The Honorable Tammy Baldwin 141 Hart Senate Office Building United States Senate Washington, DC 20510 The Honorable Shelley Moore Capito 172 Russell Senate Office Building United States Senate Washington, DC 20510

RE: Support for S. 2243 the Palliative Care and Hospice Education and Training Act (PCHETA)

Dear Senators Baldwin and Capito:

The undersigned organizations write to express our support for the Palliative Care and Hospice Education and Training Act (PCHETA), S. 2243. This bipartisan 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 interdisciplinary palliative care workforce, promoting awareness of the benefits of palliative care among patients 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, nursing or health care professional schools 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. 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.

We appreciate your continued leadership on this important issue and look forward to working with you to advance S. 2243 in the 118th Congress.

Sincerely,

Alzheimer's Association

Alzheimer's Impact Movement

American Academy of Hospice and Palliative

Medicine

American Academy of Pediatrics

American Academy of PAs

American Cancer Society Cancer Action Network

American College of Surgeons American Geriatrics Society American Heart Association

American Psychological Association

American Psychosocial Oncology Society

Association for Clinical Oncology
Association of Oncology Social Work

Association of Pediatric Hematology/Oncology Nurses

Association of Professional Chaplains

The California State University Shiley Haynes

Institute for Palliative Care

Cambia Health Solutions
Cancer Support Community

CaringKind

Catholic Health Association of the United States

Center to Advance Palliative Care Children's National Health System

Coalition for Compassionate Care of California

Colorectal Cancer Alliance

Compassus

Courageous Parents Network

The George Washington Institute for Spirituality

and Health GO₂ for Lung Cancer

HealthCare Chaplaincy Network

Hospice Action Network

Hospice and Palliative Nurses Association

LeadingAge

Leukemia & Lymphoma Society Motion Picture & Television Fund National Alliance for Caregiving

National Association for Home Care & Hospice

National Brain Tumor Society

National Coalition for Cancer Survivorship

National Coalition for Hospice and Palliative Care

National Comprehensive Cancer Network National Hospice and Palliative Care

Organization

National Palliative Care Research Center

National Partnership for Healthcare and Hospice

Innovation

National Patient Advocate Foundation

National POLST Paradigm Oncology Nursing Society

Palliative Care Quality Collaborative Pediatric Palliative Care Coalition

PAs in Hospice and Palliative Medicine

Prevent Cancer Foundation

ResolutionCare, a Vynca company

Social Work Hospice & Palliative Care Network Society of Pain and Palliative Care Pharmacists

St. Baldrick's Foundation

Supportive Care Matters

Susan G. Komen Trinity Health

West Health Institute

State Associations Supporting PCHETA

Arizona Association for Home Care

Arizona Hospice & Palliative Care Organization

Association for Home & Hospice Care of North Carolina

California Hospice and Palliative Care Association (CHAPCA)

California Association for Health Services at Home

The Connecticut Association for Healthcare at Home

The Home Care Alliance of Massachusetts

Granite State Home Health & Hospice Association (NH)

Home Care and Hospice Association of Colorado

Home Care Association of Florida

HomeCare Association of Louisiana

Home Care Association of New York State

Home Care Association of Washington

Home Care & Hospice Alliance of Maine

Home Care & Hospice Association of New Jersey

Homecare & Hospice Association of Utah

Illinois HomeCare & Hospice Council

Indiana Association for Home and Hospice Care

Kentucky Home Care Association

LeadingAge Ohio

Maryland-National Capital Homecare Association

Michigan HomeCare and Hospice Association

Minnesota Home Care Association

Missouri Alliance for Home Care

Nebraska Association for Home Healthcare and Hospice

New Mexico Association for Home & Hospice Care

Ohio Council for Home Care & Hospice

Oregon Association for Home Care

Pennsylvania Homecare Association

South Carolina Home Care & Hospice Association

Tennessee Association for Home Care

Texas Association for Home Care & Hospice

The Virginia Association for Home Care and Hospice

Wisconsin Association for Home Health Care

Wisconsin Hospice and Palliative Care Association