July 23, 2018

U.S. House of Representatives
Washington, DC 20515

Dear Representative,

On behalf of the Catholic Health Association of the United States (CHA), the national leadership organization of more than 2,200 Catholic health care systems, hospitals, long-term care facilities, sponsors, and related organizations, I am writing to request your support for H.R. 1676, the Palliative Care and Hospice Education and Training Act, when the bill comes to the floor for a vote today. H.R. 1676 is bipartisan legislation sponsored by Representatives Tom Reed (R-NY), Eliot Engel (D-NY) and Buddy Carter (R-GA).

Palliative care is focused on providing patients with relief from the symptoms, pain and stress of a serious illness - whatever the diagnosis – with the goal of improving quality of life for both the patient and the family. It is provided by a team of palliative care-trained specialists, including a physician, nurse, social worker, chaplain and other care specialists, who work with a patient's physician to provide an extra layer of support and care coordination. Palliative care is appropriate at any age and at any stage in a serious illness, and can be provided together with curative treatment.

Palliative care has been shown to lower health care costs through reduced emergency room visits, time in the hospital and use of intensive care services. Studies also show that early access to palliative care for seriously ill patients improves their quality of life and in some cases even prolongs it. This is achieved through care planning based on open, honest communication about severity of illness and medical treatment options; effective pain and symptom control; and highly coordinated care that addresses the physical, emotional, social and spiritual aspects of dealing with serious illness.

While there has been considerable growth in the number of hospital-based palliative care programs across the United States, barriers in three key areas currently prevent full access to and availability of palliative care for all patients and families facing serious or life-threatening illness: insufficient number of trained health care professionals; insufficient research funding to build the knowledge base that supports clinical practice in pain and symptom management, communication skills and care coordination; and lack of awareness among patients and health care professionals of what palliative care is and when it should be provided.

This bill would address the barriers by:

- Establishing a Palliative Care and Hospice Education Center to improve the training of interdisciplinary health professionals in palliative care;
- Authorizing grants to schools of medicine, teaching hospitals and GME programs to train physicians (including residents, trainees, and fellows) who plan to teach palliative medicine;
o Establishing a program to promote the career development of physicians who are board certified or board eligible in Hospice and Palliative Medicine;

o Establishing fellowship programs within the new Palliative Care and Hospice Education Centers to provide short-term intensive courses focused on palliative care workforce development and grants through career incentive awards for eligible health professionals who agree to teach or practice in the field of palliative care for at least 5 years; and

o Providing for the establishment of a national campaign to inform patients, families and health professionals about the benefits of palliative care and the services that are available to support patients with serious or life-threatening illness.

These important building blocks will help ensure that all patients facing serious illnesses have access to high quality palliative care.

As our country looks for ways to improve health care quality while reducing costs, expanding access to high quality palliative care is one way to help us reach these goals. I hope you will vote in support of this legislation.

Sincerely,

Sr. Carol Keehan, DC
President and CEO