



**Informational Briefing on Proposed Amendments to 105 CMR 130.000,  
105 CMR 140.000 and 105 CMR 150.000:  
Provision of Information on Palliative Care and End-of-Life Options**

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Commonwealth of Massachusetts  
Department of Public Health

Helping People Lead Healthy Lives In Healthy Communities

# *Background*



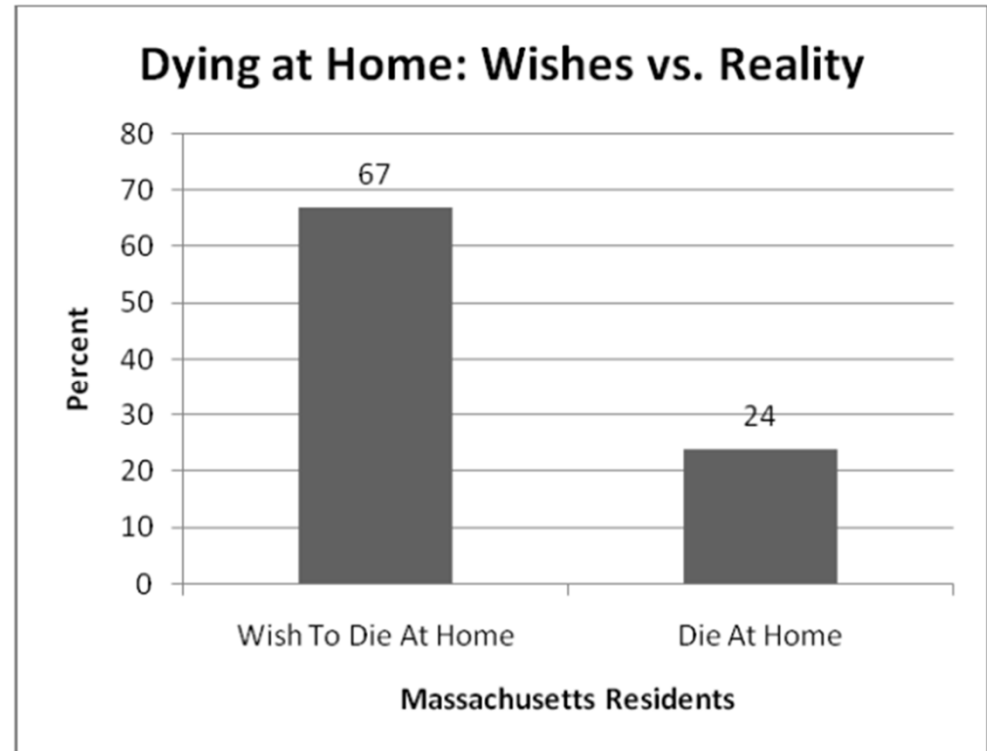
## Background

- 2009: Massachusetts Expert Panel on End of Life Care was established by EOHHS
- 2010: Expert Panel releases report and recommendations
- 2012: Chapter 224 of the Acts of 2012 requires provision of information on palliative care and end-of-life options



## Key Findings from the Expert Panel Report:

- Massachusetts residents nearing end of life often do not receive the care they want or need
- Lack of awareness of the full range of care options including hospice and palliative care
- An individual's choices may not be clearly communicated with family members and health care providers.
- Choices may not be honored across health care settings





## Key Recommendations From the Expert Panel Report

- Educate the public about the importance of advanced care planning
- Discussion of end of life care options
- Encourage individuals to engage in critical conversations with family and providers about end-of-life wishes
- Statewide implementation of Medical Orders for Life Sustaining Treatment (MOLST)



- **Chapter 224 of the Acts of 2012:**
  - Section 227 requires the Department to promulgate regulations regarding end-of-life options
  - Hospitals, skilled nursing facilities and health centers must provide information regarding the availability of palliative care and end of life care options to appropriate patients.
  - DPH to consult with the Hospice and Palliative Care Federation of Massachusetts (HPCFM) in developing educational materials and regulations.



# *Proposed Amendments*





- **Department is proposing identical amendments to:**
  - 105 CMR 130.000: *Hospital Licensure*
  - 105 CMR 140.000: *Licensure of Clinics*
  - 105 CMR 150.000: *Licensing of Long-Term Care Facilities*



## **Appropriate Patient:**

A patient who has been diagnosed with a terminal illness or condition which can reasonably be expected to cause death within 6 months, whether or not treatment is provided, and any other patient who may benefit from hospice and palliative care services, as determined by the facility.

- Encourages facilities to provide this information to a wide range of patients, not just those with a terminal illness
- Consistent with Expert Panel's recommendation that all patients with a disease that could be fatal have conversations early



### **Attending health care practitioner:**

A physician or nurse practitioner who has primary responsibility for the care and treatment of the patient within or on behalf of the hospital; provided that if more than one physician or nurse practitioner share that responsibility, each of them shall have a responsibility under this section, unless there is an agreement to assign that responsibility to one such person



## **Palliative Care:**

Health care treatment, including interdisciplinary end-of-life care and consultation with patients and family members, to prevent or relieve pain and suffering and to enhance the patient's quality of life, including hospice care



Hospitals, Long-Term Care Facilities and Clinics will be required to:

1. Have a process to identify appropriate patients;
2. Ensure that appropriate patients receive information;
3. Distribute information about hospice and palliative care in a timely manner; and
4. Inform all physicians and nurse practitioners of the requirements of M.G.L. c. 111, §227(c) to provide end-of-life counseling to patients with a terminal illness or condition.



## Information for Patients

- Facilities shall distribute to appropriate patients in its care, culturally and linguistically suitable information regarding the availability of hospice and palliative care.
- This obligation shall be fulfilled by providing the patient with:

Option 1	Option 2
A DPH-issued informational pamphlet	A facility created informational pamphlet
<b><u>Pamphlet must include:</u></b>	
<ul style="list-style-type: none"><li>• Definition and explanation of advanced care planning, hospice care and palliative care</li><li>• Other requirements defined in the guidance of the Department</li></ul>	



DPH anticipates requiring the following additional components in an informational pamphlet:

**FAQs about hospice, palliative care, and patient rights under the law**

**A MOLST form and explanation**

**Conversation tools to encourage discussions with the patient's family and providers**

**List of licensed hospice providers near the facility**



# *Next Steps*





## Next Steps

- DPH will hold a Public Hearing in November
- DPH will return to the PHC for final promulgation