

Roberta DiMezza

From: pearsonwhite@cox.net
Sent: Thursday, February 29, 2024 7:18 PM
To: Rep. Craven, Robert E.; Rep. McEntee, Carol Hagan; Rep. Knight, Jason; Rep. Ajello, Edith H.; Rep. Batista, Jose F.; Rep. Bennett, David A.; Rep. Caldwell, Justine A.; Rep. Casimiro, Julie A.; Rep. Corvese, Arthur J.; Rep. Cruz, Cherie L.; Rep. Dawson, Matthew S.; Rep. Felix, Leonela; Rep. Noret, Thomas E.; Rep. Place, David J.; Rep. Roberts, Sherry; House Judiciary Committee
Cc: Rep. Cotter, Megan L.
Subject: H7100 Compassionate Care Act

Follow Up Flag: Follow up
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Representatives:

I am writing in opposition to the proposed bill H7100 Compassionate Care Act that would allow people identified as terminally ill to end their own lives. While the testimonies in favor of this bill are compelling, a bigger picture must be preeminent. Many have offered very compelling arguments against this bill. Those arguments include the recent history of assisted suicide/medical aid in dying laws in place in other states and countries. That history clearly shows that whatever eligibility limitations are initially in place, those limitations will in time be expanded, even to include the disabled and children of all ages. This is evident in Oregon and California, and especially in Canada and in Europe. And mistakes in diagnoses, abuse and coercion often follow. H7100 is not about patient care but about creating a pathway for a patient to end his life by his direct hand, which is by definition suicide. Notably though, the bill, in an Orwellian manner, specifically redefines that act as not suicide. And a right to die may lead to a duty to die. Government and medicine in alliance to allow people to commit suicide is bad public policy and establishes a dangerous precedent. Rather than end life, our goal should be to improve end of life care.

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