

**State Advisory Council on Quality Care at the End of Life
Minutes from March 21, 2012 Meeting**

Meeting time and place: March 21, 2012, 10:00 a.m., Department of Aging, 301 West Preston Street, Baltimore, Maryland.

Council members present: Ted Meyerson, Chair; Lynn McPherson; Timothy Key; Paul Ballard (Attorney General's designee); Michael McHale; Gail Amalia Katz; Karren Pope-Onwukwe (via speakerphone); George Failla (Department of Disabilities' designee); Alice Hedt (Department of Aging's designee); Lya Karm; Karen Kauffman.

Others present: Sarah Dickinson.

Chairman Ted Meyerson convened the meeting at 10:00 a.m.

Lya Karm discussed patient educational videos that people have found to be useful in helping patients make choices regarding their treatments. She is looking at the possibility of using them at Kaiser Permanente. Karren Pope-Onwukwe stated her opinion that the "5 wishes" advance directive works as a tool to start a conversation with a patient. Timothy Key stated his opinion that it was easier to transfer patient's wishes expressed in the State advance directive form into actionable medical orders. Ted Meyerson asked that Paul Ballard provide the Council members with links to the Attorney General's website containing the State advance directive form and to mail the advance directive form to members. Alice Hedt noted that the Department of Aging would be willing to provide a link to the Attorney General's website on advance directives.

Ted Meyerson discussed what the Council might do next regarding its educational efforts. Paul Ballard mentioned that the Workgroup Report on Hospice, Palliative Care, and End-of-life Counseling recommended that practitioners be educated about having conversations with patients about their treatment options at the end of life. Paul Ballard also shared an internet site with Council members that had been provided by Tricia Nay containing information regarding billing for such conversations. Gail Amalia Katz stated that including this information in coding seminars would also be a way to get this information out to practitioners. Lynn McPherson noted that training regarding pain management could be hosted on NIH's website.

Ted Meyerson stated that about 10,000 educational cards for patients have been printed and asked for guidance regarding how they should be distributed. Alice Hedt asked if the cards were on the Council's website. Paul Ballard verified that they were available on the website. Karren Pope-Onwukwe suggested that practitioners be sent the cards to place them in their primary care offices for patients to pick up. Alice Hedt suggested that "decision day" on April 16 could be used to educate adults. Karren Pope-Onwukwe noted that an "advance directive day" is helpful and that it could be included in Senior Law Day on May 1. Karen Kauffman stated that churches are good places to distribute cards. Alice Hedt stated that the Department of Aging might be interested in providing

public service announcements on end-of-life discussions. Ted Meyerson stated that he and Paul Ballard would write an action plan regarding education.

Paul Ballard updated the Council on the status of the MOLST form. He stated that although the adoption of the regulations implementing the MOLST form are still pending, some hospitals and other health care facilities are using it voluntarily and that emergency first responders honor the MOLST form. He noted that orders containing a patient's wishes for their care need to be honored in any event.

Timothy Key stated that the main impact of MOLST as show by the growing literature regarding the use of similar forms is that it reduces the frequency of treatments given to people that they do not want. He shared a study on the North Carolina MOST form with the Council that was recently published in the JAMDA, the results of which suggest that health professionals generally viewed the form as a positive tool for communicating a patient's treatment preferences but that these professionals may need specific strategies for explaining and interpreting the scope of medical interventions section and for meeting the form's review requirements.

Alice Hedt mentioned that part of the education of consumers regarding the MOLST form should be that some health care facilities may not honor it due to religious objections. Karen Kauffman expressed a concern that persons' end-of-life wishes may not be honored by certain institutions if the wishes counter the institution's philosophy of maintaining and/or sustaining life.

Lya Karm suggested that when a physician renews their license that they could be required to sign a statement affirming that the physician had read the MOLST form. Gail Amalia Katz added that billing coding information for conversations about the MOLST form could be given as information included in the renewal packet. Alice Hedt mentioned that the Department of Aging is looking at the possibility of webinar training regarding the MOLST form for assisted living programs.

Paul Ballard updated the Council on several bills pending in the legislature. He stated that House Bill 449 had been withdrawn. HB 449 would have authorized a surrogate decision maker to donate the nonvital organs of a patient in a persistent vegetative state. He also discussed House Bill 954, which specified what a court could do in response to a petition alleging that a patient's wishes were not being honored by their authorized decision maker. Finally, he stated that House Bill 1090 would require hospitals to have palliative care programs and require practitioners to counsel patients with chronic or serious condition about their palliative care treatment options and counsel patients with end-of-life conditions regarding their treatment options. He noted that the bill's requirements regarding end-of-life counseling were similar to the requirements in House Bill 30 introduced in the 2009 legislative session, resulting in the workgroup that completed the Hospice and Palliative Care report.

No further items of business having been presented, Chairman Meyerson adjourned the meeting.