House Study Bill 511 - Introduced

HOUSE FILE

BY (PROPOSED COMMITTEE ON HUMAN RESOURCES BILL BY CHAIRPERSON MILLER)

A BILL FOR

- 1 An Act relating to the use of physician orders for scope of
- 2 treatment including provisions relative to existing advance
- 3 directives.
- 4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. LEGISLATIVE FINDINGS. The general assembly 2 recognizes the importance of encouraging individuals to discuss 3 and make health care decisions before a situation necessitates 4 an actual decision. The general assembly also recognizes 5 that health care planning is a process, rather than a single 6 decision, based upon the individual's values and personal 7 health status. Advance directives provide the opportunity for 8 an individual to enunciate and document the individual's wishes 9 and to identify the person authorized to make decisions for 10 the individual if the individual is unable to make decisions. 11 The general assembly recognizes that the physician order for 12 scope of treatment form, modeled after the national physician 13 orders for life-sustaining treatment paradigm initiative, 14 complements advance directives by converting individual wishes 15 contained in advance directives into medical orders that are 16 actionable across medical settings, thereby enhancing the 17 ability of medical providers to understand and honor patients' 18 wishes. An Iowa physician order for scope of treatment form is 19 intended for individuals who are frail and elderly or who have 20 a chronic, critical medical condition or a terminal illness. NEW SECTION. 144D.1 Physician orders for scope of 21 Sec. 2. 22 treatment.

23 As used in this chapter, unless the context otherwise 24 requires:

25 1. "Advanced registered nurse practitioner" means an advanced
 26 registered nurse practitioner licensed pursuant to chapter 152
 27 or 152E.

28 2. "Department" means the department of public health.
29 3. "Emergency medical care provider" means emergency medical
30 care provider as defined in section 147A.1.

31 4. "Health care facility" means health care facility as 32 defined in section 135C.1, an elder group home as defined in 33 section 231B.1, and an assisted living program as defined in 34 section 231C.2.

35 5. "Health care provider" means an individual, including

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1 an emergency medical care provider and an individual providing 2 home and community-based services, who is licensed, certified, 3 or otherwise authorized or permitted by the law of this state 4 to administer health care in the ordinary course of business or 5 in the practice of a profession.

6 6. "Hospital" means hospital as defined in section 135B.1.
7 7. "Physician" means a person licensed to practice medicine
8 and surgery or osteopathic medicine and surgery in this state.

9 8. "*Physician assistant"* means a person licensed as a 10 physician assistant under chapter 148C.

9. "Physician orders for scope of treatment form" or "POST form" means a document containing medical orders actionable across medical settings that consolidates and summarizes an individual's preferences for life-sustaining treatments and interventions and acts as a complement to and does not supersede any valid advance directive.

17 Sec. 3. <u>NEW SECTION</u>. 144D.2 Physician orders for scope of 18 treatment (POST) form.

19 1. The POST form shall be a uniform form based upon the 20 national physician orders for life-sustaining treatment 21 paradigm form. The form shall have all of the following 22 characteristics:

23 *a.* The form shall include the patient's name and date of 24 birth.

25 b. The form shall be signed by the patient or the patient's26 legal representative.

c. The form shall be signed by the patient's physician,
advanced registered nurse practitioner, or physician assistant. *d.* If preparation of the form was facilitated by another
individual, the facilitator shall also sign the form.

31 *e.* The form shall include the patient's wishes regarding the 32 care of the patient, including but not limited to all of the 33 following:

34 (1) The administration of cardiopulmonary resuscitation.35 (2) The level of medical interventions in the event of a

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1 medical emergency.

2 (3) The use of medically administered nutrition by tube.

3 (4) The rationale for the orders.

4 f. The form shall be easily distinguishable to facilitate 5 recognition by health care providers, hospitals, and health 6 care facilities.

7 g. An incomplete section on the form shall imply the 8 patient's wishes for full treatment for the type of treatment 9 addressed in that section.

