A BILL

To enact sections 3701.36, 3701.361, and 3701.362 of the Revised Code to create the Palliative Care and Quality of Life Interdisciplinary Council, to establish the Palliative Care Consumer and Professional Information and Education Program, and to require health care facilities to identify patients and residents who could benefit from palliative care.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

Section 1. That sections 3701.36, 3701.361, and 3701.362 of the Revised Code be enacted to read as follows:

Sec. 3701.36. (A) As used in this section and sections 3701.361 and 3701.362 of the Revised Code, "palliative care" has the same meaning as in section 3712.01 of the Revised Code.

(B) There is hereby created the palliative care and quality of life interdisciplinary council. Subject to division (C) of this section, members of the council shall be appointed by the director of health and include individuals with expertise in palliative care who represent the following professions or constituencies:
(1) Physicians authorized under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery;

(2) Physician assistants authorized to practice under Chapter 4730. of the Revised Code;

(3) Advanced practice registered nurses licensed under Chapter 4723. of the Revised Code who are designated as clinical nurse specialists or certified nurse practitioners;

(4) Registered nurses and licensed practical nurses licensed under Chapter 4723. of the Revised Code;

(5) Licensed professional clinical counselors or licensed professional counselors licensed under Chapter 4757. of the Revised Code;

(6) Independent social workers or social workers licensed under Chapter 4757. of the Revised Code;

(7) Pharmacists licensed under Chapter 4729. of the Revised Code;

(8) Clergy or spiritual advisers;

(9) Patients;

(10) Family caregivers.

The council's membership also may include employees of agencies of this state that administer programs pertaining to palliative care or are otherwise concerned with the delivery of palliative care in this state.

(C) Members shall include individuals who have worked with various age groups (including children and the elderly), as well as those who have experience or expertise in various palliative
care delivery models (including acute care, long-term care, hospice, and home health agency). At least two members shall be physicians and nurses who are board-certified in hospice or palliative care.

(D) The director shall make the initial appointments to the council not later than ninety days after the effective date of this section. Terms of office shall be three years. Each member shall hold office from the date of appointment until the end of the term for which the member was appointed. In the event of death, removal, resignation, or incapacity of a council member, the director shall appoint a successor who shall hold office for the remainder of the term for which the successor's predecessor was appointed. A member shall continue in office subsequent to the expiration date of the member's term until the member's successor takes office, or until a period of sixty days has elapsed, whichever occurs first.

The council shall meet at the call of the director of health, but not less than twice annually. The council shall select annually from among its members a chairperson and vice-chairperson, whose duties shall be established by the council.

Each member shall serve without compensation, except to the extent that serving on the council is considered part of the member's regular employment duties.

(E) The council shall consult with and advise the director on matters related to the establishment, maintenance, operation, and evaluation of palliative care initiatives in this state. The council also shall consult with the department of health for the purposes of sections 3701.361 and 3701.362 of the Revised Code.

(F) The department of health shall provide to the council
the administrative support necessary to execute its duties.

(G) The council is not subject to sections 101.82 to 101.87 of the Revised Code.

Sec. 3701.361. The palliative care consumer and professional information and education program is hereby established in the department of health. The purpose of the program is to maximize the effectiveness of palliative care initiatives in this state by ensuring that comprehensive and accurate information and education on palliative care is available to the public, health care providers, and health care facilities.

The department shall publish on its web site information on palliative care, including information on continuing education opportunities for health care professionals; information about palliative care delivery in a patient's home and in primary, secondary, and tertiary environments; best practices for palliative care delivery; and consumer educational materials and referral information on palliative care, including hospice. The department may develop and implement other initiatives regarding palliative care services and education as the department determines necessary. In implementing this section, the department shall consult with the palliative care and quality of life interdisciplinary council created under section 3701.36 of the Revised Code.

Sec. 3701.362. (A) As used in this section:

(1) "Health care facility" means any of the following:

(a) A hospital registered under section 3701.07 of the Revised Code;

(b) An ambulatory surgical facility as defined in section
(c) A nursing home, residential care facility, county
home, or district home as defined in section 3721.01 of the
Revised Code;

(d) A veterans' home operated under Chapter 5907. of the
Revised Code;

(e) A hospice care program or pediatric respite care
program as defined in section 3712.01 of the Revised Code;

(f) A home health agency as defined in section 3701.881 of
the Revised Code.

(2) "Serious illness" means any medical illness or
physical injury or condition that substantially impacts quality
of life for more than a short period of time. "Serious illness"
includes, but is not limited to, cancer; heart, renal, or liver
failure; lung disease; and Alzheimer's disease and related
dementia.

(B) A health care facility shall do both of the following:

(1) Establish a system for identifying patients or
residents who could benefit from palliative care;

(2) Provide information on and facilitate access to
appropriate palliative care services for patients and residents
with a serious illness.