting by July 30,  
7 2024, and shall submit a report to the legislature detailing its work  
8 and any recommendations, including any legislation, by November 1,  
9 2025.

10 (6) For the purposes of this section, "palliative care" means  
11 expert assessment and management of a patient's symptoms, including  
12 coordination of care, attending to the physical, functional,  
13 psychological, practical, and spiritual consequences of serious  
14 illness, and assessment and support of caregiver needs. Palliative  
15 care is a person- and family-centered approach to care, providing  
16 people living with serious illness relief from the symptoms and  
17 stress of an illness, and can be delivered alongside life-prolonging  
18 or curative care.

19 (7) This section expires June 1, 2026.

20 NEW SECTION. **Sec. 2.** This act is necessary for the immediate  
21 preservation of the public peace, health, or safety, or support of  
22 the state government and its existing public institutions, and takes  
23 effect immediately.

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