



Care and Choice at the End of Life

Medical Aid in Dying: Smart, Compassionate Policy for New York

April 2023



COMPASSION & CHOICES
IMPROVES CARE,
EXPANDS OPTIONS,
AND **EMPOWERS**
EVERYONE TO
CHART THEIR
END-OF-LIFE JOURNEY.



NEW YORK TIMES BESTSELLING AUTHOR OF
THE CHECKLIST MANIFESTO

Atul Gawande



Being Mortal

Medicine and What Matters in the End

“Life is
meaningful
because it is
a story ...

...and in stories,
endings matter.”

A photograph of a window with light-colored, sheer curtains. The window looks out onto a bright, green, bokeh-filled outdoor scene, likely trees or foliage. The text is overlaid on the bottom left of the image.

**How people want their
lives to end:
A peaceful death**

End of Life Options in NYS

- All available medical treatments and interventions
- Discontinuing or refusing medical treatment
- Palliative care, including hospice services
- Voluntary Stopping of Eating and Drinking (VSED)
- Palliative sedation
- Medical aid in dying (in authorized states; not authorized in NYS)

What is medical aid in dying?

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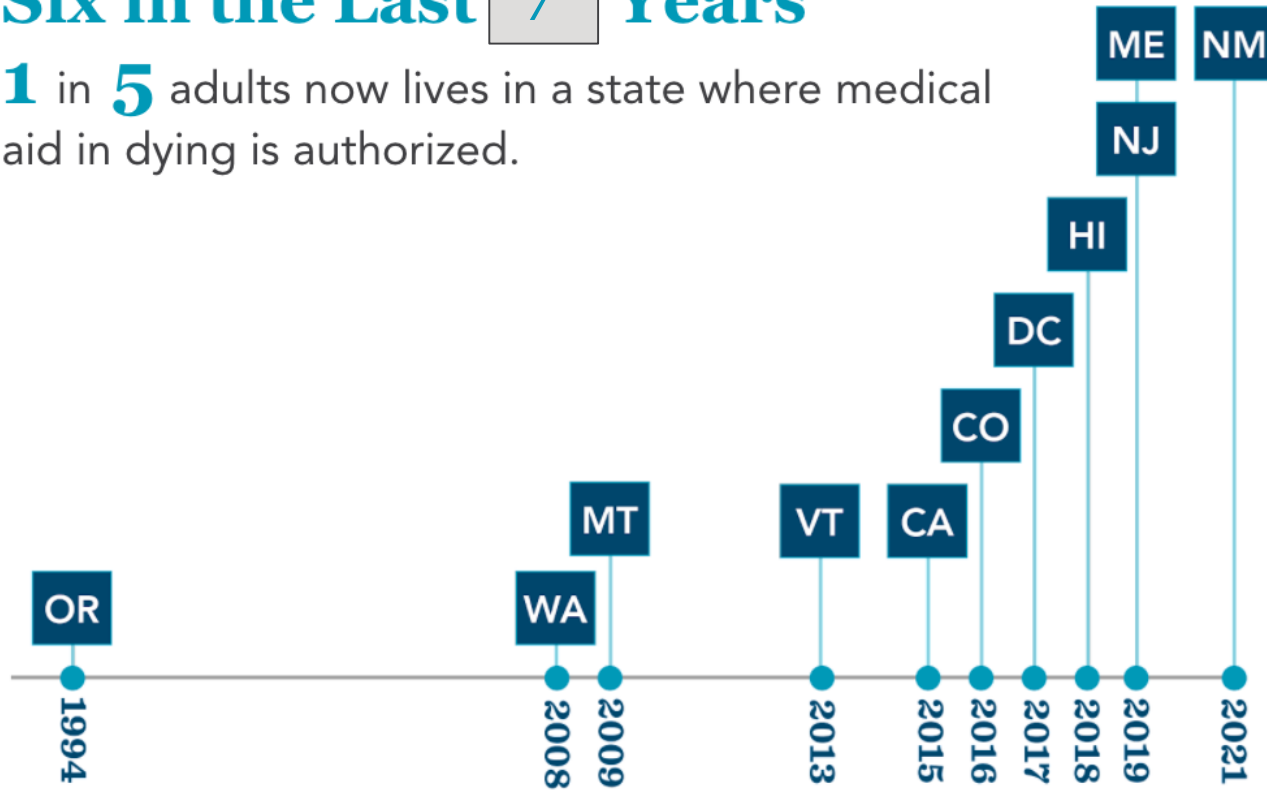
Medical aid in dying allows a mentally capable, terminally ill adult with a prognosis of six months or less to live, to request and receive a prescription for medication that they may choose to take to bring about a peaceful death, so long as they are able to self-ingest the medication.

