

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21

H.255

SHORT FORM

Introduced by Representatives Haas of Rochester, Frank of Underhill, and
French of Randolph

Referred to Committee on

Date:

Subject: Health; end-of-life care; hospice care

Statement of purpose of bill as introduced: This bill proposes to remove
obstacles to increasing hospice enrollment and length of care by:

1. requiring that continuing medical education in hospice and palliative
care addresses shared decision making that includes values assessments
for patients with life-limiting conditions;
2. increasing patients' access to treatments that allow them to stay in the
settings they prefer;
3. increasing the number of Vermont residents with advance directives;
4. adopting protocols to ensure that patients' treatment preferences follow
them from one care or treatment setting to another, as currently applies
to DNR/COLST;
5. directing the Agency of Human Services to allow individuals who are
eligible for both Medicaid and Medicare to access hospice services
without being required to discontinue curative treatment;

- 1 6. requiring Medicaid and health insurance plans to reimburse health care
2 professionals for engaging in advance care planning with their
3 patients; and
- 4 7. directing the Commissioner of Health to provide guidance to health care
5 professionals regarding best practices with respect to end-of-life care,
6 including advance care planning and appropriate use of hospice and
7 palliative care services.

8 An act relating to increasing hospice enrollment and length of care

9 It is hereby enacted by the General Assembly of the State of Vermont:

10 (TEXT OMITTED IN SHORT-FORM BILLS)