I am a family physician, in practice for 25 years and in those years have become a huge supporter of home based palliative care. I have a graduate certificate in palliative care from UW. This program has helped me provide better serious illness care for my patients. This care has kept many patients from needing emergency room and hospital stays. My practice, of geriatric patients mostly, would be better served in many cases from home based palliative care. When too frail to come to the office but not ready for hospice I am not able to provide what I know is the best care for them. I help out at our Elderplace sites -a PACE program that provides all inclusive care. When in this role I can provide this care using the team of nurses, social workers and others that makes their program function like home based palliative care. I have seen the great benefit to the patients to having nurses who can go in to patients homes and help me care for patients better. The PACE program is a pilot program through CMS that is showing improved value concordant and less expensive care through end of life. This is what HB 2981 will allow -better care at a lower cost for more patients.

Doug Niehus MD