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June 12, 2017

The Honorable Johnny Isakson  
United States Senate  
Washington, DC 20510

The Honorable Phil Roe, MD  
United States House of Representatives  
Washington, DC 20515

The Honorable Mark Warner  
United States Senate  
Washington, DC 20510

The Honorable Earl Blumenauer  
United States House of Representatives  
Washington, DC 20515

Dear Senator Isakson, Senator Warner, Representative Roe and Representative Blumenauer,

On behalf of The Pew Charitable Trusts, thank you for introducing the *Patient Choice and Quality Care Act of 2017* and for your ongoing efforts to improve care for people who are near the end of their lives. We appreciate your leadership in advancing this important bipartisan legislation.

The Pew Charitable Trusts is an independent, non-profit research and public policy organization. Pew's project on improving end-of-life care seeks to expand access to advance care planning, develop tools to measure the quality of care, highlight innovative ways of providing care to seriously ill people and their families, and improve documentation of patients' wishes for their care near the end of life.

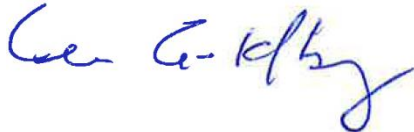
Unfortunately, the U.S. health care system is not delivering the care that patients with serious illness need and want. For example, although most people say they would like to die at home, the vast majority die in nursing homes, intensive care units, or other medical settings. Given that more than two-thirds of people who die in the United States each year are Medicare beneficiaries, Congress has an opportunity to implement changes to significantly improve the quality of end-of-life care. The *Patient Choice and Quality Care Act* is an important step in that direction.

Better care for seriously ill patients will not happen without new tools for measuring the quality of care these individuals receive. We commend you for provisions of the *Patient Choice and Quality Care Act* that direct the Administration to prioritize the establishment of appropriate clinical care measures for end-of-life care. Such tools will help policymakers measure the concordance between the individual's stated goals, values, and preferences with documented care plans, the treatment that is delivered, and the outcome of treatment. Addressing this gap is the first step in encouraging health systems and insurers to improve the care they provide.

Another critical provision in the *Patient Choice and Quality Care Act* establishes grants for state-based advance care planning programs. Research shows that advance care planning conversations significantly improve outcomes for patients, including: an increased likelihood that their care will be consistent with their wishes, fewer hospitalizations, an increased use of hospice, and an increased likelihood of dying in their preferred location.

Pew thanks you for your efforts to improve end-of-life care for Americans and we look forward to working with you to help advance this important legislative initiative. Should you have any questions or if we can be of assistance, please contact Ian Hunter at [ihunter@pewtrusts.org](mailto:ihunter@pewtrusts.org) or 202-540-6824.

Sincerely,

A handwritten signature in blue ink that reads "Lee Goldberg". The signature is written in a cursive, flowing style.

Lee Goldberg  
Director, Project on Improving End of Life Care  
The Pew Charitable Trusts