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March 03, 2025

HB 1328 - FAV

End-of-Life Option Act (The Honorable Elijah E. Cummings and the Honorable Shane E. Pendergrass Act)

Dear Chair Joseline A. Pena-Melnyk, Vice-Chair Bonnie Cullison, and Members of the Health and Government Operations Committee,

Under the proposed, carefully crafted, law, terminally ill patients who are diagnosed to have six months to live and who are mentally competent to make their own medical care decisions may request a prescription of medication to hasten their deaths. These patients must also be able to self-administer the medication. The primary physician's diagnosis must also be certified by a consulting physician to guard against misdiagnosis.

Absent such a law, the practice is forced underground, exposing dying patients to possible abuse or coercion and doctors to potential prosecution and imprisonment. Limiting one's end-of-life options to suffering physical and emotional agony and the loss of personal dignity, or to starvation that can take several weeks, is not humane. There is no deity who assumes responsibility for ensuring that our suffering is ultimately just or compensated for, that responsibility falls entirely on ourselves alone.

The proposed law protects the rights of patients and physicians by requiring the adult patient who is a resident of Maryland to verbally request the deadly overdose prescription from the physician twice; each request is separated by 15 days, to make a written request to the attending physician; the request is witnessed by two individuals who are not primary caregivers or both family members. It provides an option for the patient to rescind the verbal and written requests at any time. The attending physician must inform the patient of alternatives, including palliative care, hospice and pain management options. Use of this law cannot affect the status of a patient's health or life insurance policies. Similar laws on other states have produced good results.

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