**§8621. Definitions**

As used in this chapter, unless the context otherwise indicates, the following terms have the following meanings. [PL 1993, c. 692, §1 (NEW).]

**1. Bereavement services.**  "Bereavement services" means emotional support services related to the death of a family member, including, but not limited to, counseling, provision of written material, social reorientation and group support for up to one year following the death of the client who was terminally ill. Bereavement services must be consistent with the bereavement care plan.

[PL 1993, c. 692, §1 (NEW).]

**2. Care plan.**  "Care plan" means a written service delivery plan that the interdisciplinary team, in conjunction with the client, shall develop to reflect the changing care needs of the client. A care plan must specify what hospice services are needed and how they will be delivered.

[PL 1993, c. 692, §1 (NEW).]

**3. Client.**  "Client" means the person who is receiving the hospice services.

[PL 1993, c. 692, §1 (NEW).]

**4. Council.**  "Council" means the Maine Hospice Council established by section 8611.

[PL 1993, c. 692, §1 (NEW).]

**5. Direct service provider.**  "Direct service provider" means employees or volunteers who provide hospice services directly to a client.

[PL 1993, c. 692, §1 (NEW).]

**6. Durable health care power of attorney.**  "Durable health care power of attorney" has the same meaning as "power of attorney for health care" contained in Title 18‑C, section 5‑802.

[PL 2017, c. 402, Pt. C, §73 (AMD); PL 2019, c. 417, Pt. B, §14 (AFF).]

**7. Family.**  "Family" means a spouse, primary caregiver, biological relatives and individuals with close personal ties to the client.

[PL 1993, c. 692, §1 (NEW).]

**8. Governing body.**  "Governing body" means the entity that establishes policy and is legally responsible for the overall operation of a hospice program.

[PL 1993, c. 692, §1 (NEW).]

**9. Hospice philosophy.**  "Hospice philosophy" means a philosophy of palliative care for individuals and families during the process of dying and bereavement. "Hospice philosophy" is life affirming and strengthens the client's role in making informed decisions about care. "Hospice philosophy" stresses the delivery of services in the least restrictive setting possible and with the least amount of technology necessary by volunteers and professionals who are trained to help clients with the physical, social, psychological, spiritual and emotional needs related to terminal illness.

[PL 1993, c. 692, §1 (NEW).]

**10. Hospice program or hospice provider.**  "Hospice program" or "hospice provider" means a distinct, clearly recognizable entity that exists to provide hospice services.

[PL 1993, c. 692, §1 (NEW).]

**11. Hospice services.**  "Hospice services" means a range of interdisciplinary services provided on a 24-hours-a-day, 7-days-a-week basis to a person who is terminally ill and that person's family. Hospice services must be delivered in accordance with hospice philosophy.

[PL 1993, c. 692, §1 (NEW).]

**12. Interdisciplinary team.**  For a hospice providing comprehensive services, "interdisciplinary team" means a group comprised of at least a medical director, a licensed nurse, a licensed social worker, a pastoral or other counselor and a volunteer coordinator or representative. For a volunteer hospice program, "interdisciplinary team" means a regularly scheduled case conference as defined by program policy. The client, and the client's family if the client desires, must be given the opportunity and encouraged to attend interdisciplinary team meetings.

[PL 1993, c. 692, §1 (NEW).]

**13. Medical director.**  "Medical director" means a licensed physician who oversees the medical components of hospice services and serves on the interdisciplinary team.

[PL 1993, c. 692, §1 (NEW).]

**14. Nurse supervisor.**  "Nurse supervisor" means a licensed registered nurse with education, experience and training in hospice nursing care who is designated by the program director to oversee nursing services for the hospice program.

[PL 1993, c. 692, §1 (NEW).]

**15. Primary physician.**  "Primary physician" means the physician identified by the client or by the person authorized to make decisions for the client pursuant to a durable health care power of attorney.

[PL 1993, c. 692, §1 (NEW).]

**16. Program director.**  "Program director" means the person designated by the governing body of a hospice program as responsible for the day-to-day operations of the program.

[PL 1993, c. 692, §1 (NEW).]

**17. Terminally ill.**  "Terminally ill" means that a person has a limited life expectancy in the opinion of the person's primary physician or the medical director.

[PL 1993, c. 692, §1 (NEW).]

**18. Volunteer.**  "Volunteer" means a trained individual who works for a hospice program without compensation.

[PL 1993, c. 692, §1 (NEW).]

**19. Volunteer hospice program.**  "Volunteer hospice program" means a hospice program that provides all direct patient care at no charge.

[PL 1993, c. 692, §1 (NEW).]

SECTION HISTORY

PL 1993, c. 692, §1 (NEW). PL 2009, c. 292, §4 (AMD). PL 2009, c. 292, §6 (AFF). PL 2017, c. 402, Pt. C, §73 (AMD). PL 2017, c. 402, Pt. F, §1 (AFF). PL 2019, c. 417, Pt. B, §14 (AFF).

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