Stricken language would be deleted from and underlined language would be added to present law. Act 504 of the Regular Session

1	State of Arkansas	A Bill	
2	91st General Assembly	A DIII	
3	Regular Session, 2017		SENATE BILL 356
4			
5	By: Senator Irvin		
6	By: Representative Bentley		
7			
8		For An Act To Be Entitled	
9		EATE THE ARKANSAS PHYSICIAN ORDER F	
10	LIFE-SUSTAINING TREATMENT ACT; TO PROVIDE FOR THE USE		
11	OF A PHYSICIAN ORDER FOR LIFE-SUSTAINING TREATMENT		
12	FORM; AND FOR	R OTHER PURPOSES.	
13			
14			
15		Subtitle	
16		TE THE ARKANSAS PHYSICIAN ORDER	
17	FOR LIFE-SUSTAINING TREATMENT ACT; AND TO		
18	PROVIDE	FOR THE USE OF A PHYSICIAN ORDER	
19	FOR LIF	E-SUSTAINING TREATMENT FORM.	
20			
21			
22	BE IT ENACTED BY THE GENE	ERAL ASSEMBLY OF THE STATE OF ARKAN	SAS:
23			
24		as Code Title 20, Chapter 6, is ame	nded to add an
25	additional subchapter to		
26	<u>Subchapter 2 – Arkansa</u>	as Physician Order for Life-Sustain	<u>ing Treatment Act</u>
27			
28	<u>20-6-201. Title.</u>		
29	-	all be known and may be cited as th	<u>e "Arkansas</u>
30	Physician Order for Life-	-Sustaining Treatment Act".	
31			
32	<u>20-6-202.</u> Legislat		
33	The General Assembl		
34		mportant for individuals to make he	<u>althcare decisions</u>
35	before a medical crisis o		
36	(2) Healthca	are planning is a process, rather t	nan a single

1	decision, that helps individuals think about the type of care that they would
2	want if they become seriously ill or incapacitated, and encourages
3	individuals to talk with their loved ones and physicians regarding their
4	healthcare decisions;
5	(3) An advanced directive gives individuals the ability to put
6	their wishes in writing and to identify another individual who would speak
7	for them if they become unable to speak or make decisions for themselves;
8	(4) The physician order for life-sustaining treatment form
9	complements an advance directive, if existing, by taking an individual's
10	intentions regarding life-sustaining treatment, such as the intentions set
11	forth in an advance directive, and converting the individual's intentions
12	into a medical order;
13	(5) The hallmarks of a physician order for life-sustaining
14	treatment form are that a physician order for life-sustaining treatment form:
15	(A) Is:
16	(i) Signed;
17	(ii) Immediately actionable as medical orders on a
18	standardized form;
19	(iii) A conspicuous, clearly identifiable form; and
20	(iv) Recognized, adopted, and honored across
21	treatment settings; and
22	(B) Addresses a range of life-sustaining treatment
23	interventions as well as the patient's preferred intensity of treatment for
24	each intervention; and
25	(6) The physician order for life-sustaining treatment form is
26	used only for patients with a serious illness or medical frailty when a
27	physician would not be surprised if the patient died within one (1) year.
28	
29	20-6-203. Definitions.
30	As used in this subchapter:
31	(1)(A) "Healthcare facility" means an institution, building,
32	agency, or a portion of an institution, building, or agency that is used,
33	operated, or designed to provide healthcare services, medical treatment,
34	nursing care, rehabilitative care, or preventative care to an individual,
35	regardless of whether the institution, building, or agency is a private
36	organization, a public organization, a nonprofit organization, or a for-

1	profit organization.
2	(B) "Healthcare facility" includes without limitation:
3	(i) An ambulatory surgical facility;
4	(ii) A home health agency;
5	(iii) A hospice;
6	(iv) A hospital;
7	(v) An infirmary;
8	(vi) A long-term care facility;
9	(vii) An assisted living facility;
10	(viii) A mental health center;
11	(ix) An outpatient facility;
12	(x) A rehabilitation facility; and
13	(xi) A residential treatment facility;
14	(2) "Healthcare provider" means an individual who is licensed,
15	certified, or otherwise authorized or permitted by the laws of this state to
16	administer health care in the ordinary course of business or in the practice
17	of a profession, including without limitation:
18	(A) An emergency medical care provider; and
19	(B) An individual providing home and community-based
20	services;
21	(3) "Legal representative" means the same as a person authorized
22	to consent on the principal's behalf under § 20-6-102;
23	(4) "Patient" means an individual who has a critical medical
24	condition or a terminal illness and for whom a physician has determined that
25	a physician order for life-sustaining treatment is consistent with the
26	individual's goals of care;
27	(5) "Physician" means an individual who is licensed to practice
28	medicine or osteopathic medicine in this state; and
29	(6) "Physician order for life-sustaining treatment" means a
30	document containing orders by a physician regarding life-sustaining treatment
31	and medical interventions in accordance with the wishes of a patient or if
32	the wishes of the patient are not reasonably known and cannot with reasonable
33	diligence be ascertained, in accordance with the best interest of the
34	patient.
35	
36	20-6-204. Physician order for life-sustaining treatment form.

