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HOSPITALS:

130.1900: Definitions

The following definitions apply to 105 CMR 130.1901:

Appropriate patient means a patient whose attending health care practitioner has:

- 1) diagnosed a terminal illness or condition which can reasonably be expected to cause the patient's death within six (6) months, whether or not treatment is provided, provided that the attending health care practitioner determines that discussion of palliative care services is not contraindicated; or
- 2) determined that discussion of palliative care services is consistent with the patient's clinical and other circumstances and the patient's reasonably known wishes and beliefs.

Attending Health Care Practitioner means 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 105 CMR 130.1900, unless there is an agreement to assign that responsibility to one such person.

Hospice Care Services means care, including palliative care, provided to terminally ill patients and their family members when the patient is no longer seeking curative or life-prolonging treatments. Hospice care services are delivered in the patient's home, long-term care facilities, hospitals or licensed hospice facilities.

Palliative care means the attempt to prevent or relieve pain and suffering and to enhance the patient's quality of life, and may include, but is not limited to, interdisciplinary end-of-life care and consultation with patients and family members.

130.1901: Provision of Information on Palliative Care and End-of Life Options.

(A) Each hospital shall distribute to appropriate patients in its care, directly or through professionally qualified individuals, culturally and linguistically suitable information regarding the availability of palliative care and end-of-life options. This obligation shall be fulfilled by providing the patient with:

- (1) A Department-issued informational pamphlet; or
- (2) A similar informational pamphlet that meets the specifications in 105 CMR 130.1901(B).

(B) At a minimum, the informational pamphlet shall include:

- (1) A definition and explanation of advanced care planning, palliative care services, and hospice care services; and
- (2) All other requirements as defined in guidelines of the Department.

(C) Each hospital shall provide its attending health care practitioners the information in 105 CMR 130.1901(A) for distribution to appropriate patients in a timely manner.

(D) Each hospital shall have a policy to guide its attending health care practitioners for identifying appropriate patients and ensuring that they receive an informational pamphlet. Such policies shall be made available to the Department upon request.

(E) Each hospital shall inform all physicians and nurse practitioners providing care within or on behalf of the facility of the requirements of M.G.L. c. 111, §227(c) to offer to provide end-of-life counseling to patients with a terminal illness or condition.

(F) Where the patient lacks capacity to reasonably understand and make informed decisions, the information in 105 CMR 130.1901(A) shall be provided to the person with legal authority to make health care decisions for that patient.

(G) The hospital shall make available to the Department proof that it is in compliance with 105 CMR 130.1901(A) and (C) through (E) upon request or at the time of inspection.

CLINICS:

140.1200: Definitions

The following definitions apply to 105 CMR 140.1201:

Appropriate patient means a patient whose attending health care practitioner has

- 1) diagnosed a terminal illness or condition which can reasonably be expected to cause the patient's death within six (6) months, whether or not treatment is provided, provided that the attending health care practitioner determines that discussion of palliative care services is not contraindicated; or
- 2) determined that discussion of palliative care services is consistent with the patient's clinical and other circumstances and the patient's reasonably known wishes and beliefs.

Attending health care practitioner means a physician or nurse practitioner who has primary responsibility for the care and treatment of the patient within or on behalf of the clinic; provided that if more than one physician or nurse practitioner share that responsibility, each of them shall have a responsibility under 105 CMR 140.1200, unless there is an agreement to assign that responsibility to one such person.

Hospice care services means care, including palliative care, provided to terminally ill patients and their family members when the patient is no longer seeking curative or life-prolonging treatments. Hospice care services are delivered in the patient's home, long-term care facilities, hospitals or licensed hospice facilities.

Palliative care means the attempt to prevent or relieve pain and suffering and to enhance the patient's quality of life, and may include, but is not limited to, interdisciplinary end-of-life care and consultation with patients and family members.

140.1201: Provision of Information on Palliative Care and End-of Life Options.

(A) Each clinic shall distribute to appropriate patients in its care, directly or through professionally qualified individuals, culturally and linguistically suitable information regarding the availability of palliative care and end-of-life options. This obligation shall be fulfilled by providing the patient with:

- (1) A Department-issued informational pamphlet; or
- (2) A similar informational pamphlet that meets the specifications in 105 CMR 140.1201(B).

