September 15, 2021

The Honorable Charles Schumer   The Honorable Nancy Pelosi
Majority Leader     Speaker of the House
United States Senate     U.S. House of Representatives
Washington, DC 20510    Washington, DC 20515

RE:  Request to address palliative care and hospice workforce in reconciliation

Dear Majority Leader Schumer and Speaker Pelosi:

The undersigned organizations write to express our enthusiastic support for Senator Tammy Baldwin’s and Representative Yvette Clarke’s request that the upcoming reconciliation package include efforts to grow, improve and sustain the palliative care and hospice workforce. We agree that the bipartisan Palliative Care and Hospice Education and Training Act (PCHETA), S. 2080/H.R. 647 in the 116th Congress, should be used as a model for such efforts.

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.

Palliative care and hospice can play a significant role in creating lasting change across the health care system. PCHETA would expand the interdisciplinary palliative care workforce, promote awareness of the benefits of palliative care among patient and providers, and improve the evidence base for this care.

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.

PCHETA enjoys strong bipartisan support. In the 116th Congress, H.R. 647 had 295 cosponsors, and S. 2080 had 58 cosponsors. In addition, the bill is supported by more than 50 national organizations and 25 state organizations, including the American Academy of Hospice and Palliative Medicine, the American Cancer Society Cancer Action Network, the Catholic Health Association of the United States, the Alzheimer’s Association, the American Heart Association/ American Stroke Association, the American Geriatrics Society, the American Society of Clinical Oncology, the American Academy of Physician Assistants, the Hospice and Palliative Nurses Association, the Visiting Nurse Associations of America, the National Association of Social Workers, the National Hospice and Palliative Care, and others.

Thank you for your serious consideration of the request submitted by Senator Baldwin and Representative Clarke to invest in the palliative care and hospice workforce and to support this interprofessional, team-based approach to care.

Sincerely,

[List of organizations]

cc: The Honorable Tammy Baldwin
The Honorable Yvette D. Clarke