

Written Proponent Testimony on HB138
Susan Wallace, Chief Policy Officer, LeadingAge Ohio
Senate Health Committee
March 2, 2022

Thank you for the opportunity to provide testimony in support of HB138, which would, among other changes, allow Ohio emergency responders to follow Do Not Resuscitate (DNR) orders written by physician assistants and nurse practitioners.

LeadingAge Ohio represents nearly 400 aging services providers across the state of Ohio, including affordable housing, independent living, assisted living, nursing homes, adult day, home care, hospices & palliative care programs. LeadingAge Ohio also serves as the convener for the Honoring Wishes Task Force, a coalition of health systems, physician groups, attorneys, professional associations and other stakeholders that aims to help Ohioans communicate their healthcare wishes with providers, families and loved ones.

Ohio has long permitted nurse practitioners (NP), clinical nurse specialists (CNS) and physician assistants (PA), to write DNR orders on behalf of their patients. Particularly in geriatric practice where physician shortages persist, these professionals have filled a critical gap, freeing physicians to deploy their specialized skills and knowledge where it is most needed. Increasingly, some roles became embedded into care models. For example, in hospice care a nurse practitioner may serve as a patient's attending practitioner.

When Ohio's DNR rules were last revised in 2019, it came to light that while the statute governing DNR permitted NPs, CNSs, and PAs to write DNR orders, the portion of the Ohio Revised Code that outlined emergency medical technicians' (EMT) scope of practice only allowed EMTs to follow orders signed by a physician. This meant that EMTs responding to an emergency in the community or an individual's private residence could not lawfully follow the orders, even if the DNR order was lawfully executed.

HB138 corrects this issue by bringing EMT scope of practice in line with Ohio's DNR law. It is a simple, technical change that will have a lasting positive impact for older Ohioans and Ohioans facing end of life, and allow the practitioner who best knows their preferences and values to be the one to sign the DNR order.

Among the amendments you are currently considering is another policy change that will have a positive impact on older Ohioans. This amendment would allow non-emergency transportation to be staffed with a single licensed EMT and one other non-EMT, rather than two licensed EMTs, which is the current practice. Increasingly, our nursing facility and hospice members have reported difficulty in securing transportation for the individuals they serve. For nursing facility residents—particularly those residing in rural areas—a single transport to a specialist appointment may take two licensed EMTs out of rotation for an entire day. Reimbursement rates for transportation lag, so it is no wonder that so many operators have ended their contracts with nursing facilities.

Hospices experience similar challenges when discharging a patient from the hospital to home or an inpatient hospice setting. Reimbursement lags behind reimbursement for emergent calls, so these individuals often experience delays in discharge—at times not leaving hospitals until late hours of night.

This change would drastically reduce the cost to operators for these low-risk runs, and would be a first step towards improving access for Ohio's most vulnerable.

We thank you for time spent considering our comments, and encourage you to swiftly pass HB138.