

STATE OF OKLAHOMA

2nd Session of the 60th Legislature (2026)

SENATE BILL 1562

By: Coleman

AS INTRODUCED

An Act relating to hospice; amending 63 O.S. 2021, Section 1-860.4, which relates to requirements and conditions for hospices; updating statutory language; specifying certain penalties; defining term; updating statutory references; and providing an effective date.

BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

SECTION 1. AMENDATORY 63 O.S. 2021, Section 1-860.4, is amended to read as follows:

Section 1-860.4. A. A hospice shall comply with the following:

1. A hospice shall coordinate its services with those of the patient's primary or attending physician;

2. A hospice shall coordinate its services with professional and nonprofessional services already in the community. A hospice may contract for some elements of its services to a patient and family, provided direct patient care is maintained with the patient and the hospice team so that overall coordination of services can be maintained by the hospice team. The majority of hospice services available through a hospice shall be provided directly by the

1 licensee. Any contract entered into between a hospice and health  
2 care provider shall specify that the hospice retain the  
3 responsibility for planning, coordinating and prescribing hospice  
4 services on behalf of a hospice patient and the hospice patient's  
5 family. No hospice may charge fees for services provided directly  
6 by the hospice team which duplicate contractual services provided to  
7 the patient or the patient's family;

8 3. The hospice team shall be responsible for coordination and  
9 continuity between inpatient and home care aspects of care;

10 4. A hospice shall not contract with a health care provider or  
11 another hospice that has or has been given a conditional license  
12 within the last eighteen (18) months;

13 5. Hospice services shall provide a symptom control process, to  
14 be provided by a hospice team skilled in physical and psychosocial  
15 management of distressing signs and symptoms;

16 6. Hospice care shall be available twenty-four (24) hours a  
17 day, seven (7) days a week;

18 7. A hospice shall have a bereavement program which shall  
19 provide a continuum of supportive and therapeutic services for the  
20 family;

21 8. The unit of care in a hospice program shall be composed of  
22 the patient and family;

1        9. A hospice program shall provide a continuum of care and a  
2 continuity of care providers throughout the length of care for the  
3 patient and to the family through the bereavement period;

4        10. A hospice program shall not impose the dictates of any  
5 value or belief system on its patients and their families;

6        11. a. Admission to a hospice shall be upon the order of a  
7 physician licensed pursuant to the laws of this state  
8 and shall be dependent on the expressed request and  
9 informed consent of the patient and family.

10       b. The hospice program shall have admission criteria and  
11 procedures that reflect:

12           (1) the patient and family's desire and need for  
13 service,

14           (2) the participation of the attending physician, and

15           (3) the diagnosis and prognosis of the patient.

16       c. (1) Any hospice or employee, contractor, or agent  
17 ~~thereof~~ of a hospice who knowingly or  
18 intentionally solicits patients or pays to or  
19 offers a benefit to any person, firm,  
20 association, partnership, corporation or other  
21 legal entity for securing or soliciting patients  
22 for the hospice or hospice services in this state  
23 shall, upon conviction ~~thereof, shall~~, be guilty  
24 of a misdemeanor ~~and shall be punished~~ punishable

1 by a fine of not less than Five Hundred Dollars  
2 (\$500.00) and not more than Two Thousand Dollars  
3 (\$2,000.00).

4 (2) In addition to any other penalties or remedies  
5 provided by law:

6 (a) a violation of this ~~section~~ subparagraph by  
7 a hospice or employee, contractor, or agent  
8 ~~thereof~~ of a hospice shall be grounds for  
9 disciplinary action by the State Department  
10 of Health including, but not limited to,  
11 assessment of administrative fines as  
12 provided by Section 1-860.9a of this title,  
13 and

14 (b) the State Department of Health may institute  
15 an action to enjoin violation or potential  
16 violation of this section. The action for  
17 an injunction shall be in addition to any  
18 other action, proceeding or remedy  
19 authorized by law.

20 (3) As used in this subparagraph, "solicit" includes,  
21 but is not limited to, the act of a hospice or  
22 its employee, contractor, or agent initiating  
23 contact with one or more patients residing in a  
24 facility licensed by the State Department of

1                   Health for the purpose of recruiting such  
2                   patients after such patients are already enrolled  
3                   in another hospice program.

4           (4)   This subparagraph shall not be construed to  
5           prohibit:

6                   (a)   advertising, except that advertising which:

7                           (i)   is false, misleading or deceptive,

8                           (ii)   advertises professional superiority or  
9                                   the performance of a professional  
10                           service in a superior manner, and

11                           (iii)   is not readily subject to verification,  
12                                   and

13                   (b)   remuneration for advertising, marketing or  
14                           other services that are provided for the  
15                           purpose of securing or soliciting patients,  
16                           provided the remuneration is:

17                           (i)   set in advance,

18                           (ii)   consistent with the fair market value  
19                                   of the services, and

20                           (iii)   not based on the volume or value of any  
21                                   patient referrals or business otherwise  
22                                   generated between the parties, and

23                   (c)   any payment, business arrangements or  
24                           payments practice not prohibited by 42

U.S.C., Section 1320a-7b(b), or any  
regulations promulgated pursuant thereto.

~~(4)~~ (5) This ~~paragraph~~ subparagraph shall not apply to  
licensed insurers, including but not limited to  
group hospital service corporations or health  
maintenance organizations which reimburse,  
provide, offer to provide or administer hospice  
services under a health benefits plan for which  
it is the payor when it is providing those  
services under a health benefits plan;

12. A hospice program shall develop and maintain a quality  
assurance program that includes:

- a. evaluation of services,
- b. regular chart audits, and
- c. organizational review; and

13. A hospice program shall be managed by an administrator  
meeting the requirements as set forth in Section 1-862 of this  
title.

B. A hospice team shall consist of, as a minimum, a physician,  
a registered nurse, and a social worker or counselor, each of whom  
shall be licensed as required by the laws of this state. The team  
may also include clergy and such volunteers as are necessary to  
provide hospice services. A registered nurse licensed pursuant to  
the laws of this state shall be employed by the hospice as a patient

1 care coordinator to supervise and coordinate the palliative and  
2 supportive care for patients and families provided by a hospice  
3 team. Nothing in this section shall be construed as to require a  
4 hospice to employ a certified home health aide in the provision of  
5 hospice services so long as the hospice employs a certified nurse  
6 aide.

7 C. 1. An up-to-date record of the services given to the  
8 patient and family shall be kept by the hospice team. Records shall  
9 contain pertinent past and current medical, nursing, social, and  
10 such other information that is necessary for the safe and adequate  
11 care of the patient and the family. Notations regarding all aspects  
12 of care for the patient and family shall be made in the record.  
13 When services are terminated, the record shall show the date and  
14 reason for termination.

15 2. Information received by persons employed by or providing  
16 services to a hospice, or information received by the State  
17 Department of Health through reports or inspection shall be deemed  
18 privileged and confidential information and shall not be disclosed  
19 to any person other than the patient or the family without the  
20 written consent of that patient, the patient's guardian or the  
21 patient's family.

22 D. 1. A hospice program shall have a clearly defined and  
23 organized governing body, which has autonomous authority for the  
24 conduct of the hospice program.

1        2. The hospice program shall have an administrator who shall be  
2 responsible for the overall coordination and administration of the  
3 hospice program.

4        SECTION 2. This act shall become effective November 1, 2026.

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