1	(a) The State Board of Health shall prescribe a standardized physician
2	order for life-sustaining treatment form that:
3	(1) Is signed and dated by:
4	(A) The patient or the legal representative of the
5	patient; and
6	(B) The physician of the patient;
7	(2) Includes:
8	(A) The name and date of birth of the patient; and
9	(B) The intentions of the patient regarding care,
10	including without limitation the administration of cardiopulmonary
11	resuscitation and the level of medical interventions in the event of a
12	medical emergency; and
13	(3) Is easily distinguishable to facilitate recognition by
14	healthcare providers and healthcare facilities.
15	(b) A legal representative may sign a physician order for life-
16	sustaining treatment form on behalf of a patient who lacks capacity to do so,
17	guided by:
18	(1) The express or implied intentions of the patient; or
19	(2) If the intentions of the patient are unknown and cannot be
20	reasonably determined, the best interest of the patient given the overall
21	medical condition and prognosis of the patient.
22	(c)(l) The physician order for life-sustaining treatment form shall be
23	completed by a physician based upon patient intentions and medical
24	<u>indications.</u>
25	(2) During the process of completing the physician order for
26	life-sustaining treatment form, the physician may:
27	(A) Explain:
28	(i) The physician order for life-sustaining
29	treatment form; and
30	(ii) The medical interventions and procedures
31	offered by the form; and
32	(B) Inform the patient or the legal representative of the
33	patient about the difference between an advance directive and the physician
34	order for life-sustaining treatment form.
35	(d) This subchapter does not authorize a physician to unilaterally
36	create a physician order for life-sustaining treatment on behalf of an

1	individual.
2	
3	20-6-205. Compliance.
4	(a) Except as provided in subsection (c) of this section, a healthcare
5	provider and a healthcare facility shall treat a patient in accordance with
6	the physician order for life-sustaining treatment form.
7	(b) A physician order for life-sustaining treatment form is valid in a
8	healthcare facility, regardless of whether the physician who signed the form
9	has clinical privileges at the healthcare facility.
10	(c)(l) A healthcare provider or healthcare facility is not required to
11	comply with a physician order for life-sustaining treatment form if the
12	physician order for life-sustaining treatment form requires medically
13	ineffective health care or health care contrary to generally accepted
14	healthcare standards applicable to a healthcare provider or healthcare
15	facility.
16	(2) A healthcare provider or healthcare facility may decline to
17	comply with an executed physician order for life-sustaining treatment form
18	based upon religious beliefs or moral convictions if the healthcare provider
19	or healthcare facility:
20	(A) Promptly informs the patient or legal representative
21	of the patient regarding the inability to carry out the physician order for
22	life-sustaining treatment form;
23	(B) Provides continuing care to the patient until a
24	transfer can be made or a determination has been made that the transfer
25	cannot be made; and
26	(C)(i) Makes all reasonable efforts to assist in the
27	prompt transfer of the patient to another healthcare provider or healthcare
28	facility that is willing to comply with the executed physician order for
29	life-sustaining treatment form.
30	(ii) If a transfer cannot be made, the healthcare
31	provider or healthcare facility shall not be compelled to comply with the
32	physician order for life-sustaining treatment form.
33	(3) This section does not authorize a healthcare provider or
34	healthcare facility to withhold life-sustaining treatment against the wishes
35	of a patient or a legal representative.

1	20-6-206. Review and revision.
2	(a)(1) An executed physician order for life-sustaining treatment form
3	may be reviewed periodically by the physician of the patient.
4	(2) The physician may:
5	(A) Conduct an evaluation of the patient; and
6	(B) In consultation with the patient or the legal
7	representative of the patient, issue a new physician order for life-
8	sustaining treatment form consistent with the most current information
9	available about the health status and goals of care of the patient.
10	(b)(1) The new physician order for life-sustaining treatment form
11	shall be:
12	(A) Recorded on a new physician order for life-sustaining
13	treatment form; and
14	(B) Signed in compliance with § 20-6-204.
15	(2) Once a new physician order for life-sustaining treatment
16	form has been executed, the previous physician order for life-sustaining
17	treatment form shall be nullified.
18	(c) A patient with the capacity to make his or her own healthcare
19	decisions may, at any time, request alternative treatment to the treatment
20	that was ordered on the physician order for life-sustaining treatment form.
21	(d) The legal representative of the patient who does not have the
22	capacity to make his or her own healthcare decisions shall consult with the
23	physician who is the treating physician of the patient prior to making a
24	request to modify the orders reflected in the physician order for life-
25	sustaining treatment form of the patient.
26	
27	20-6-207. Relationship with advance directives.
28	(a)(1) A physician order for life-sustaining treatment form is not
29	intended to replace an advance directive.
30	(2) In executing a physician order for life-sustaining treatment
31	form, a patient, the legal representative of the patient when applicable, and
32	the physician shall make a good-faith effort to locate and incorporate
33	treatment preferences documented in a previously executed advance directive,
34	when appropriate and desired by the patient.
35	(b) In the event of a conflict with a physician order for life-
36	sustaining treatment form and an advance directive, either:

