Stop Suffering for Sick Patients:
Expand A07617 by Requiring Hospitals to Have Organized Palliative Care Services
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Our request: Every sick and dying patient deserves the right to speak for themselves. Nobody should have to live with pain and suffering or be forced to die alone and deserted in a hospital bed. Protect these patients by passing legislation that requires all hospitals to offer palliative care services.

Palliative Care Improves Outcomes:
- Helps patients make decisions for themselves while they still can
- Stops the inhumane torturing of patients by treating their pain and symptoms better
- Lets patients actually live and enjoy whatever time they have left
- Gives dying patients and their families 2 more months of quality time together¹

Palliative Care Saves Money:
- Saves $1700-$5000 per patient per admission
- Saves $1.3 million per year per average-sized hospital in unnecessary pharmacy, laboratory, and intensive care costs²
- With over 5000 hospitals in the US, palliative care can save $6.5 billion dollars per year

Palliative Care Services are lacking:
- Only a minority of public hospitals (40.9%) and sole community provider hospitals (28.8%) report palliative care services. These hospitals often serve as the only option for uninsured and geographically isolated communities.³
- Only 13% of patients needing end-of-life care receive palliative care consultations.⁴
- Minority and low-income patients are more likely to die in the hospital rather than enroll in hospice services.⁴

A07617 Palliative Care Patient Information Act - signed by Governor Paterson 8/13/10 - “If a patient is diagnosed with a terminal illness or condition, the patient’s attending health care practitioner shall offer to provide the patient with information and counseling regarding palliative care and end-of-life options appropriate to the patient.”

What is Palliative Care:

- Palliative care, the medical sub-specialty focused on improving overall quality of life for patients and families facing serious illness
- Emphasis is placed on optimizing communication, managing pain and symptoms, coordinating care across health care providers, and providing emotional and spiritual support
- Care is provided by multi-disciplinary team of health care providers, including palliative care doctors, nurses, social workers, chaplains, etc., working together with the primary doctor
- Separate from hospice or end-of-life care, palliative care is provided at any time during a person’s illness, even starting at the time of diagnosis, along side curative treatments

Implications for Medicare and Medicaid:

- Over half of the nation’s total health care costs are spent on the sickest 5-10% of patients
- Aging population with increasing burden of complex chronic illness causes an exponential rise in costs for end-of-life care

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