

SB2392

Measure Title: RELATING TO PROVIDER ORDERS FOR LIFE-SUSTAINING TREATMENT.

Report Title: Provider Orders for Life-Sustaining Treatment; Electronic Registry System; Department of Health

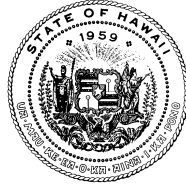
Description: Requires the department of health to establish an electronic registry system for the purpose of collecting a patient's provider order for life-sustaining treatment form and disseminating the information to an authorized user. Specifies certain requirements for the registry.

Companion:

Package: None

Current Referral: CPH, JDC

Introducer(s): KIDANI, S. Chang, Dela Cruz, Shimabukuro, Wakai



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**Testimony in OPPOSITION to S.B. 2392
RELATING TO PROVIDER ORDERS FOR LIFE-SUSTAINING TREATMENT.**

SENATOR ROSALYN H. BAKER, CHAIR
SENATE COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH
Hearing Date: Thursday, February 8, 2018 Room Number: 229

1 **Fiscal Implications:** Unknown but anecdotal information reports costs in the hundreds of
2 thousands of dollars.

3 **Department Testimony:** The Department has worked hard for several years alongside Hawaii
4 physicians and professionals to develop Hawaii's original POLST form and to carry the message
5 on the benefits of POLST to health care facilities and the community. As a result, the
6 Department appreciates the intent of this bill. Nevertheless, the Department OPPOSES this
7 measure as premature and possibly unnecessary at this time.

8 POLST stands for Provider Orders for Life Sustaining Treatment (POLST). These are
9 medical orders signed by the patients' provider (physician or APRN). They are written provider
10 orders for medical actions or interventions to be carried out by EMS medical technicians, ER
11 room physicians and staff, and healthcare facilities and others, and which reflect the wishes of
12 the patients, and they are a legal document.

13 POLST forms in hardcopy form have been used in Hawaii for almost ten (10) years. Its
14 use has grown and is recognized by professionals and facilities statewide. EMS medical
15 technicians and emergency department doctors recognize and accept the form as legal medical
16 orders and they follow the medical orders unless the patient or patient's family verbally change

1 the orders at the time that services become necessary. Patients are encouraged to place the form
2 in open and noticeable places such as on the refrigerator or on (not in) the nightstand where they
3 can be easily seen in the event EMS medical technicians are called to the patient's home.

4 This bill would require DOH to establish an online electronic registry system to collect
5 patients' POLST forms and disseminate the information to authorized users.

6 According to the National POLST Paradigm, states report interest in developing
7 electronic POLST (ePOLST) registries, but the barriers are multiple and complex, including the
8 development of secure electronic form completion systems, integration of ePOLST form
9 completion software with electronic medical record keeping systems, the secure exchange of
10 patient ePOLST forms across various health systems (or submission into an electronic repository
11 from those systems), accessibility of forms across multiple systems, the integration of scanned
12 paper POLST forms with ePOLST repositories, the 24/7 availability of POLST forms to
13 appropriate individuals (e.g., EMS and emergency room physicians and staff), and funding to not
14 only design but develop and maintain such systems.

15 While this program would be beneficial, unfortunately, the Department is not in a
16 position to undertake this effort without significant resources. And the Department also believes
17 this is an effort better left to dedicated professionals in the private sector to develop, as they did
18 in developing the original hardcopy form.

19 For this reason, the Department OPPOSES this bill in assigning the development to us.

20 Thank you for the opportunity to testify on this bill.

February 7, 2018

Dear Senators Baker, Tokuda and other members of the CPH committee,

With this testimony for SB2392, I would like to express my support for the intent of the bill to create a POLST Registry but feel the bill is premature and therefore oppose the bill in its current iteration. I am sorry that I am not able to appear in person.

I currently serve as Executive Director of Kōkua Mau, which is the lead agency for POLST in Hawaii. We host the POLST form and information on our website, provide trainings to professionals and answer questions from the general public about POLST. I am the national contact person for Hawaii and I serve on the statewide POLST Task Force, which provides leadership on POLST.

For several years, we have been looking at the question of a statewide registry or other technological solutions to the challenge of making sure that POLST forms are properly completed and found when needed. We currently have a small working group who is looking at this issue, which includes members of the POLST Task Force and HHIE. We welcome anyone who is interested in this issue to join us.

There is a national office for POLST and one of the issues that they have been looking at in recent years is POLST and technology. You can read more about their findings and recommendations on their website <http://polst.org/technology/>. The recommendations are clear that this is a complex issue, which requires cooperation from all the major players in the health system, integrated well-thought out technological components as well as money and staff to implement it. Several states have passed laws to implement the POLST registry without any money or implementation plan and have then needed large private grants in order to study the issue. At the moment we are very interested in the outcome of the pilots in California and are looking at programs in New York, West Virginia and Oregon, which could be solutions for Hawaii but as mentioned, require time and money to properly implement.

One first step in the process would be to assess the extent of the problem. Currently the major health systems, Hawaii Pacific Health, Queens Health Systems, Castle Medical Center and Kaiser Permanente, have all included POLST into their Electronic Medical Record so it will be more easily found in an emergency. Any solution that we create will need to build on the current situation, identify the gaps and find a solution that is appropriate for Hawaii.

Please let me know if you have any further questions.

Best wishes,



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Executive Director

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