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## Opponents Distort Health Care Debate

***New legislation will empower – not force – seniors to talk with their doctors at the end-of- life***

Anti-choice extremists and their allies in Congress are attacking this critical provision, creating doubt and confusion by distorting legislation that would empower seniors to talk with their doctors about end-of-life care choices. To create fear, these opponents claim section 1233 of House Bill 3200 will promote euthanasia. ***Nothing could be further from the truth.***

**Distortion:** The government will force seniors to seek end-of-life counseling, and require them to sign a directive they would not otherwise want.

**Truth:** Patients are free to choose for themselves whether or not to talk to their doctor about end-of-life care. And they are free to embrace any level of end-of-life care - from "extraordinary measures" to hospice, in keeping with their personal wishes and values.

**Distortion:** The government will pressure or encourage doctors to counsel their elderly patients about euthanasia.

**Truth:** Out of more than 1500 words in the bill, not a single one references suicide, aid-in-dying, or euthanasia.

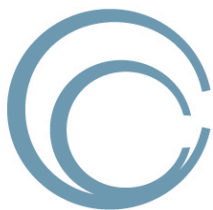
**Distortion:** The legislation mandates that doctors counsel seniors about ending their life every five years.

**Truth:** No counseling of any kind is mandated. The bill gives all the power to patients, so that if they choose to consult with their doctor about end-of-life matters, their doctor will give them the quality time they need, knowing that his or her time will be covered by Medicare.

AARP Executive Vice President, John Rother, has responded to these attacks as well, saying the criticism "misinterprets legislation that would actually help empower individuals and doctors to make their own choices on end-of-life care. This measure would not only help people make the best decisions for themselves, but also better ensure that their wishes are followed. To suggest otherwise is a gross, and even cruel, distortion - especially for any family that has been forced to make the difficult decisions on care for loved ones approaching the end of their lives."

Most Americans trust their doctors and trust seniors to make their own decisions. Pew Research Center surveyed adults nationwide in November 2005, asking: "Do you approve or disapprove of laws that let PATIENTS decide about being kept alive through medical treatment?" An overwhelming 84% responded YES.

***Americans value choice and this bill is about having choices.***



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Many people know the tragedy that can ensue when people cannot speak for themselves, when family members and others fight over treatment options. This bill encourages people to make their wishes clear, in consultation with a physician, in the clear light of day.

***We need a healthcare system that pays doctors to talk with patients about all available treatment options at the end of life - not one that pushes these conversations aside because doctors can't bill for them.***

**Here's what the bill actually says:**

HR 3200, Sec. 1233 "Advance care planning consultation means a consultation between the individual and a practitioner...regarding advance care planning, if, subject to paragraph (3), the individual involved has not had such a consultation within the last 5 years. Such consultation shall include the following:

- (A) An explanation by the practitioner of advance care planning, including key questions and considerations, important steps, and suggested people to talk to.
- (B) An explanation by the practitioner of advance directives, including living wills and durable powers of attorney, and their uses.
- (C) An explanation by the practitioner of the role and responsibilities of a health care proxy.
- (D) The provision by the practitioner of a list of national and State-specific resources to assist consumers and their families with advance care planning, including the national toll-free hotline, the advance care planning clearinghouses and State legal service organizations (including those funded through the Older Americans Act of 1965).
- (E) An explanation by the practitioner of the continuum of end-of-life services and supports available, including palliative care and hospice, and benefits for such services and supports that are available under this title.

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