1	(1) The document executed most recently by the patient shall
2	take precedence regarding the medical decision or treatment preference at
3	<u>issue</u> ; or
4	(2) If both the advance directive and the physician order for
5	life-sustaining treatment form were executed by the legal representative of
6	the patient, the advance directive shall take precedence regarding the
7	medical decision or treatment preference at issue.
8	(c) This section does not prohibit or require the execution,
9	revocation, or modification of an advance directive.
10	
11	20-6-208. Liability.
12	A healthcare provider, healthcare facility, or employee or agent of the
13	healthcare provider or healthcare facility is not subject to civil or
14	criminal liability or discipline for unprofessional conduct for:
15	(1) Complying with a physician order for life-sustaining
16	treatment form based upon a good-faith assumption that the physician order
17	for life-sustaining treatment form was valid when executed and that the
18	physician order for life-sustaining treatment form was not revoked or
19	terminated;
20	(2) Failing to comply with a physician order for life-sustaining
21	treatment form based upon a good faith determination that:
22	(A) The physician order for life-sustaining treatment form
23	was not valid; or
24	(B) The physician order for life-sustaining treatment form
25	requires medically ineffective health care or health care contrary to
26	generally accepted healthcare standards applicable to the healthcare provider
27	or healthcare facility; or
28	(3) Declining to comply with an executed physician order for
29	life-sustaining treatment form based upon religious beliefs or moral
30	convictions if the healthcare provider or healthcare facility complies with
31	the requirements of § 20-6-205.
32	
33	20-6-209. Voluntary signing.
34	(a) The signing of a physician order for life-sustaining treatment
35	form by a patient or legal representative of the patient is voluntary.
36	(b)(1) A person or entity, including without limitation a healthcare

1	provider, healthcare facility, employer, or health insurance carrier, shall
2	not require an individual to execute a physician order for life-sustaining
3	treatment form as a condition of being insured for, or receiving, healthcare
4	services.
5	(2) If a healthcare provider or healthcare facility complies
6	with subdivision (b)(1) of this section, the healthcare provider or
7	healthcare facility may have a policy to offer a physician order for life-
8	sustaining treatment form to appropriate individuals as part of a
9	conversation about:
10	(A) Goals of care;
11	(B) Personal values and preferences;
12	(C) Benefits of various treatment options; and
13	(D) Avoidance of unwanted burden.
14	(c) This subchapter does not:
15	(1) Create a presumption concerning the intention of an
16	individual who has not executed a physician order for life-sustaining
17	treatment form with respect to the use, withholding, or withdrawal of life-
18	sustaining procedures in the event of a terminal condition; or
19	(2) Affect the right of an individual to make decisions
20	regarding the use of life-sustaining procedures as long as the individual has
21	the capacity to make a decision.
22	
23	20-6-210. Criminal penalty.
24	(a) It is unlawful for a person to willfully:
25	(1) Conceal, cancel, deface, obliterate, or damage a physician
26	order for life-sustaining treatment form without the consent of the patient
27	or the legal representative of the patient;
28	(2)(A) Cause an individual to execute a physician order for
29	life-sustaining treatment form by undue influence, fraud, or duress.
30	(B) As used in this section, "undue influence" includes
31	without limitation:
32	(i) Charging a different rate or fee for insurance
33	coverage or healthcare services based upon whether the individual consents to
34	a physician order for life-sustaining treatment form or has executed a
35	physician order for life-sustaining treatment form;
36	(ii) Requiring a healthcare provider to have an

