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Testimony on
HB 5417 *An Act Concerning End-Of-Life Care*

Before the Public Health Committee
March 20, 2018

Good afternoon, Senator Gerratana and Representative Steinberg, Senator Kennedy and Representative Borer and members of the Public Health Committee. My name is Michael Culhane and I am the Executive Director of the Connecticut Catholic Public Affairs Conference. The Conference is the public policy office of the nine active and retired Bishops of Connecticut and I am here representing them to oppose the passage of Raised Bill No. 5417 *An Act Concerning End-of-Life Care*.

As we have in the past, the Conference continues to oppose this legislation – not only because it is an affront to the teachings of the Church – but also because we join many other *non-religious* organizations representing the medical, nursing, social services, hospice, elderly and disability communities who have strongly and publicly contested this bill as well. For three years, this bill was referenced as “Aid in Dying”; this year, however, it has been repackaged as “End-of-Life Care.” I fully support care at the end of one’s life: I support palliative care.

For some, this issue of care at one’s final stages of life may represent the “Great Divide” where two towering edifices stand tall and hard, diametrically opposed to one another. But for me, I am reminded of PA 13-55 which established the *Advisory Council on Palliative Care*. This legislation dictates that the Advisory Council “must

- (1) **analyze** the current state of palliative care in Connecticut and
- (2) **advise** the Department of Public Health on matters related to improving palliative care and the quality of care for people with serious or chronic illnesses.”

It is also worthy to note that the stated objectives of this Advisory Council are to “identify and facilitate educational opportunities for

- (1) **Medical personnel** to understand and accept best practice standards in their practice...,
- (2) The **public** to understand and openly discuss palliative care as a normal part of life care... and
- (3) **Legislators** to help them understand and support palliative care and distinguish it from hospice care.”

The Findings and Recommendations of the Council also delineate standards for education, care rationale, reimbursement and workforce, and advanced care planning. I believe that it is the obligation of this Committee – and the General Assembly – to advance the Findings and Recommendations of the Palliative Care Advisory Council.

When I was much younger, an old wise man taught me an important lesson for life, and that is **“When in doubt – don’t.”** I feel that this adage is applicable to this legislative proposal as this bill would establish a horrendous public policy for our state and I think that the best resolution of this issue is **“don’t.”**



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