10 2. The department shall post the form on the department's 11 website for public availability.

12 Sec. 4. <u>NEW SECTION</u>. 144D.3 Compliance with POST form. 13 1. A POST form executed in this state or another state 14 or jurisdiction in compliance with the law of that state or 15 jurisdiction shall be deemed valid and enforceable in this 16 state to the extent the form is consistent with the laws of 17 this state, and may be accepted by a health care provider, 18 hospital, or health care facility.

19 2. A health care provider, hospital, or health care facility 20 may accept and shall comply with an accepted POST form, 21 notwithstanding that the physician, advanced registered nurse 22 practitioner, or physician assistant who signed the POST form 23 does not have admitting privileges at the hospital or health 24 care facility providing health care or treatment.

3. In the absence of actual notice of the revocation of a POST form, a health care provider, hospital, health care facility, or any other person who complies with a POST form shall not be subject to civil or criminal liability for actions taken under this chapter which are in accordance with reasonable medical standards. A health care provider, hospital, health care facility, or other person against whom criminal or civil liability is asserted because of conduct in compliance with this chapter may interpose the restriction on liability in this paragraph as an absolute defense.

35 4. A health care provider, hospital, or health care facility

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that is unwilling to comply with an executed POST form shall
 take all reasonable steps to transfer the patient to another
 health care provider, hospital, or health care facility.

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Sec. 5. NEW SECTION. 144D.4 General provisions.

5 1. If an individual is a qualified patient as defined in 6 section 144A.2, the individual's declaration executed under 7 chapter 144A shall control health care decision making for the 8 individual in accordance with chapter 144A. If an individual 9 has not executed a declaration pursuant to chapter 144A, health 10 care decision making relating to life-sustaining procedures for 11 the individual shall be governed by section 144A.7. A POST 12 form shall not supersede a declaration executed pursuant to 13 chapter 144A.

14 If an individual has executed a durable power of attorney 2. 15 for health care pursuant to chapter 144B, the individual's 16 durable power of attorney for health care shall control health 17 care decision making for the individual in accordance with 18 chapter 144B. A POST form shall not supersede a durable power 19 of attorney for health care executed pursuant to chapter 144B. 20 Death resulting from the withholding or withdrawal of 3. 21 life-sustaining procedures pursuant to an executed POST form 22 and in accordance with this chapter does not, for any purpose, 23 constitute a suicide, homicide, or dependent adult abuse. 24 The executing of a POST form does not affect in any 4. 25 manner the sale, procurement, or issuance of any policy of 26 life insurance, nor shall it be deemed to modify the terms 27 of an existing policy of life insurance. A policy of life 28 insurance is not legally impaired or invalidated in any manner 29 by the withholding or withdrawal of life-sustaining procedures 30 pursuant to this chapter notwithstanding any term of the policy 31 to the contrary.

32 5. A health care provider, hospital, health care facility, 33 health care service plan, insurer issuing disability insurance, 34 self-insured employee welfare benefit plan, or nonprofit 35 hospital plan shall not require any person to execute a POST

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1 form as a condition of being insured for, or receiving, health
2 care services.

6. This chapter does not create a presumption concerning the intention of an individual who has not executed a POST form with respect to the use, withholding, or withdrawal of life-sustaining procedures in the event of a terminal condition.

8 7. This chapter shall not be interpreted to affect the right 9 of a patient to make decisions regarding use of life-sustaining 10 procedures as long as the patient is able to do so, nor to 11 impair or supersede any right or responsibility that any person 12 has to effect the withholding or withdrawal of medical care in 13 any lawful manner. In that respect, the provisions of this 14 chapter are cumulative.

15 8. This chapter shall not be construed to condone, 16 authorize, or approve mercy killing or euthanasia, or to permit 17 any affirmative or deliberate act or omission to end life other 18 than to permit the natural process of dying.

