



Medical Aid in Dying Washington, DC and Maryland -Update

Ensuring people have access to medical aid in dying.

What is Medical Aid in Dying?

Medical aid-in-dying is a safe and trusted practice in which a **terminally ill, mentally capable adult with a prognosis of six months or less to live** has the option to request from their doctor a prescription for medication which they can choose to **self-ingest** to end unbearable suffering and die peacefully.

The Death with Dignity Act authorizes medical aid in dying in D.C.

4 Eligibility Requirements for law:

1. Adult
2. Terminally ill
3. Prognosis of 6 months or less
4. Capable of making medical decisions



Other requirements in the law include:

- 2 physicians must confirm eligibility
- Physician must inform person about all end-of-life care options
- 2 verbal requests and one written request (which 2 witnesses must attest to the voluntary nature of the individual's request)
- Person must be district resident and able to take and ingest the medication themselves

Provisions of the law:

- Wills, contracts, insurance and annuity policies are not affected by a person choosing medical aid in dying
- Medical aid in dying is not considered suicide or assisted suicide



End of Life Options Safeguards

- Only those with an incurable and irreversible terminal illness and six-month prognosis
- The patient must be able to take the medication themselves.
- Both the diagnosis and the prognosis have to be confirmed by two doctors, and both doctors must be assured that the patient is making the request of their own volition before a patient can be eligible for medical aid in dying.
- Patients are not eligible simply because of age or disability.
- The attending physician must inform the requesting patient about all of their end-of-life care options, including hospice and pain and symptom management.
- If either doctor has concerns about the patient's mental capacity for such a decision, they must make a referral to a mental health professional for an assessment. Medication can't be prescribed until mental capacity is determined.
- Two separate requests for the medication must be made, one oral request and one written request.
- Providers have civil and criminal immunity for participating in the law as long as they comply with all aspects of the law.
- Anyone attempting to coerce a patient is subject to criminal prosecution.
- A terminally ill person can withdraw their request for medication, not take the medication once they have it or otherwise change their mind at any point.
- Life insurance payments can't be denied to a family because a loved one uses the law.
- No physician, health provider or pharmacist is required to participate.

Medical Aid in Dying is not suicide

SUICIDE

- Person sees death as preferable to continuing to live.
- The decision to die is made in isolation.
- Person who is suicidal is not considered **mentally** capable.
- The suicidal person usually dies alone.

MEDICAL AID IN DYING

- Person does not want to die, but knows that death is imminent and wants to avoid needless suffering.
- The decision to lessen a painful death is discussed freely & thoroughly with doctors, and other trusted individuals.
- Person cannot qualify for medical aid in dying unless determined to be mentally capable.
- Person makes their wishes known & are surrounded by loved one's while dying.

Medical Aid in Dying is not suicide

Professional medical and health care associations, as well as groups dedicated to preventing suicide, have affirmed that medical aid in dying is not suicide. Among them:

- American Association of Suicidology
- American Public Health Association
- American College of Legal Medicine
- American Medical Student Association

National Overview



Progress in the States

Delaware's legislation just passed through the legislature and is expected to be signed by the new Governor in the next few weeks.

Illinois has introduced a bill and it is progressing through the legislature now. Fingers crossed.

There was legislation introduced in Montana this year to kill the bill but it was defeated.

Momentum Continues:



Maryland Campaign

Maryland's End of Life Option Act

- First introduced in 2015
- Sponsored by Delegate Shane Pendergrass (Howard County) in the Health/Government Operations (HGO/JUD) & Judiciary Committee & Senator Jeff Waldstreicher (Montgomery County) in the Judiciary Proceedings and Regulations Committee (JPR)
- Passed out of Committees and House Floor May 2019. It passed out of Senate JPR committee but died on Senate floor 23-23
- Bill was not introduced in 2021(Covid) and 2022 at Senate sponsor request (In 2020 it was introduced but CoVid ended the session early so no traction on bill)
- Will be introduced in 2023

DC Access Campaign

D.C. Access Campaign

Passing a law that authorizes medical aid in dying is just the first step.

