

By: Johnson

S.B. No. 916

A BILL TO BE ENTITLED

AN ACT

relating to supportive palliative care.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Subtitle G, Title 2, Health and Safety Code, is amended by adding Chapter 142A to read as follows:

CHAPTER 142A. SUPPORTIVE PALLIATIVE CARE SERVICES

Sec. 142A.0001. DEFINITION. In this chapter, "supportive palliative care" means patient- and family-centered care provided without regard to a patient's age or terminal prognosis that:

(1) does not require the patient to decline methods of treatment or therapies that cure or minimize the effects of the patient's illness; and

(2) optimizes the quality of life for a patient with a life-threatening or limiting illness and the patient's family by:

(A) anticipating, preventing, and treating the patient's pain related to the patient's physical, psychosocial, social, and spiritual condition;

(B) addressing the physical, intellectual, emotional, cultural, social, and spiritual needs of the patient;

(C) facilitating patient autonomy; and

(D) ensuring the patient receives relevant information regarding treatment to enable the patient to provide informed consent.

Sec. 142A.0002. RULES AND MINIMUM STANDARDS. The executive

1 commissioner, in collaboration with health care providers
2 providing supportive palliative care services and other interested
3 persons, shall adopt rules establishing minimum standards for the
4 scope and delivery of supportive palliative care services,
5 including rules that:

6 (1) distinguish supportive palliative care services
7 from hospice services provided under Chapter 142; and

8 (2) coordinate and align the delivery of supportive
9 palliative care services in various health care settings.

10 Sec. 142A.0003. PILOT PROGRAM. (a) The executive
11 commissioner by rule may develop and implement a limited pilot
12 program in one or more geographic areas of this state to coordinate
13 the delivery of supportive palliative care services to vulnerable
14 individuals with serious illnesses, as defined by rule by the
15 executive commissioner.

16 (b) If the executive commissioner develops and implements a
17 pilot program under this section, the executive commissioner shall,
18 not later than the first anniversary of the date the pilot program
19 expires, prepare and submit to the governor, lieutenant governor,
20 and legislature a written report that summarizes the outcomes of
21 the pilot program.

22 (c) This section expires September 1, 2025.

23 SECTION 2. Section 142.001(15), Health and Safety Code, is
24 amended to read as follows:

25 (15) "Hospice services" means services, including
26 services provided by unlicensed personnel under the delegation of a
27 registered nurse or physical therapist, provided to a client or a

1 client's family as part of a coordinated program consistent with
2 the standards and rules adopted under this chapter. These services
3 include palliative care other than supportive palliative care, as
4 defined by Section 142A.0001, for terminally ill clients and
5 support services for clients and their families that:

6 (A) are available 24 hours a day, seven days a
7 week, during the last stages of illness, during death, and during
8 bereavement;

9 (B) are provided by a medically directed
10 interdisciplinary team; and

11 (C) may be provided in a home, nursing home,
12 residential unit, or inpatient unit according to need. These
13 services do not include inpatient care normally provided in a
14 licensed hospital to a terminally ill person who has not elected to
15 be a hospice client.

16 SECTION 3. As soon as practicable after the effective date
17 of this Act, the executive commissioner of the Health and Human
18 Services Commission shall adopt the rules and minimum standards
19 required by Chapter 142A, Health and Safety Code, as added by this
20 Act.

21 SECTION 4. This Act takes effect September 1, 2019.