

**Department of Legislative Services**  
Maryland General Assembly  
2008 Session

**FISCAL AND POLICY NOTE**

House Bill 251 (Delegate Morhaim, *et al.*)  
Health and Government Operations

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**Health Care Decisions Act - Disclosure by Health Care Facilities - Practices  
Related to Use of Life-Sustaining Procedures**

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This bill requires each health care facility to disclose to the public certain practices established in the facility regarding patient preferences and the provision, withholding, or withdrawal of life-sustaining procedures.

The bill takes effect January 1, 2009, while uncodified language in the bill takes effect June 1, 2008.

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**Fiscal Summary**

**State Effect:** The bill's disclosure requirements would have no impact on the Department of Health and Mental Hygiene. According to Office of the Attorney General, the bill's uncodified requirements could be handled with existing budgeted resources.

**Local Effect:** None.

**Small Business Effect:** None.

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**Analysis**

**Bill Summary:** Each facility must disclose, on request and on any facility web site, the facility's practices to • elicit and document patient values, goals, and preferences that may affect the provision, withholding, or withdrawal of life-sustaining procedures during the patient's current admission; • cause medical orders to be consistent with the known

values, goals, and preferences of the patient; and • assess periodically outcomes to evaluate whether the actions taken were consistent with patient preferences.

The bill may not be deemed to impair the authority of a health care facility to determine practices within the facility or require adoption of a particular policy or procedure.

Uncodified language in the bill requires the State Advisory Council on Quality Care at the End of Life, after consulting with appropriate stakeholders, to develop public resources to facilitate patient-centered decision making about life-sustaining procedures. To the extent feasible, the council must develop resources that take account of relevant differences among types of health care facilities or time constraints on decision making.

**Current Law:** Upon admission to a health care facility, a facility must provide each individual with information concerning the rights of the individual to make decisions concerning health care, including the right to accept or refuse treatment, and the right to make an advance directive, including a living will.

Each nursing facility must also provide an individual with an opportunity to prepare an “Instructions on Current Life-Sustaining Treatment Options” form to reflect the individual’s preferences for treatment and care, including the use of life-sustaining procedures and the transfer to a hospital from a nonhospital setting. The voluntary form must be consistent with the decisions of • the patient, if competent, or a patient’s health care agent or surrogate decision maker, if the patient cannot make an informed decision; and • any advance directive of the patient if the patient is incapable of making an informed decision.

**Background:** Chapter 265 of 2002 established the State Advisory Council on Quality Care at the End of Life. The council, staffed by the Office of the Attorney General, studies the impact of State statutes, regulations, and public policies on provision of care to the dying. The council also advises on matters related to the provision of care at the end of life. The council has published an “ethical framework” for facility policies.

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### **Additional Information**

**Prior Introductions:** None.

**Cross File:** None.

**Information Source(s):** Department of Health and Mental Hygiene, Department of Legislative Services

**Fiscal Note History:** First Reader - January 25, 2008  
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