Ensuring people understand the process and have access to supportive healthcare systems is at the core of the Access Campaign's goals.

The Access Campaign:

- educates the public
- empowers individuals
- educates healthcare systems
- provides assistance for supportive policy development



D.C. Access Campaign

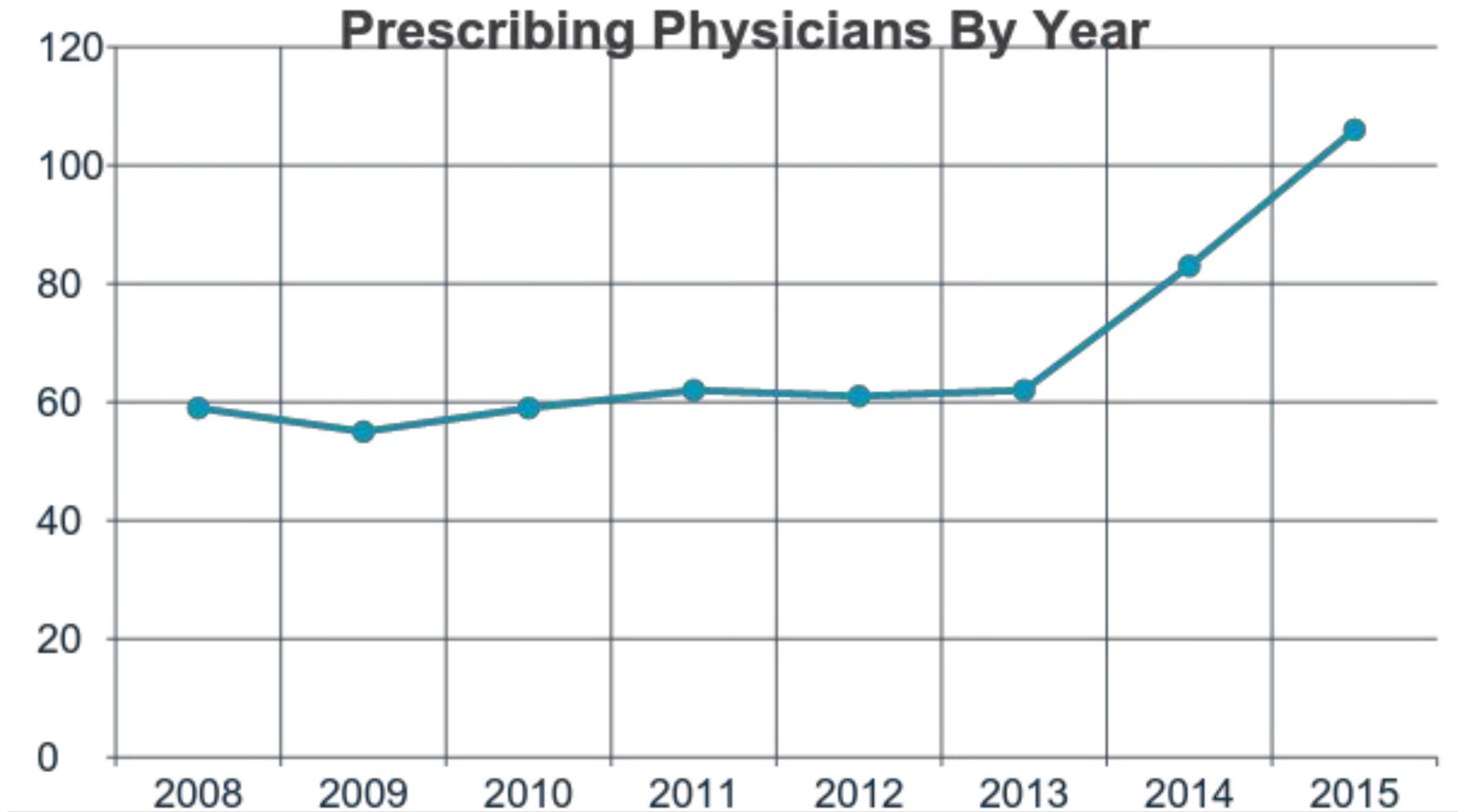
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Hospitals/Hospices with Neutral policies

