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State of Minnesota

H0345-1

HOUSE OF REPRESENTATIVES NINETIETH SESSION H. F. No. 345

 01/19/2017 Authored by Zerwas, Theis, McDonald, Fenton, Youakim and others The bill was read for the first time and referred to the Committee on Health and Human Services Reform
02/23/2017 Adoption of Report: Re-referred to the Committee on Government Operations and Elections Policy
03/01/2017 Adoption of Report: Amended and re-referred to the Committee on Health and Human Services Finance

1.1	A bill for an act
1.2 1.3	relating to health; creating the Palliative Care Advisory Committee; proposing coding for new law in Minnesota Statutes, chapter 144.
1.4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.5	Section 1. [144.059] PALLIATIVE CARE ADVISORY COUNCIL.
1.6	Subdivision 1. Establishment. The Palliative Care Advisory Council is established to
1.7	advise and assist the commissioner of health regarding improving the quality and delivery
1.8	of patient-centered and family-focused palliative care.
1.9	Subd. 2. Membership. (a) The council shall consist of 18 public members and four
1.10	members of the legislature.
1.11	(b) The commissioner shall appoint 18 public members, including at least the following:
1.12	(1) two physicians, of which one is certified by the American Board of Hospice and
1.13	Palliative Medicine;
1.14	(2) two registered nurses or advanced practice registered nurses, of which one is certified by the National Board for Certification of Hospice and Palliative Nurses;
1.15	by the National Board for Certification of Hospice and Famative Nuises,
1.16	(3) one care coordinator experienced in working with people with serious or chronic
1.17	illness and their families;
1.18	(4) one spiritual counselor experienced in working with people with serious or chronic
1.19	illness and their families;
1.20	(5) three licensed health professionals, such as complementary and alternative health
1.21	care practitioners, dietitians or nutritionists, pharmacists, or physical therapists, who are

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2.1	neither physicians nor nurses, but who have experience as members of a palliative care
2.2	interdisciplinary team working with people with serious or chronic illness and their families;
2.3	(6) one licensed social worker experienced in working with people with serious or chronic
2.4	illness and their families;
2.5	(7) four patients or personal caregivers experienced with serious or chronic illness;
2.6	(8) one representative of a health plan company; and
2.7	(9) one physician assistant that is a member of the American Academy of Hospice and
2.8	Palliative Medicine.
2.9	(c) The Subcommittee on Committees of the Committee on Rules and Administration
2.10	shall appoint one member of the senate, the minority leader in the senate shall appoint one
2.11	member of the senate, the speaker of the house shall appoint one member of the house of
2.12	representatives, and the minority leader in the house of representatives shall appoint one
2.13	member of the house of representatives.
2.14	(d) Council membership must include, where possible, representation that is racially,
2.15	culturally, linguistically, geographically, and economically diverse.
2.16	(e) The council must include at least six members who reside outside Anoka, Carver,
2.17	Chisago, Dakota, Hennepin, Isanti, Mille Lacs, Ramsey, Scott, Sherburne, Sibley, Stearns,
2.18	Washington, or Wright Counties.
2.19	(f) Council membership must include health professionals who have palliative care work
2.20	experience or expertise in palliative care delivery models in a variety of inpatient, outpatient,
2.21	and community settings, including acute care, long-term care, or hospice, with a variety of
2.22	populations, including pediatric, youth, and adult patients.
2.23	(g) To the extent possible, council membership must include persons who have experience
2.24	in palliative care research, palliative care instruction in a medical or nursing school setting,
2.25	palliative care services for veterans as a provider or recipient, or pediatric care.
2.26	Subd. 3. Term. Members of the council shall serve for a term of three years and may
2.27	be reappointed. Members shall serve until their successors have been appointed.
2.28	Subd. 4. Administration. The commissioner or the commissioner's designee shall
2.29	provide meeting space and administrative services for the council.
2.30	Subd. 5. Initial appointments and first meeting. The appointing authorities shall
2.31	appoint the first members of the council by July 1, 2017. The commissioner shall convene

3.1	the first meeting by September 15, 2017, and the commissioner or the commissioner's
3.2	designee shall act as chair until the council elects a chair at its first meeting.
3.3	Subd. 6. Chairs. At the council's first meeting, and biannually thereafter, the members
3.4	shall elect a chair and a vice-chair whose duties shall be established by the council.
3.5	Subd. 7. Meeting. The council chair shall fix a time and place for regular meetings of
3.6	the council, which shall meet at least twice yearly.
3.7	Subd. 8. No compensation. Public members of the council serve without compensation,
3.8	except for reimbursement from the commissioner for allowed actual and necessary expenses
3.9	incurred in the performance of the public member's council duties.
3.10	Subd. 9. Duties. (a) The council shall consult with and advise the commissioner on
3.11	matters related to the establishment, maintenance, operation, and outcomes evaluation of
3.12	palliative care initiatives in the state.
3.13	(b) By February 15 of each year, the council shall prepare and submit to the chairs and
3.14	ranking minority members of the committees of the senate and the house of representatives
3.15	with primary jurisdiction over health care a report containing a description of:
3.16	(1) the advisory committee's assessment of the availability of palliative care in the state;
3.17	(2) the advisory committee's analysis of barriers to greater access to palliative care; and
3.18	(3) recommendations for legislative action.
3.19	(c) The Department of Health shall publish the report each year on the department's Web
3.20	site.
3.21	EFFECTIVE DATE. This section is effective the day following final enactment.