

# U.S. Sen. Baldwin, Capito: Champion bipartisan reform to improve palliative and hospice care

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*Bipartisan legislation boosts the health care workforce to help Americans with life-threatening illnesses*

WASHINGTON, D.C. – Today, U.S. Senators Tammy Baldwin (D-WI) and Shelley Moore Capito (R-WV) introduced the *Palliative Care and Hospice Education and Training Act (PCHETA)*, a bipartisan reform to grow, improve and sustain the palliative care and hospice workforce to keep pace with patient need and to help improve the well-being of Americans with life-threatening illnesses and their families.

“I was raised by my maternal grandparents and later served as my grandmother’s primary caretaker as she grew older, so this issue is personal to me, and I want to make a difference for families experiencing serious health concerns,” **said Senator Baldwin**. “I’m proud to work across party lines and introduce the bipartisan Palliative Care and Hospice Education and Training Act with my colleague Senator Capito. We must do more to help grow and sustain our health care workforce to safeguard and improve the quality of care for the growing number of patients with serious or life-threatening illnesses.”

“As someone who has cared for aging parents, I understand how important palliative and hospice care is and how much support and comfort it provides to

patients and their families. I feel strongly we must strengthen training and education options to those involved in these fields so we can continue delivering quality care for those in the final stages of life. That is why I am joining with my colleague Senator Baldwin to introduce this legislation that will help so many facing serious illnesses,” **said Senator Capito.**

The *Palliative Care and Hospice Education and Training Act* would strengthen training for new and existing physicians, those who teach palliative care, and other providers who are part of the palliative care team to give patients and their families a voice in their care and treatment goals. It also boosts palliative care research and provides academic and career awards to incentivize the practice and study of palliative and hospice care.

Advocates from across the country have expressed support for the bipartisan legislation:

“We applaud the introduction of the Palliative Care and Hospice Education and Training Act,” **said Dr. Tim Jessick, Chair of Palliative Care Network of Wisconsin.** “As palliative care clinicians, and especially as a statewide palliative network, we are quite proud of this bill and the enormous potential benefits to our patients and their families. The American Academy of Hospice and Palliative Medicine has been pushing for this bill for many years, and we hope to see continued progress on this important issue.”

“Today, an estimated 5.5 million Americans are living with Alzheimer’s and other dementias. For people in the advanced stages of this terminal disease, palliative and hospice care can improve both the quality of care and quality of life,” **said Robert Egge, Chief Public Policy Officer of Alzheimer’s Association.** “Unfortunately, today the availability and quality of this care is limited. We are proud to support the Palliative Care and Hospice Education and Training Act (PCHETA) which will help to ensure more Americans have access to this high-quality care.”

“This legislation highlights the critical need for people with cancer and other serious illnesses to have access to supportive care that treats the whole patient, not just their disease,” **said Chris Hansen, President of American Cancer Society Cancer Action Network (ACS CAN).** “With increased access to palliative care, patients and their families will benefit from improved quality of life and an extra layer of support of services that address pain, coordination of care and other

symptoms throughout the continuum of their care.”

“We commend Senators Baldwin and Capito for their leadership in expanding opportunities for interdisciplinary education and training in palliative care,” **said Dr. Janet Bull, President of American Academy of Hospice and Palliative Medicine (AAHPM)**. “PCHETA will help to ensure access to appropriate, timely, high-quality care for the expanding and diverse population of patients with serious illness or multiple chronic conditions, as well as their families and caregivers.”

Wisconsin groups supporting PCHETA also include the Alzheimer’s Association Wisconsin Chapters, Alzheimer’s & Dementia Alliance of Wisconsin, Wisconsin Aging Advocacy Network and the Palliative Care Network of Wisconsin.

Palliative care and hospice care focus on relieving and preventing patients’ suffering and improving their quality of life. This team-based approach focuses on the patients’ needs, explains treatment options and gives patients and their families a voice in realizing their treatment goals. Palliative care has been embraced in both Wisconsin and West Virginia as a critical component of high quality health care.

Over the last ten years, the number of hospital-based palliative care programs has quickly increased, but the number of providers available to fulfill the needs of these patients has not kept pace. Furthermore, many patients and care providers are not aware of the benefits and options for palliative and hospice care. To address this issue, the PCHETA will support the following:

**Workforce Development:** Establishes fellowship programs within new Palliative Care and Hospice Education Centers to provide short-term intensive courses focused on palliative care. By supporting the team approach to palliative care, the fellowships will provide supplemental training for faculty members in medical schools and other health professions schools, including pharmacy, nursing, social work, chaplaincy and other allied health disciplines in an accredited health professions school or program. Providers who do not have formal training in palliative care will be able to upgrade their knowledge and skills for the care of individuals with serious or life-threatening illness as well as enhance their interdisciplinary teaching skills.

**Palliative Care and Hospice Education Centers:** Establishes Palliative Care and Hospice Education Centers to improve the training of interdisciplinary health professionals in palliative care; develop and disseminate curricula relating to

palliative care; support the training and retraining of faculty; support continuing education; provide students with clinical training in appropriate sites of care; and provide traineeships for advanced practice nurses.

**Physician Training:** Establishes grants or contracts to schools of medicine, teaching hospitals and graduate medical education programs to train physicians who plan to teach palliative medicine. Programs will be required to develop specific performance-based measures to evaluate the competency of trainees.

**Nurse Training:** Creates incentives for hospice and palliative nursing, in education, practice and quality grants, workforce development, and nurse retention projects.

**Enhanced Research:** Directs the National Institutes of Health (NIH) to use existing authorities and funds to expand palliative care research to advance clinical practice and improve care delivery for patients with serious or life-threatening illness.

**Palliative Care Education and Awareness:** Establishes a national campaign to inform patients, families and health professionals about the benefits of palliative care and the services that are available to support patients with serious or life-threatening illness. The bill also supports the promotion of information, resources and materials about palliative care services to health professionals and the public.

**Academic Career Awards:** Establishes a program to promote the career development of physicians who are board certified or board eligible in hospice and palliative medicine and have a junior, non-tenured faculty appointment at an accredited school of medicine.

**Career Incentive Awards:** Provides grants or contracts for eligible health professionals, such as advanced practice nurses, social workers, physician assistants, pharmacists, or students of psychology, who agree to teach or practice in the field of palliative care for at least 5 years.

An online version of this release is available [here](#).