

July 21, 2015

The Honorable Eliot Engel  
2161 Rayburn House Office Building  
U.S. House of Representatives  
Washington, DC 20515

The Honorable Tom Reed  
1504 Longworth House Office Building  
U.S. House of Representatives  
Washington, DC 20515

Dear Representative Engel and Representative Reed:

The undersigned organizations write to express our support for H.R. 3119, the Palliative Care and Hospice Education and Training Act (PCHETA). This legislation will make a difference in the lives of millions of patients living with serious or life threatening illness and their caregivers.

Despite a high intensity of medical treatment, many seriously ill individuals still experience troubling symptoms, unmet psychological and personal care needs, fragmented care, poor communication with their health care providers, and enormous strains on their family caregivers. However, numerous studies have shown that adding palliative care can improve pain and symptom control, quality of life, and patient and family satisfaction.

Palliative care is an interdisciplinary model of care focused on relief of the pain, stress and other debilitating symptoms of serious illness, such as cancer, cardiac disease, respiratory disease, kidney failure, Alzheimer's, AIDS, ALS, and MS. Its goal is to relieve suffering and provide the best possible quality of life for patients and their families. Palliative care can be offered simultaneously with life-prolonging and curative therapies for persons living with serious, complex, and eventually terminal illness and includes hospice care. By its very nature, palliative care is patient-centered care — translating patient goals to appropriate treatments.

We appreciate your leadership in recognizing the significant role palliative care and hospice can play in creating lasting change across the health care system. With PCHETA's focus on expanding the palliative care workforce, promoting awareness of the benefits of palliative care among patient and providers, and improving the evidence base for this care, you have demonstrated a strong commitment to addressing key barriers to palliative care access for the growing number of Americans with serious or life-threatening illness.

Delivery of high-quality palliative care cannot take place without sufficient numbers of health care professionals with appropriate training and skills. Students graduating from medical school today have very little, if any, training in the core precepts of pain and symptom management, advance care planning, communication skills, and care coordination for patients with serious or life-threatening illness. Further, there is a large gap between the number of health care professionals with palliative care training and the number required to meet the needs of the expanding population of seriously ill patients. For example, 2010 estimates by the American Academy of Hospice and Palliative Medicine's Workforce Task Force calls for 6,000 or more full time equivalents to serve current needs in hospice and palliative care programs. At maximum capacity, however, the current system would produce only about 5,300 new hospice and palliative medicine certified physicians over the next 20 years. PCHETA would go a long way towards bridging this gap by establishing education centers and career incentive awards to improve the training of doctors, nurses, physician assistants, social workers and other health professionals in palliative care.

PCHETA also aims to strengthen clinical practice and improve health care delivery for patients living with serious or life-threatening illness, as well as their families, by directing funding toward palliative care

research. Research funding for palliative care and pain and symptom management comprises less than 0.1 percent of the National Institutes of Health annual budget. PCHETA would direct an expansion and intensification of research in these important areas.

At the same time, more must be done to ensure patients and providers are aware of the benefits of palliative care. According to the Institute of Medicine, there is a “need for better understanding of the role of palliative care among both the public and professionals across the continuum of care.” PCHETA would direct the implementation of a national education and awareness campaign so that patients, families, and health professionals understand the essential role of palliative care in ensuring high-quality care for individuals facing serious or life threatening illness.

Thank you again for your support and leadership on this important issue. We look forward to working with you toward the passage of this legislation.

Sincerely,

American Academy of Hospice and Palliative Medicine  
American Academy of Pain Management  
American Cancer Society Cancer Action Network  
American College of Surgeons Commission on Cancer  
American Geriatrics Society  
American Heart Association / American Stroke Association  
American Psychosocial Oncology Society  
Association of Oncology Social Work  
Association of Professional Chaplains  
C-Change  
Cancer Support Community  
Catholic Health Association of the United States  
Center to Advance Palliative Care  
Health Care Chaplaincy Network  
Hospice and Palliative Nurses Association  
Motion Picture & Television Fund  
National Association of Social Workers  
National Coalition for Hospice and Palliative Care  
National Hospice and Palliative Care Organization  
National Palliative Care Research Center  
Oncology Nursing Society  
Social Work Hospice & Palliative Care Network  
St. Baldrick’s Foundation  
Supportive Care Coalition  
Trinity Health  
Visiting Nurse Associations of America