

TESTIMONY
SENATE BILL 2226 – HOSPICE OF THE RED RIVER VALLEY
SENATE INDUSTRY, BUSINESS AND LABOR COMMITTEE
SENATOR JERRY KLEIN, CHAIRMAN
FEBRUARY 1, 2021

Chairman Klein and distinguished members of the Senate Industry, Business and Labor Committee, for the record my name is Stephen P. Astrup, Regulatory and Project Counsel for Hospice of the Red River Valley (“HRRV”). I am here today to provide testimony offering information related to hospice and hospice care. As to the Proposed Amendment to Senate Bill 2226, our organization, HRRV, remain neutral.

HRRV is a nonprofit community-based hospice that serves patients in both North Dakota and northwestern Minnesota, covering an area of more than 40,000 square miles. As an organization, we are committed to providing quality care to our patients at the right time and in the right place. We are a certified hospice program by the Centers for Medicare and Medicaid Services and licensed by the North Dakota Department of Health. As a certified and licensed hospice program, we must provide all care related to a patient’s terminal condition, including nursing services, case management, medication management, and medical equipment coordination. Beyond these medical services, we also provide bereavement services, chaplaincy/spiritual services, social services, hospice aide services, and coordinate a staff of volunteers.

While hospice utilization varies across the United States, North Dakota continually ranks near the bottom. Together with our North Dakota Hospice and Palliative Care Organization partners, we have worked tirelessly to reduce health disparities in North Dakota as it relates to hospice care and services.

Over the past decade or more, our hospice patient population has changed drastically. We are now serving more individuals residing in nursing homes and assisted living facilities – in addition to our traditional home-based populations. We serve patients and families across North Dakota’s comprehensive continuum of care and support patients and families right of choice – including where a patient wishes to call home. Additionally, hospice organizations must be fiercely protective of the quality of care they are providing to patients. Advancing legislation allowing the operation of a residential end-of-life facility requires hospice stakeholders to thoroughly understand the rules and regulations necessary for the operation of a facility of this type. It is necessary North Dakota hospice organizations are provided the opportunity to assist in the development of the rules and regulations governing residential end-of-life facilities to ensure the safety of patients, and quality of care the patients are receiving.

This concludes my testimony. I am happy to answer any questions you may have.