



**Testimony before the House Health Committee
March 13, 2026**

**House Bill 1251 - Health Facilities and Health Insurance – Palliative Care –
Required Access and Coverage
(Edna G. Neal Palliative Care Act)**

SUPPORT

On behalf of the National Association of Social Workers, Maryland Chapter (NASW-MD) Committee on Aging, we would like to express our support for HB 1251, Health Facilities and Health Insurance - Palliative Care - Required Access and Coverage (Edna G. Neal Palliative Care Act).

As social workers serving older adults, we often work with those who have serious illnesses and other chronic or life-limiting conditions. Often patients endure significant pain, physical distress and emotional hardship while being treated for and managing a life-limiting condition. Palliative care is specialized, evidence-based medical care for individuals living with serious illnesses that can improve their quality of life by providing relief from pain, symptoms and stress while respecting their dignity, culture, and personal values. House Bill 1251 would require hospitals, nursing homes, hospice care facilities, or other long-term care facilities licensed in the state to inform patients about the availability of palliative care and provide access to a dedicated palliative care program.

Currently, access to palliative care remains inconsistent across the state. House Bill 1251 recognizes the importance of guaranteeing statewide access to palliative care as a component of medical care. A patient's race, location, or insurance coverage should not affect their access to palliative care. True health equity means all Marylanders have access to palliative care as a standard component of medical care.

Palliative care works best when provided by an interdisciplinary team consisting of physicians, nursing, social work, pain management, and chaplaincy. In addition to treating pain and other physical symptoms, the team can build pathways of good communication and trust among the patient, family, and clinical team. The team also provides the opportunity for a patient to share fears and concerns, which are often present while managing a life-limiting illness.

Palliative care can be provided any time a patient is suffering during a life-limiting illness, not just at the end of life. Receiving palliative care early in the course of a life-limiting illness can give patients a reason to hope and a feeling of greater dignity. It allows the patient to define their quality of life. Patients can also receive curative care at the same time they receive palliative care, allowing them to choose their course of treatment along their illness journey.

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Our state's growing population of older adults makes it more likely there will be more Marylanders coping with a life-limiting illness. Receiving a diagnosis and treatment for a serious illness is a stressful and scary time for residents and their families. Being aware of options allows patients to feel more in control. Palliative care is an excellent choice for them.

For these reasons, we ask for your favorable report on House Bill 1251.

Respectfully,

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