

March 28, 2011

TO: Representative Ryan I. Yamane
Chair, Committee on Health

Representative Dee Morikawa
Vice Chair, Committee on Health

FROM: Representative Marilyn Lee

SUBJECT: Testimony in Support of HCR 25, HCR 68/HR 61, and HCR 55/HR 48

I am in support of HCR 25, HCR 68/HR 61, and HCR 55/HR 48. According to Dr. R. Sean Morrison, Hermann Merkin Professor of Palliative Care at the Mount Sinai School of Medicine, "Palliative care is specialized healthcare for anyone who is diagnosed with a serious and life-threatening illness, starting when they get the diagnosis, regardless of the prognosis."¹ Palliative care means patient and family centered care that optimizes quality of life by anticipating, preventing, and treating suffering. Palliative care throughout the continuum of illness involves addressing physical, intellectual, emotional, social, and spiritual needs to facilitate patient autonomy, access to information, and choice.

These days, if you make it to 65, you will probably live beyond 82. The numbers of older citizens and people living with chronic diseases are increasing. Palliative care is often the most desirable and effective care for many of these people as well as a cost effective choice.

- . Palliative care improves the quality of life.
- . Growing bodies of research support the use of palliative care.
- . Palliative care is recognized as a medical sub-specialty by internal medicine and family medicine boards.
- . Palliative care supports physicians with guidance in how to deal with a patient's need for a plan to proceed with their illness—helping them set goals and suggesting bedside management of symptoms.
- . Palliative care is usually cost effective or cost neutral.

¹ Morrison, R. Sean. "Palliative Care: A Novel Solution to the Healthcare Crisis." *Syracuse University Maxwell School of Citizenship and Public Affairs Center for Policy Research Policy Brief*, Syracuse University. No. 43/2010. <http://www-cpr.maxwell.syr.edu> (28 March 2011).

People have a right to know about palliative care. Standards, however, that apply to specific situations need to be established. National Health Care reform included recommendations for the National Institutes of Health to provide more research funding for palliative care. Palliative care is not just about better end of life care, but it is about improving care for people with serious or life-threatening illness throughout their lives.

Famous science fiction writer Isaac Asimov once said, "Life is pleasant. Death is peaceful. It's the transition that's troublesome." Palliative care can ease this transition.

I urge the members of the committee to support these resolutions.



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March 27, 2011

Committee on Health
Representative Ryan Yamane, Chair
Representative Dee Morikawa, Vice Chair

Hearing:

March 29, 2011, 9:00 a.m.
Hawaii State Capitol, Conference Rm. 329

RE: HCR 25 – REQUESTING THE AUDITOR TO CONDUCT AN IMPACT ASSESSMENT REPORT ON LEGISLATION. MANDATING COVERAGE OF PALLIATIVE CARE.

Testimony in Strong Support

Chair Yamane, Vice Chair Morikawa and members of the Committee on Health:
On behalf of the American Cancer Society Hawaii Pacific Inc., thank you for the opportunity to offer this testimony and comments in strong support of resolution HCR25 which requests the Hawaii State Auditor to conduct a sunrise assessment regarding a comprehensive palliative care health insurance benefit.

For over 60 years, the American Cancer Society in Hawaii has been leading the fight against cancer in Hawaii. Although we have made much progress in saving lives through early detection and new cutting edge treatments as a result of on going research, the reality is we don't win them all.

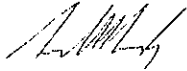
Palliative care is an essential component of cancer care. Palliative care helps patients transition from curative treatment to end-of-life care. The palliative care teams can help patients and their loved ones prepare for physical changes that may occur near the end of life and how to best address symptom management for that stage of care. The team can also help patients cope with the different thoughts and emotional issues that arise, such as, worries about leaving loved ones behind, reflections about their legacy and relationships, or reaching closure with their life. In addition, palliative care can support family members and loved ones emotionally and with issues, such as, when to withdraw cancer therapy, grief counseling, and transition to hospice.

Finally, the eventual passage of a palliative care benefit will also alleviate financial worries that many cancer patients have. It is well documented that the burden of out-of-pocket and total expenditures is heaviest for cancer patients compared to individuals without cancer. Many of our cancer patients in Hawaii are low-income, elderly, uninsured or underinsured.

We strongly believe that providing health insurance coverage for palliative care will greatly improve and enhance care for cancer patients.

Thank you for the opportunity to offer this testimony in strong support of HCR 25.

Respectfully,

A handwritten signature in black ink, appearing to read "G. Massengale". The signature is written in a cursive style with a prominent initial "G" and a long, sweeping underline.

George S. Massengale, JD
Director of Government Relations

**Testimony by:
Ann Frost, PT
HCR25, Requesting the Auditor to Conduct An Impact
Assessment Report on Legislation Mandating Coverage of
Palliative Care
Hse HLT Hearing, Tuesday, March 29, 2011
Room 329 – 9:00 am**



Position: Support

Chair Yamane, and Members of the Hse HLT Committee:

I am Ann Frost, P.T., President of HAPTA and member of HAPTA's Legislative Committee. HAPTA represents 250 physical therapists and physical therapist assistants employed in hospitals, nursing homes, the Armed Forces, the Department of Education and Department of Health (DOH) systems, and private clinics throughout our community. Physical therapists work with everyone, from infants to the elderly, to restore and improve function and quality of life. We are part of the spectrum of care for Hawaii, and provide rehabilitative services for infants and children, youth, adults and the elderly. Rehabilitative services are a vital part of restoring optimum function from neuromusculoskeletal injuries and impairments.

HAPTA believes that the Auditor's review and recommendations for mandating coverage for palliative care will facilitate further discussions in the community about palliative care and further health insurance coverage.

As physical therapists, we are part of the team of clinicians that provide care to patients with severe chronic pain or acute pain originating from cancer or noncancerous conditions. As such, we offer our expertise whenever it is needed.

I can be reached at (808) 382-2655 if you have any questions. Thank you for the opportunity to testify.