(B) At a minimum, the informational pamphlet shall include:

- (1) A definition and explanation of advanced care planning, palliative care services, and hospice care services; and
- (2) All other requirements as defined in guidelines of the Department.

(C) Each clinic shall provide its attending health care practitioners the information in 105 CMR 140.1201(A) for distribution to appropriate patients in a timely manner.

(D) Each clinic shall have a policy to guide its attending health care practitioners for identifying appropriate patients and ensuring that they receive an informational pamphlet. Such policies shall be made available to the Department upon request.

(E) Each clinic shall inform all physicians and nurse practitioners providing care within or on behalf of the facility of the requirements of M.G.L. c. 111, §227(c) to offer to provide end-of-life counseling to patients with a terminal illness or condition.

(F) Where the patient lacks capacity to reasonably understand and make informed decisions, the information in 105 CMR 140.1201(A) shall be provided to the person with legal authority to make health care decisions for that patient.

(G) The clinic shall make available to the Department proof that it is in compliance with 105 CMR 140.1201(A) and (C) through (E) upon request or at the time of inspection.

LONG-TERM CARE FACILITIES:

150.030: Definitions

The following definitions apply to 105 CMR 150.031:

Appropriate patient means a resident whose attending health care practitioner has

- 1) diagnosed a terminal illness or condition which can reasonably be expected to cause the patient's death within six (6) months, whether or not treatment is provided, provided that the attending health care practitioner determines that discussion of palliative care services is not contraindicated; or
- 2) determined that discussion of palliative care services is consistent with the patient's clinical and other circumstances and the patient's reasonably known wishes and beliefs.

Attending health care practitioner means a physician or nurse practitioner who has primary responsibility for the care and treatment of the resident within or on behalf of the long-term care facility (levels I through IV); provided that if more than one physician or nurse practitioner share that responsibility, each of them shall have a responsibility under 105 CMR 150.030, unless there is an agreement to assign that responsibility to one such person.

Hospice care services means care, including palliative care, provided to terminally ill residents and their family members when the resident is no longer seeking curative or life-prolonging treatments. Hospice care services are delivered in the resident's home, long-term care facilities, hospitals or licensed hospice facilities.

Palliative care means the attempt to prevent or relieve pain and suffering and to enhance the patient's quality of life, and may include, but is not limited to, interdisciplinary end-of-life care and consultation with patients and family members.

150.031: Provision of Information on Palliative Care and End-of Life Options.

(A) Each long-term care facility (levels I through IV) shall distribute to appropriate patients in its care, directly or through professionally qualified individuals, culturally and linguistically suitable information regarding the availability of palliative care and end-of-life options. This obligation shall be fulfilled by providing the patient with:

- (1) A Department-issued informational pamphlet; or
- (2) A similar informational pamphlet that meets the specifications in 105 CMR 150.031(B).

(B) At a minimum, the informational pamphlet shall include:

- (1) A definition and explanation of advanced care planning, palliative care services, and hospice care services; and
- (2) All other requirements as defined in guidelines of the Department.

(C) Each long-term care facility (levels I through IV) shall provide the information in 105 CMR 150.031(A) to appropriate patients in a timely manner.

(D) Each long-term care facility (levels I through IV) shall have a policy for identifying appropriate patients and ensuring that they receive an informational pamphlet. Such policies shall be made available to the Department upon request.

(E) Each long-term care facility (levels I through IV) shall inform all physicians and nurse practitioners providing care within or on behalf of the facility of the requirements of M.G.L. c. 111, §227(c) to offer to provide end-of-life counseling to patients with a terminal illness or condition.

(F) Where the patient lacks capacity to reasonably understand and make informed decisions, the information in 105 CMR 150.031(A) shall be provided to the person with legal authority to make health care decisions for that patient.

(G) The long-term care facility (levels I through IV) shall make available to the Department proof that it is in compliance with 105 CMR 150.031 (A) and (C) through (E) upon request or at the time of inspection.