

END OF LIFE PROVISIONS IN HEALTH CARE CHOICES ACT (H.R. 3200)

In the current discussions on health care reform there has been some unfortunate misinformation promulgated. It is **NOT** accurate to say that Medicare beneficiaries will be required to participate in mandatory consultations on how they should die.

The accurate information regarding this topic is as follows:

- H.R. 3200, America's Affordable Health Choices Act, which is being considered in the House, includes a provision to improve the Medicare program by authorizing reimbursement for one Advance Care Planning Consultation every five years. The consultation is **NOT** mandatory. Rather, Medicare would provide reimbursement if beneficiaries voluntarily chose to meet with a health care practitioner for information about advance directives, including living wills and durable powers of attorney; the continuum of end-of-life services and supports available, such as palliative care and hospice; and orders regarding life sustaining treatment. Consultations could be conducted more frequently if there is a significant change in the health condition of an individual.
- The purpose of Sec. 1233 of H.R. 3200 is to help people discuss their views regarding end-of-life care with their families and health care providers before the need for such care arises and to learn what they must do to ensure that their wishes are carried out if they become incapacitated. The Advance Care Planning Consultation, which would be paid for by Medicare, is intended to improve the quality of end-of-life care provided to beneficiaries. These meetings between patients and doctors would be completely voluntary and no one would be required to complete an advance care directive or living will.

The Tompkins County Office for the Aging supports the idea that information for beneficiaries regarding end-of life care, both for themselves and their family members can only help improve the quality of care they receive as they near the end of their lives.