**Testimony of Judith Levy**

**Coordinator, District of Columbia Coalition on Long Term Care**

**Before the District of Columbia City Council**

**Committee on Health and Human Services**

**Chairperson Yvette Alexander**

**Budget Oversight Hearing on Fiscal Year 2017**

**April 12, 2016**

**10:00 AM**

Good morning/ afternoon Chairperson Alexander and members of the Committee on Health and Human Services. My name is Judith Levy. I am the Coordinator of the District of Columbia Coalition on Long Term Care. I am here today to urge you to ensure that funding is allocated in the FY2017 budget to establish a MOST form as set forth in the Health Care Decisions Act of 2015.

A MOST, or Medical Order for Scope of Treatment, is an essential tool for individuals with serious, progressive illnesses to clearly state their preferences for care in the event they are no longer able to communicate their wishes to healthcare providers. The form is completed between patient and healthcare provider and allows individuals to make well-informed decisions after considering the likely course of disease and available medical interventions. The form is then included in the patient’s chart as a medical order and can be transferred across settings—including hospitals, nursing homes, and rehabilitation facilities—ensuring that the individual’s treatment wishes are known and respected across care settings. A MOST form is significantly more likely to result in the faithful implementation of a patient’s wishes than the options currently available to District residents, including an advance care directive, do not resuscitate order or comfort care order. Establishment of a MOST form is particularly vital in the District as it will provide an important new tool to those low-income, Medicaid-eligible and minority residents who are least likely to have the opportunity to discuss advanced care planning with their healthcare providers.

The DC Coalition on Long Term Care and many others are concerned about the apparent lack of funding in the FY2017 budget to create a MOST form and to train medical professionals in its use. Without the inclusion of $178,000 for the program in the FY2017 budget, the legislation establishing MOST cannot be enforced and the program will unable to be implemented in the upcoming fiscal year. This means that many of the District’s sickest and most vulnerable residents will not have access to a vital tool for exercising their right to determine how they will be cared for at the end of their lives. This has very real consequences for families across the District.

Chairperson Alexander, as the co-sponsor of the Healthcare Decisions Act of 2015, we call upon you to ensure that this important piece of legislation is not left out of the budget and needlessly delayed another year. MOST was created to give peace of mind to seriously ill individuals who are not expected to live beyond twelve months. They simply do not have time to wait. Please help use ensure that their voices and decisions are heard and respected.

Thank-you for the opportunity to testify today.