- George Washington University
- Sibley
- MedStar Washington Hospital Center
- Kaiser
- VITAS- will not write prescription but plays secondary role

The real impact the Access Campaign can make



Compassion & Choices Resources



- ✓ DC DWD Act website & soon the FIND CARE tool:
www.CompassionAndChoices.org/District-of-Columbia
- ✓ End-of-Life Information Center:
www.compassionandchoices.org/information
- ✓ Doc2Doc consultation service for physicians: 800-247-7421
- ✓ Compassion & Choices' Truth in Treatment initiative:
www.TruthInTreatment.org

Dementia Decoder

Prepare for a Dementia Appointment

Create a list of questions to help you get the information you need at your doctor's appointment.

Why are you seeing the doctor now?



I'm in the Early Stages of Dementia

I want to discuss my future care and treatment plan.



I Do Not Have Dementia

I want to discuss my treatment plan if I get dementia.



I'm a Caregiver

I want to discuss my loved one's care and treatment plan.



My Loved One Has Dementia

and is being offered treatment for another condition.

<https://diagnosisdecoder.org/decoder/dementia>

DC Federal Campaign

Federal Campaign

Patient Access to End-of-Life Care Act (Pending)

- C&C Federal staff is currently lobbying House members from authorized states who have already expressed support for MAID to become an original co-sponsor of the bill during the 119th Congress prior to its official re-introduction.
- The bill would exempt current and future states and jurisdictions that have authorized medical aid in dying from the provisions of ASFRA. Currently, ASFRA prohibits the use of federal funds to pay for the end-of-life care option of medical aid in dying for mentally capable, terminally ill adults.
- The bill provides that state-authorized healthcare programs and federally qualified health centers offering medical aid in dying as an option for terminally ill adults to peacefully end unbearable suffering are not barred from receiving federal funding or assistance for these services.

Bringing Oversight to Washington and Safety to Every Resident (BOWSER) Act (Pending)

- C&C Federal staff is currently meeting with House and Senate offices who are assigned to the House Oversight and Government Reform Committee and the Senate Homeland Security and Government Affairs committee, which have jurisdiction over the bill in their respective chambers, to express C&C's opposition.
- The bill repeals the District of Columbia (DC) Home Rule Act one year after the bill's

DC/Federal Campaign

Repeal of D.C.'s Death with Dignity Act via the Financial Services and General Government Appropriations bill (Pending)

- C&C Federal staff is currently meeting with House and Senate offices who are assigned to the House and Senate Appropriations Committees, which has jurisdiction over the legislation, to express C&C's opposition to including provisions that would repeal the law.
- The House Financial Services and General Government Appropriations bill (H.R. 8773) contains a provision, Section 819 (the Senate version does not), to overturn the District of Columbia's Death with Dignity law and prohibit the D.C. Council from passing similar laws in the future

Federal Legislation affecting DC

Repeal of D.C.'s Death with Dignity Act via the Financial Services and General Government Appropriations bill (Pending)

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How can you help?



- Join the DC Access Action Team!
- Connect us with groups or organizations that would like a speaker to give a presentation.
- Connect us with medical professionals who want to learn more about the law.
- If you are a medical professional, become a champion for medical aid in dying within your organization.

D.C. Access Action Team

An Action Team is a group of **volunteers that work to educate and empower the public** to get the care they want and to have access to their full range of end-of-life options.

Volunteers help normalize or “mainstream” medical aid in dying into the standard practice of care by **empowering communities and they are crucial to protecting the law.**

Community Engagement



Community Mobilization



Health System Engagement

Next Steps

Sign up to join the D.C. Access Action Team today!.

Training – We will be hosting trainings for the D.C. Access Action Team

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Contact us!

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Care and Choice at the End of Life