19

EXPLANATION

20 This bill provides for the use of physician orders for scope 21 of treatment (POST).

The bill provides legislative findings that provide that the general assembly recognizes the importance of encouraging individuals to discuss and make health care decisions before an actual decision is necessary; that health care planning is a process based upon the individual's values and personal health status; and that advance directives provide the opportunity for an individual to enunciate and document their wishes and o identify the person authorized to make decisions for the individual. The general assembly also recognizes that the POST form, modeled after the national physician orders for life-sustaining treatment paradigm initiative, complements advance directives by converting individual wishes contained in advance directives into medical orders that are actionable across medical settings, thereby enhancing the ability of

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1 medical providers to understand and honor patients' wishes.
2 The POST form is intended for individuals who are frail and
3 elderly or who have a chronic, critical medical condition or a
4 terminal illness.

5 The bill provides definitions used in the chapter, including 6 the physician order for scope of treatment POST form, which 7 means a document containing medical orders actionable 8 across medical settings that consolidates and summarizes 9 an individual's preferences for life-sustaining treatments 10 and interventions and acts as a complement to but does not 11 supersede any valid advance directive.

12 The bill specifies the content of the POST form and that 13 the department of public health is to post the form on the 14 department's website for public availability.

The bill specifies compliance requirements for the POST 15 16 form. A POST form executed in this state or another state 17 or jurisdiction in compliance with the law of the applicable 18 state or jurisdiction shall be deemed valid and enforceable in 19 this state to the extent the form is consistent with the laws 20 of this state, and may be accepted by a health care provider, 21 hospital, or health care facility. A health care provider, 22 hospital, or health care facility may accept and shall comply 23 with an accepted POST form, even if the physician, advanced 24 registered nurse practitioner, or physician assistant who 25 signed the POST form does not have admitting privileges at 26 the hospital or health care facility providing health care or 27 treatment. The bill provides an absolute defense to civil or 28 criminal liability for a health care provider, hospital, health 29 care facility, or any other person who complies with a POST 30 form if the actions are in accordance with reasonable medical 31 standards. The bill requires a health care provider, hospital, 32 or health care facility that is unwilling to comply with an 33 executed POST form to take all reasonable steps to transfer the 34 patient to another health care provider, hospital, or health 35 care facility.

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1 The bill provides for the relation of an executed POST form 2 to a declaration under the life-sustaining procedures Act and a 3 durable power of attorney for health care. In both cases, the 4 declaration and the durable power of attorney control health 5 care decision making and the POST form does not supersede them. The bill provides that death resulting from the withholding 6 7 or withdrawal of life-sustaining procedures pursuant to an 8 executed POST form and in accordance with the bill does not 9 constitute a suicide, homicide, or dependent adult abuse and 10 that executing a POST form does not affect in any manner 11 the sale, procurement, or issuance of any policy of life 12 insurance; modify the terms of an existing policy of life 13 insurance; or legally impair or invalidate the policy. The 14 bill prohibits the execution of a POST form as a condition for 15 being insured or receiving health care services and provides 16 that not executing a POST form does not create a presumption 17 concerning the intention of an individual with respect to the 18 use, withholding, or withdrawal of life-sustaining procedures 19 in the event of a terminal condition.

The bill is not to be interpreted to affect the right of a patient to make decisions regarding use of life-sustaining procedures as long as the patient is able to do so, nor to impair or supersede any right or responsibility that any person has to effect the withholding or withdrawal of medical care in any lawful manner. The bill is not to be construed to condone, authorize, or approve mercy killing or euthanasia, or to permit any affirmative or deliberate act or omission to end life other than to permit the natural process of dying.

The general assembly in 2008 Iowa Acts, chapter 1188, section 36, established a two-year pilot project in Linn county and in 2010 Iowa Acts, chapter 1192, section 58, expanded the pilot project to Jones county and extended the duration until June 30, 2012, to pilot the use of the POST form. The legislation also directed the department to convene an advisory council for the pilot project and directed the advisory council

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to report its findings and recommendations to the general
 assembly by January 1, 2012. The advisory council recommended
 expanding the adoption of the POST form statewide.

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