1	internal policy to offer a physician order for life-sustaining treatment form
2	to any individual;
3	(iii) Providing any financial incentive, payment,
4	discount, or rating incentive for have an internal policy or procedure
5	relating to the completion of a physician order for life-sustaining treatment
6	form as applied to a healthcare provider or healthcare facility; or
7	(iv) Imposing a rating or reimbursement penalty if a
8	healthcare provider or healthcare facility fails to achieve a target for
9	physician order for life-sustaining treatment form completions; or
10	(3) Falsify or forge a physician order for life-sustaining
11	treatment form of another person that results in a direct change of health
12	care provided to the patient.
13	(b) A person who violates this section is guilty of a Class D felony.
14	(c) This section does not prevent payment to a healthcare provider or
15	healthcare facility for consultation with or counseling of a patient
16	concerning a physician order for life-sustaining treatment form or for
17	offering advance directive healthcare planning.
18	
19	20-6-211. Applicability — Death — Life insurance.
20	(a) A death that results from compliance with a physician order for
21	life-sustaining treatment form does not constitute a suicide, homicide, or
22	abuse, for any reason.
23	(b)(1) The execution of a physician order for life-sustaining
24	treatment form does not affect the sale, procurement, or issuance of a life
25	insurance policy or annuity policy.
26	(2) A life insurance policy or annuity policy shall not be
27	impaired or invalidated if emergency care or life-sustaining treatment is
28	withheld from an insured individual who has executed a physician order for
29	life-sustaining treatment form.
30	(c) This subchapter does not:
31	(1) Condone, authorize, or approve mercy killing, euthanasia, or
32	physician-assisted suicide; or
33	(2) Permit any affirmative or deliberate act or omission to end
34	life other than to permit the natural process of dying.
35	
36	20-6-212. Copy of physician order for life-sustaining treatment form.

1	A copy of an executed physician order for life-sustaining treatment
2	form has the same effect as the original physician order for life-sustaining
3	treatment form.
4	
5	SECTION 2. DO NOT CODIFY. Form.
6	The State Board of Health shall adopt the following form and may by
7	rule revise the form so long as the revisions are consistent with the intent
8	of this act.
9	

1						
2	HIPAA PERMITS DISCLOSUR	E OF POLST TO OTHER HEALTH (ARE PROVIDERS AS NECESSARY			
3	PHYSICIAN ORD	ERS FOR LIFE-SUSTAINING TR	REATMENT (POLST)			
5 bir 6 90	st follow these orders, then contact Phr copy of the executed POLST form is a leading, valid physician order. Any section mpleted implies full treatment for that PLST complements an Advance Directive	gally Patient First Name: section.	Date form Prepared: Patient Date of Birth:			
′ _	CARRIODIUMAGNARY PECUCCITAT	ntended to replace that document. CARDIOPULMONARY RESUSCITATION (CPR): If patient has no pulse and is not breathing.				
8 6	NOTE If patient is	NOT in cardiopulmonary arrest, fol				
) Che	Attornet Posussitation/CPP	(Selecting CPR in Section A <u>requires</u> sel	ecting Full Treatment in Section B)			
	☐ Do Not Attempt Resuscitation	n/DNR (Allow Natural Death)				
F	MEDICAL INTERVENTIONS:	If patient is found wi	th a pulse and/or is breathing.			
1 Che	☐ <u>Full Treatment</u> – primary goal of prolonging life by all medically effective means. In addition to treatment described in Selective Treatment and Comfort Treatment, use intubation, advanced airway interventions, mechanical ventilation, and cardioversion as indicated. ☐ <i>Trial Period of Full Treatment</i> .					
		treating medical conditions while avoid	_			
5	In addition to treatment described in Comfort Treatment, use medical treatment and IVs as indicated. Do not intubate. May use non-invasive positive airway pressure. Generally avoid intensive care.					
5		☐ Request transfer to hospital only if comfort needs cannot be met in current location.				
,	obstruction. Do not use treatment	edication by any route as needed; use or s listed in Full and Selective Treatment	xygen, suctioning, and manual treatment of airway unless consistent with comfort goal. <i>Request</i>			
3		t needs cannot be met in current locati	on.			
	ADDITIONAL ORDERS:					
	INFORMATION AND SIGNATURES					
	Discussed with:		Legal Representative			
	☐ Advance Directive dated, available and reviewed ☐ Advance Directive not available.					
	□ No Advance Directive.					
	-	Signature of Physician My signature below indicates to the best of my knowledge that these orders are consistent with the patient's intentions and medical condition.				
	Print Physician Name:	Physician Phone Number:	Physician License #:			
	Physician Signature: (required)		Date:			
	Signature of Patient or Legal Repre	esentative				
	I am aware that my consent to this form is voluntary. By signing this form, a legal representative acknowledges that this request regarding resuscitative measure is consistent with the known wishes of, and with the best interest of, the individual who is the subject of the form.					
	Print Name:		Relationship: (write self if patient)			
	Signature: (required)		Date:			
2	Mailing Address:		Phone:			
	SEND FORM WITH	PATIENT WHENEVER TRANSFER	RRED OR DISCHARGED			
4						

APPROVED: 03/15/2017