RÉSUMÉ DIGEST

ACT 351 (SB 119)

2019 Regular Session

Colomb

<u>New law</u> defines palliative care as person-centered, family-focused care that provides a patient with relief from the symptoms, pain, and stress of a serious illness. Provides that palliative care is appropriate for a patient of any age and at any stage of a serious illness and can reduce medical costs and patient recovery time when provided by an interdisciplinary team of physicians, nurses, social workers, and other healthcare specialists in order to provide an additional source of support to a patient with a serious illness.

Defines "palliative care for children" as the care appropriate for children and their families that begins at diagnosis and continues regardless of whether or not the treatment is directed at the disease. This requires health providers to evaluate and alleviate a child's physical, psychological, and social distress through a multi-disciplinary approach that includes the family and makes use of available community resources which can be successfully implemented even if resources are limited. This includes active total care of the child's body, mind, and spirit and the support given to the family. Palliative care for children can be provided in tertiary care facilities, in community health centers, and in children's homes.

Establishes the Palliative Care Interdisciplinary Advisory Council to study and make recommendations to the secretary and the legislature regarding the availability of patient-centered and family-focused palliative care in this state. Provides that the secretary shall call the first meeting and that the council shall meet at least twice a year.

Provides that the department shall provide staff support for the council and shall post notices and materials regarding the council on its website.

Provides that council members shall have at least two years of experience providing individual or interdisciplinary palliative care to pediatric, youth, or adult populations in inpatient, outpatient, or community settings and shall include seventeen members: four physicians, three nurses, one palliative care program administrator, one social worker, one pharmacist, one spiritual care advisor, one insurance administrator, three patient and family advocates, the secretary of the La. Department of Health or his designee who shall be a nonvoting member, and the Medicaid director or his designee.

Provides for analysis of information regarding palliative care to be included in recommendations to the secretary and the legislature and for the creation of an educational initiative, including the addition of such information on the department's website. Provides for a report to the legislature on February 1st of each year.

Terminates on March 31, 2022, unless reauthorized by the legislature.

Effective August 1, 2019.

(Adds R.S. 36:259(B)(36) and R.S. 40:2018.6)