

A REQUEST TO THE INTERIM LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE TO ESTABLISH AN END-OF-LIFE OPTIONS TASK FORCE TO EVALUATE STRATEGIES FOR IMPLEMENTATION OF PROCESSES NECESSARY AND SAFEGUARDS REQUIRED IN ORDER TO INCLUDE AID-IN-DYING AS A MEDICAL PRACTICE GOVERNED BY THE STATE OF NEW MEXICO.

WHEREAS, Article II Section 4 of the New Mexico Constitution explicitly reserves inherent and inalienable rights for the individual; and

WHEREAS, the New Mexico Supreme Court [*decision still pending as of May 18, 2016*] found that aid-in-dying for a terminally ill, decisionally capable adult with a prognosis of six months to live is... [*a fundamental right protected by the New Mexico Constitution*]; and

WHEREAS, the Uniform Health-Care Decisions Act authorizes competent adults to make their own healthcare decisions and provide advanced healthcare directives, including the decision to withhold or withdraw care to hasten death; and

WHEREAS, aid-in-dying, a medical practice authorized in five states, enjoys significant citizen support in the state of New Mexico; and

WHEREAS, medical education programs on aid-in-dying attract a significant number of healthcare professionals from all over the state demonstrating the need for legal clarification for this medical practice in the state of New Mexico; and

WHEREAS, 80% of New Mexican citizens polled in 2012 agree that the decision of a terminally ill person to receive medication to bring about their own death is a personal decision between the patient and their doctor; and

WHEREAS, a mentally capable and terminally ill adult person should be permitted to die with a maximum of self-determination and functional capacity and a minimum of pain and suffering;

NOW, THEREFORE, BE IT RESOLVED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO that the interim legislative health and human services committee create an end-of-life options task force to evaluate strategies for the inclusion of aid-in-dying in existing legal, regulatory and professional standards designed to protect patients and healthcare providers from reprisal for good faith actions under medical standards of care; and

BE IT FURTHER RESOLVED that the dean of the New Mexico State University College of Health and Social Services chair, appoint members, and convene the task force; and

BE IT FURTHER RESOLVED that the members of this task force may include:

- A. family caregiver of a terminally ill person;
- B. family member of a deceased terminally ill person;
- C. physicians actively involved in end-of-life care, such as representatives from the following specialties: oncology, neurology, psychiatry, palliative care and family medicine;
- D. allied health professionals actively involved in end-of-life care, such as representatives of the following: pharmacy, psychology, nurse case management, hospice, social work, or advance practice nursing;
- E. hospice organization, assisted living facility and hospital administrator(s);

F. a representative from the New Mexico Medical Board and one representative from the Pharmacy Board of New Mexico;

G. representatives from interested nonprofit groups, such as the following: Compassion & Choices, American Association of Retired People (AARP), Alliance of Retired Americans, All Families Matter Coalition; and

H. a representative from the New Mexico Department of Health; and

BE IT FURTHER RESOLVED that the duties of the task force include:

A. the development of recommendations on action needed to include aid-in-dying in existing legal, regulatory and professional standards based on assessment of existing standards of care and clinical practice guidelines; and

B. the assessment and proposal for processes to ensure a patient's right to know, a provider's right to refuse, and the provision of timely, patient-centered care at the end of life; and

BE IT FURTHER RESOLVED that the task force report its findings and recommendations to the department of health, the legislative health and human services committee and the governor prior to the first session of the XXth legislature; and

BE IT FURTHER RESOLVED that copies of this memorial be transmitted to the secretary of health.