



End Of Life Options Act, [SB 239](#)

The legislation, [SB 239](#), allows a terminally ill, mentally capable adult patient, with a prognosis of six months or less, suffering from an incurable disease, to obtain a prescription for medicine they may voluntarily take to peacefully and compassionately end their life.

Criteria and Safeguards

Medical aid in dying is a trusted and time-tested medical practice that allows a terminally ill, mentally capable adult with a prognosis of six months or less to live to request from their healthcare provider a prescription for medication they can decide to self-ingest to die peacefully in their sleep. Medical aid in dying is part of comprehensive end-of-life care alongside hospice and palliative care.

Medical Aid in Dying is authorized in 10 states, including Montana and Colorado; however, dying Nevadans do not have access to this compassionate care option.

The bill also requires the following:

- Providers must inform the requesting individual about all of their end-of-life care options, including comfort care, hospice and pain control.
- No physician, health care provider or pharmacist is required to participate.
- Patients can withdraw their request for medication, not take the medication, or change their mind at any point.
- Patients must be able to self-administer the medication.
- A patient's providers may refer the patient for a mental health evaluation to ensure the patient's capacity to make an informed decision.
- The law has protections to prevent patient coercion.
- Life insurance payments cannot be denied to the families of those who use the law.
- Healthcare providers who participate and comply with all aspects of the law are given civil and criminal immunity.
- The underlying terminal illness will be listed as the cause of death on the death certificate.