Authorized in 11 Jurisdictions

Six in the Last 7 Years

7

1 in **5** adults now lives in a state where medical aid in dying is authorized.



New York's Medical Aid in Dying Act

New York's Medical Aid in Dying Act

- First introduced in 2015
- Sponsored by Assemblymember (and Health Committee Chair) Amy Paulin (Scarsdale) & Senator Brad Hoylman-Sigal (Chelsea)
- Passed Assembly Health Committee May 2016
- Nearly 80 bill sponsors
- Diversity of bill sponsors is remarkable
- 2023 session ends on June 8

New York's Medical Aid in Dying Act

Eligibility Requirements:

- An adult, 18 years or older
- Terminal illness, prognosis of 6 months or less to live
- Terminal illness = illness that is incurable, irreversible
- Mentally capable of making their own healthcare decisions and acting voluntarily
- Able to self-ingest the medication

New York's Medical Aid in Dying Act

Safeguards

- Only those with an incurable and irreversible terminal illness and six-month prognosis
- The patient must be able to take the medication themselves.
- Both the diagnosis and the prognosis have to be confirmed by two doctors, and both doctors must be assured that the patient is making the request of their own volition before a patient can be eligible for medical aid in dying.
- Patients are not eligible simply because of age or disability.
- The attending physician must inform the requesting patient about all of their end-of-life care options, including hospice and pain and symptom management.
- If either doctor has concerns about the patient's mental capacity for such a decision, they must make a referral to a mental health professional for an assessment. Medication can't be prescribed until mental capacity is determined.
- Two separate requests for the medication must be made, one oral request and one written request. Two people must witness the written request.
- Prescribing doctors must comply with medical-record documentation requirements and make records available to the state department of health.
- Providers have civil and criminal immunity for participating in the law as long as they comply with all aspects of the law.
- Anyone attempting to coerce a patient is subject to criminal prosecution.
- A terminally ill person can withdraw their request for medication, not take the medication once they have it or otherwise change their mind at any point.
- Life insurance payments can't be denied to a family because a loved one uses the law.
- No physician, health provider or pharmacist is required to participate.

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Anne French

November 30, 1960 - March 30, 2022



Ayla Rain Eilert

Dec. 14, 1997 -
April 2, 2022



Medical aid in dying honors patients' autonomy, and protects the doctors who serve them.

There has not been a single substantiated incidence of abuse or coercion in nearly 50 years of combined data.

**Very few people will choose to use the option,
but large numbers will derive peace of mind
from simply knowing it is available.**

Adopting New York's Medical Aid in Dying will cost the state nothing.

**The cost of inaction
is high.**

Terminally ill people

- May not try that one last miracle treatment out of fear the treatment will be too painful
- May choose violent means to end their suffering, rather than this compassionate option
- Are being deprived of the peace of mind that comes with knowing they can end their suffering if it becomes too great
- Will die suffering

**... while families and doctors remain
powerless with no legal way to respond to
their pleas for help.**

Society Also Fails to Gain the Other Benefits of Medical Aid-in-Dying Implementation



Better use of hospice care

Compassion & Choices



Improved conversations



Better physician training

For more information

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