

SUBJECT: Hospice care for terminally ill inmates

COMMITTEE: Corrections — favorable, without amendments

VOTE: 6 ayes — Hightower, Gray, Allen, Farrar, Longoria, Serna
0 nays
3 absent — Culberson, Pitts, Telford

SENATE VOTE: On final passage, May 10 — 31-0

WITNESSES: None

BACKGROUND: Hospice services are defined under the Health and Safety Code (sec. 142.001) as services provided to a client or client's family as part of a coordinated program provided by a medically directed interdisciplinary team. Services include palliative care for terminally ill clients and support services for their families 24 hours a day, seven days a week, during the last stages of illness, during death and during bereavement.

DIGEST: SB 569 would allow the Texas Department of Criminal Justice to provide direct hospice services for terminally ill inmates or to contract with a licensed hospice for the provision of hospice services. TDCJ would not have to be licensed under the Health and Safety Code to provide hospice services.

The act would take effect September 1, 1995.

SUPPORTERS SAY: SB 569 would provide a lower-cost and humane option for the care of terminally ill TDCJ inmates. Hospice emphasizes palliative care instead of curative treatment and can be provided in a variety of settings. TDCJ is encountering a growing number of HIV-positive inmates and also houses inmates suffering from cancer and other terminal diseases. The TDCJ system reports about 360 - 370 deaths per year, or about a death per day.

Existing recourses for terminally ill inmates do not sufficiently provide suitable care and alternatives — inmates often are cared for in expensive

hospital settings, in prison medical units or in their cells. Special needs parole, in which prisoners could be released to private health care facilities or to their families, cannot be used to release all dying prisoners because some are still dangerous to society, while others die before all necessary parole paperwork, and often Medicaid eligibility determinations, are completed. In addition, a high number of inmates do not qualify for special needs parole because they committed capital offenses.

SB 569 is permissive; it would allow the TDCJ system to establish or contract with hospice services as needed and appropriate to the system and to individual units. TDCJ most likely would have no problem with meeting most hospice licensing standards, but it does have special security concerns that warrant exemption from some licensing standards, such as those requiring patient freedom of movement.

A hospice would not only provide for an inmate's physical needs, but also address the emotional needs of the inmate and the inmate's family. SB 569 is based on the success of inmate hospice programs enacted in four other states: California, Pennsylvania, Ohio and Florida.

**OPPONENTS
SAY:**

SB 569 is unnecessary. Terminally ill inmates are being adequately cared for under the current system, and if anything needs to be improved, it should be the process of releasing dying inmates through special needs parole. An inmate released to private care through special needs parole would free up a bed for a new inmate and, by qualifying for Medicaid, would draw down federal dollars to help pay for the inmate's care. The inmate also would probably receive better care in a private institution or at home than in a prison facility.

**OTHER
OPPONENTS
SAY:**

TDCJ should be required to meet hospice licensing standards if it is going to provide true hospice care. The hospice industry is a growing industry, and the term "hospice" is often overused and misused. Exemptions from licensing standards for certain entities would over time serve to confuse consumers and lower the standard of care for everyone.