

LEGISLATURE OF NEBRASKA
ONE HUNDRED FOURTH LEGISLATURE
SECOND SESSION

LEGISLATIVE BILL 1043

Introduced by Howard, 9.

Read first time January 20, 2016

Committee: Health and Human Services

1 A BILL FOR AN ACT relating to public health and welfare; to amend
2 sections 71-401 and 71-403, Revised Statutes Supplement, 2015; to
3 create a program and an advisory council regarding palliative care;
4 to provide powers and duties; to provide assistance regarding
5 palliative care for health care facilities and services; to
6 harmonize provisions; and to repeal the original sections.

7 Be it enacted by the people of the State of Nebraska,

1 Section 1. The Department of Health and Human Services shall
2 establish the Palliative Care Consumer and Professional Information and
3 Education Program. The department shall consult with the Palliative Care
4 and Quality of Life Advisory Council created in section 2 of this act
5 regarding the program. The department shall make information regarding
6 the program available on its web site. The information shall include, but
7 not be limited to:

8 (1) Continuing education opportunities regarding palliative care for
9 health care professionals;

10 (2) Delivery of palliative care in the home and in primary,
11 secondary, and tertiary environments;

12 (3) Best practices in palliative care delivery;

13 (4) Educational materials for consumers of palliative care; and

14 (5) Referral information for hospice and palliative care.

15 Sec. 2. (1) The Palliative Care and Quality of Life Advisory
16 Council is created. The council shall consult with and advise the
17 Department of Health and Human Services on matters relating to palliative
18 care initiatives.

19 (2) The council shall be composed of nine members appointed by the
20 Governor for three-year terms. At least two of the members shall be
21 physicians or nurses certified under the Hospice and Palliative Medicine
22 Certification Program administered by the American Board of Internal
23 Medicine. The remaining members shall (a) have palliative care work
24 experience, (b) have experience with palliative care delivery models in a
25 variety of settings, such as acute care, long-term care, and hospice
26 care, and with a variety of populations, including pediatric patients,
27 youth patients, and adult patients, (c) be representatives of palliative
28 care patients and their family caregivers, or (d) be department employees
29 familiar with hospice and palliative medicine. The members shall serve at
30 the pleasure of the Governor.

31 (3) The council shall meet at least twice each calendar year. The

1 members shall elect a chairperson and vice-chairperson. The members shall
2 be reimbursed for their actual and necessary expenses as provided in
3 sections 81-1174 to 81-1177 but shall not receive other compensation for
4 such services.

5 (4) The department shall provide a place and time for the council to
6 meet and provide staffing assistance as necessary for the meetings.

7 Sec. 3. Section 71-401, Revised Statutes Supplement, 2015, is
8 amended to read:

9 71-401 Sections 71-401 to 71-470 and sections 5 to 8 of this act
10 shall be known and may be cited as the Health Care Facility Licensure
11 Act.

12 Sec. 4. Section 71-403, Revised Statutes Supplement, 2015, is
13 amended to read:

14 71-403 For purposes of the Health Care Facility Licensure Act,
15 unless the context otherwise requires, the definitions found in sections
16 71-404 to 71-431 and sections 5 to 7 of this act shall apply.

17 Sec. 5. Medical care means services provided, requested, or
18 supervised by a physician or advanced practice registered nurse.

19 Sec. 6. (1) Palliative care means medical care that improves the
20 quality of life of a patient and his or her family as they face problems
21 associated with life-threatening illness, through the prevention and
22 relief of suffering by means of early identification and impeccable
23 assessment and treatment of pain and other physical, psychosocial and
24 spiritual problems.

25 (2) Palliative care includes care that provides relief from pain and
26 other distressing symptoms, affirms life and regards dying as a normal
27 process, is intended neither to hasten nor postpone death, integrates the
28 psychological and spiritual aspects of patient care, offers a support
29 system to help patients live as actively as possible until death, offers
30 a support system to help the family cope during the patient's illness and
31 in their own bereavement, uses a team approach to address the needs of

1 patients and their families including bereavement counseling if
2 indicated, enhances quality of life, and may also positively influence
3 the course of illness.

4 (3) Palliative care is applicable early in the course of illness, in
5 conjunction with other therapies that are intended to prolong life, such
6 as chemotherapy or radiation therapy, and includes those investigations
7 needed to better understand and manage distressing clinical
8 complications.

9 Sec. 7. Serious illness means any medical illness or physical
10 injury or condition that substantially impacts quality of life for more
11 than a short period of time. Serious illness includes, but is not limited
12 to, cancer, heart, renal, or liver failure, lung disease, or Alzheimer's
13 disease and related dementias.

14 Sec. 8. By January 1, 2017, the Palliative Care and Quality of Life
15 Advisory Council created in section 2 of this act shall assist each
16 health care facility and each health care service to establish a system
17 for identifying patients or residents who could benefit from hospice or
18 palliative care and provide information about and facilitate access to
19 appropriate hospice and palliative care services for patients or
20 residents with serious illness.

21 Sec. 9. Original sections 71-401 and 71-403, Revised Statutes
22 Supplement, 2015, are repealed.