

DEATH WITH DIGNITY

TO: Members of the Rhode Island House Judiciary Committee

FROM: Death with Dignity National Center Testimony in Support of H5219

Death with Dignity, a national organization advocating for the rights of terminally ill patients, offers the following written testimony in support of H5219, the Lila Manfield Sapinsley Compassionate Care Act.

This bill, like the other laws currently in place in 11 U.S. jurisdictions, requires four key cornerstones:

1. The patient must be diagnosed with a terminal disease with a prognosis of less than six months to live, verified by two physicians.
2. The patient must be capable of making their own health care decisions.
3. The patient must be acting voluntarily and is required to submit multiple requests orally and in writing to confirm their intention to use the law.
4. The patient must self-administer the medication. Lethal injection, mercy killing, or euthanasia are specifically outlawed and there are criminal penalties for fraud, coercion, abuse, or forgery.

In addition, the law establishes a process that has stood the test of time in ensuring that only those who meet the criteria above are able to access and use this law. The process includes oral and written requests, waiting periods, informed consent, consultation with the primary physician, and information about all options at the end of life, including hospice care and palliative care. Individuals with mental health conditions impairing their ability to make healthcare decisions are not qualified to participate in medical aid in dying (MAID).

Over the past 30 years, there have been dozens of studies in well-respected medical publications that have shown the efficacy of this process and the great relief these laws provide to people in the final stages of their lives. Dozens of those studies can be found here: <https://deathwithdignity.org/resources/peer-review-articles/>. These studies clearly show the efficacy of the process and the robust end-of-life care systems built to support patients who are using MAID and their family members.

Additionally, research shows that in states where these laws are enacted, hospice and palliative care increase. State reports show that over 85% of people using this law are enrolled in hospice care (<https://deathwithdignity.org/resources/state-report-navigator/>). MAID and hospice care, along with proper pain control, are all key elements in allowing terminally ill patients to die on their own terms and in their own homes.

Today, over 73.5 million people live in jurisdictions where MAID is legal.

Enacting Death with Dignity In Rhode Island will codify the rights of terminally ill people to make their own end-of-life decisions, free from government intervention and free from the religious beliefs of those who oppose this law.

We honor the fact that this law is voluntary and people will choose whether or not to avail themselves of this end-of-life option. H5219 includes clear and effective opt-out provisions that state no patient, medical professional, or hospital organization is required or forced to participate.

With strong statewide support, and a proven process that ensures this option is only for capable patients in the final stage of life, we urge this committee to act swiftly and compassionately to approve this legislation and continue it on a path to passage.

We urge your yes vote on H5219.

Thank you.

Death with Dignity is a national leader in end-of-life advocacy and policy reform. Our mission focuses on improving how people with terminal illness die. Our goal is to ensure people with terminal illness can decide for themselves what a good death means in accordance with their values and beliefs, and that should include having an option for medical aid in dying.