

June 4, 2013

Honorable Eliot Engel
U.S. House of Representatives
Washington, DC 20515

Honorable Ron Wyden
United States Senate
Washington, DC 20510

Honorable Tom Reed, II
U.S. House of Representatives
Washington, DC 20515

Dear Representative Engel, Representative Reed and Senator Wyden:

The undersigned organizations write to express our support for **H.R. 1339/S. 641, the Palliative Care and Hospice Education and Training Act (PCHETA)**.

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. Recent studies have demonstrated that high-quality palliative care and hospice care not only improve quality of life and patient and family satisfaction but can also prolong survival. Furthermore, palliative care achieves these outcomes at a lower cost than usual care by helping patients to better understand and address their needs, choose the most effective treatments, and avoid unnecessary/unwanted hospitalizations and interventions. However, **delivery of high-quality palliative care cannot take place without sufficient numbers of health care professionals with appropriate training and skills.**

Unfortunately, health care providers need better education about palliative care and hospice. 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 suggest an additional 8,000 to 10,000 physicians are required just to meet current needs — double the number currently in practice in this specialty. This does not take into account future expansion of need due to population growth and aging or increasing acceptance of palliative and hospice care among consumers and providers.

We applaud your efforts to expand interdisciplinary training in palliative and hospice care and help address this workforce gap. We especially appreciate that the Palliative Care and Hospice Education and Training Act (PCHETA) embraces the team approach of palliative care and hospice by specifically including nursing, social work, psychology, pharmacy and other health care disciplines.

We look forward to working with you toward the passage of this legislation, to ensure patients and families who are facing serious or life-threatening illness will have access to the palliative care and hospice services necessary to maximize their quality of life.

Sincerely,

American Cancer Society Cancer Action Network (ACS CAN)

American Academy of Hospice and Palliative Medicine (AAHPM)

American Academy of Pain Management

American Childhood Cancer Organization

American Osteopathic Association (AOA)

American Society for Pain Management Nursing (ASPMN)

American Society of Clinical Oncology

Association of Oncology Social Work

Cancer Support Community (CSC)

C-Change

Center to Advance Palliative Care (CAPC)

Hospice and Palliative Nurses Association (HPNA)

LIVESTRONG Foundation

National Alliance for Caregiving

National Association of Social Workers (NASW)

National Coalition for Cancer Survivorship

National Comprehensive Cancer Network (NCCN)

National Hospice and Palliative Care Organization

National Palliative Care Research Center (NPCRC)

Oncology Nursing Society

Society for Social Work Leadership in Health Care

Supportive Care Coalition

The Catholic Health Association of the United States