January 5, 2018

TO: Hospice Providers

SUBJECT: Senate Bill (SB) 294 – Palliative Care Expansion Pilot Program

AUTHORITY: Health and Safety Code (HSC) section 1747.3

All Facilities Letter (AFL) Summary

This AFL notifies hospice providers of the enactment of SB 294, which allows hospice providers to offer palliative care to seriously ill patients without a terminal diagnosis under specified conditions.

Effective January 1, 2018, SB 294 (Chapter 31, Statutes 2017) establishes a pilot program allowing licensed hospice providers to provide palliative care to non-terminally but seriously ill patients, as determined by the physician and surgeon in charge of the care of the patient, regardless of the individual’s estimated length of life. A patient receiving palliative care from a participating hospice provider may continue to receive curative treatment from other licensed health care professionals. This pilot program does not include in-patient hospice facilities and sunsets on January 1, 2022.

Notice Requirements

SB 294 requires a hospice provider to notify the California Department of Public Health (CDPH) at least 45 days prior to providing palliative care under the pilot program. The hospice provider must submit the following to CDPH’s Licensing and Certification (L&C) Centralized Applications Unit (CAU):

- the date the hospice provider intends to begin providing palliative care to patients with a serious illness,
- form HS 200, or a successor form, with the relevant portions completed, and
- a complete Centers for Medicare and Medicaid Services form CMS 417, or a successor form.

To participate in the pilot program, please submit the required information to CAU at:
Reporting Requirements

The bill requires participating hospice providers to report specified information on or before January 1, 2019, January 1, 2020, and January 1, 2021. CDPH will issue a future AFL outlining data submission procedures, and the appropriate format for data submission. SB 294 requires hospice providers to report the following information:

- The number of non-hospice patients who received palliative care pursuant to this section.
- The number of patients enrolled in hospice.
- The primary diagnoses of the patients for which the licensee provided palliative care pursuant to this section.
- The numbers and types of providers hired during the previous 12 months.
- The numbers and types of providers who left employment during the previous 12 months.
- Complaints received by the licensee during the previous 12 months that related to any of the following:
  - Events that caused or were likely to cause serious injury, harm, impairment, or death.
  - Events or incidents that negatively impacted a patient’s mental, physical, or psychosocial status and were of such consequence to the patient’s well-being that a rapid response was required.
  - Delays in patient care for hospice and non-hospice patients who received palliative care pursuant to this section.
  - Qualifications of staff.
- All information the hospice provides to the Office of Statewide Health Planning and Development.

Stakeholder Meeting

At the end of the pilot period, CDPH will conduct a stakeholder meeting to discuss the results of the reported information. The bills reporting requirements will allow CDPH to determine the effectiveness of including hospice providers as a means of expanding palliative care for seriously ill patients.

CDPH’s failure to expressly notify facilities of statutory or regulatory requirements does not relieve facilities of their responsibility for following all laws and regulations. Facilities should refer to the full text of all applicable sections of the HSC and the California Code of Regulations to ensure compliance.

Sincerely,

Original signed by Jean Iacino

Jean Iacino
Deputy Director