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**HB 378 Maryland Health Care Commission – Palliative Care Services – Workgroup
FAVORABLE
Senate Finance Committee
March 24, 2022**

Good afternoon Chair Kelley and members of the Senate Finance Committee. My name is Karen Kalla, member of the AARP Maryland Executive Council and resident of Anne Arundel County. AARP Maryland is one of the largest membership-based organizations in Maryland, encompassing more than 850,000 members. AARP Maryland is proud to support HB 378. We thank you for this opportunity to provide testimony. We also thank Delegate Kerr for sponsoring this important piece of legislation.

AARP is a non-partisan, non-profit nationwide organization that strengthens communities and advocates on those issues that most matter to families such as healthcare, employment and income security, retirement planning, affordable utilities and protection from financial abuse.

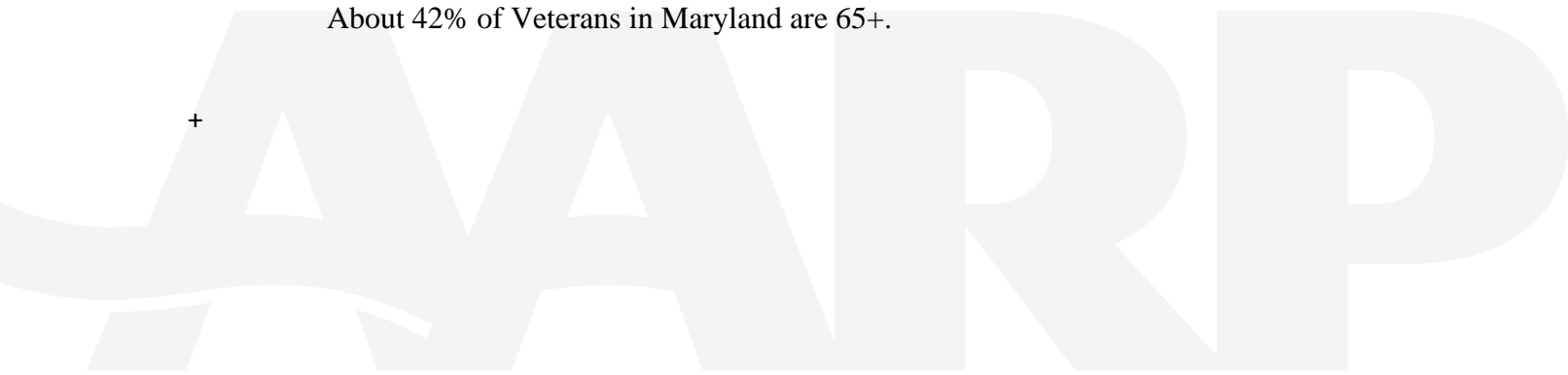
We are pleased to support House Bill 378 that would require the Maryland Health Care Commission to convene a workgroup of palliative care stakeholders who would research and collect data on the state of palliative care services in Maryland. They would use that information to develop a plan to expand the scope of and insurance coverage for these services to better meet the increasing needs in our state.

Over the next decade:

- Maryland's over 65+ population will grow by 320,000, from 16% to 20% of the total population;
- Older adults with disabilities and in need of assistance with daily activities will increase about 30%; and
- The number of people 65+ with dementia will increase by 35,000 or 30%.

Over the next 25 years, Maryland's over 85+ population will grow by 158%, from 122,000 to 315,000 – from 2% to 5% of the total population.

About 42% of Veterans in Maryland are 65+.



Cognitive and behavioral health disorders are highly prevalent among older adults and these challenges increase with age.

Informal caregivers provide about 90% of long-term care for older adults.

As our 65+ population increases, so will the range of services needed to maintain their quality of life. Maryland can contribute to these services through study and planning that focuses on access, capacity, quality, and integration of these various services. HB387 provides a critical component of this comprehensive approach to individual well-being by researching the status, role, and possibilities of palliative care services.

State policymakers should support:

- Improved palliative care, including better treatment for emotional distress and the elimination of all barriers to the appropriate management of pain and suffering; and
- Improved access to palliative care services regardless of patient setting (e.g., hospital, nursing home, or residence.)

Barriers to patients' use of Medicare and Medicaid hospice benefits should be eliminated, including limitation based on life expectancy and the prohibition on the use of acute or other curative services.

For these reasons, AARP supports HB378 and requests your favorable report on this important legislation. For questions, please contact Tammy Bresnahan tbresnahan@aarp.org or by calling 410.302.8451.