Choices Bank

SENATE FINANCE AND CLAIMS
EXHIBIT NO. 13
DATE 4-12-05
BILL NO. HB 742

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April 12, 2005

To: Montana Senate Finance and Claims Committee

My name is Susan Hancock and I am here to speak in favor of HB 742. I am the project director of the Choices Bank program in Missoula.

Why do I believe Montana should create a state-wide registry for declarations concerning life-sustaining treatment?

Studies have shown that the inability to locate a person's advance directive is a barrier to providing appropriate medical treatment, based on the person's wishes. If a medical professional in Montana were to have virtually immediate access to patients' advance directives, it would allow those patients to more easily make their health care wishes known in accordance with Montana's Rights of the Terminally Ill Act and the federal Patient Self-Determination Act. This would help health care providers give the appropriate care when patients cannot communicate. In a crisis situation, if the advance directive is not quickly and easily accessible, it is like not having written one at all.

An Internet registry developed in Missoula, called the Choices Bank, allows 24-7-365 access to this important paperwork. Anyone over the age of 18 can register their advance directive with the Choices Bank. This simply involves bringing the advance directive to a deposit location and signing an authorization form. Trained personnel at deposit locations review the documents for completeness and check to make sure the documents presented are appropriate health care declarations.

The documents are then scanned for input into the Internet database. Once this is done, the original documents are returned to the depositor with a letter containing instructions for viewing the advance directive, and two wallet cards containing the name of the depositor and their access code. One wallet card should be kept by the depositor and the other given to the person named as the primary health care representative.

Security levels built into the system allow only those people who should have access to the documents to view them. Access codes are provided to registrants, and they choose who to give that information to. Advance directives may be viewed and printed on-line, but not changed on-line. Medical staff at both hospitals in Missoula also have the ability to search for someone's advance directive, using specially provided user IDs and passwords.

The completion of a declaration concerning life-sustaining treatment is often the catalyst for discussions within the family about end-of-life treatment. It is vitally important that family members and others, such as doctors, lawyers and even friends, know how one feels about end-of-life health care treatment. The act of writing down one's wishes can make it easier to discuss

these wishes with loved ones. Discussing and documenting one's wishes are both part of advance care planning.

One study of people who have used the Choices Bank indicates that more than 50% of these people had not completed declarations prior to registering them in the system. I believe that knowing that their paperwork could be found quickly and easily was an incentive to completing the declarations.

Several other states have developed registries for advance directives including Arizona, North Carolina and, very soon, Vermont. Since a proven system for registering advance directives already exists in Missoula, it would be very easy to transform this to a state-wide program.

Developing a system that allows health care providers to find advance directives quickly and easily, is the right thing to do.

I encourage you to vote in favor of HB742.

Thank you,

Susan Hancock

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