



uLegislate

The Nevada Senate's Simulation Experience

INTRODUCTORY REMARKS FOR BILL SPONSOR

Prepared for uLegislate

Note: Use of this speech is optional in the uLegislate simulation. If you would like to make your own arguments in support of the piece of legislation, please do! But if you would like some help, we have written these introductory remarks, which you can make immediately after the Secretary of the Senate reads the bill and the President asks for remarks.

SENATE BILL 165

Makes various changes to provisions governing prescribing, dispensing and administering controlled substances designed to end the life of a patient.

INTRODUCTORY REMARKS:

Thank you, (Mr./Madam) President. This bill authorizes a patient to request that his or her physician prescribe a controlled substance designed to end the patient's life under certain circumstances. Any interaction between a patient and health care providers relating to such a controlled substance must occur in person, and only the patient who is prescribed the drug may administer it. Additionally, the patient may revoke the request for such a drug at any time.

The bill outlines requirements concerning the manner in which a patient may request, and a physician may prescribe and dispense, a drug designed to end the patient's life. An attending physician who prescribes such a drug must include certain information in the patient's medical record and must provide certain information to the Division of Public and Behavioral Health of the Department of Health and Human Services so that the Division can compile a required annual report containing the information.

Senate Bill 165 also exempts certain health care providers from professional discipline, provides immunity from civil and criminal liability, and clarifies that they do not violate any applicable standard of care for assisting a patient with acquiring a drug designed to end his or her life. A physician is not required to prescribe, and a pharmacist is not required to fill, a prescription for or dispense such substances. The owner or operator of a health care facility may prohibit an employee, independent contractor, or other person who provides services from providing such end-of-life services while on the premises of the facility.

A death resulting from the self-administration of a controlled substance designed to end a patient's life does not constitute suicide or homicide when done in accordance with this bill, and a patient's death certificate must list his or her terminal condition as the cause of death.

Finally, the bill prohibits insurers from: (1) refusing to sell, provide, or issue a policy of life insurance or annuity contract or from charging a higher rate because a person makes or revokes a request for a drug designed to end the patient's life or self-administers such a drug; and (2) conditioning life insurance benefits or the payment of claims based on any of these actions.