

My name is Rebekah Taylor. I am a Licensed Independent Clinical Social Worker in the state of Minnesota. I have been employed as a hospice professional since 2015, both in leadership and frontline hospice social work roles. I am writing today in opposition to HF1930.

Every day, I serve the dying and their families. I accompany those diagnosed with terminal illness as they journey toward the end of their lives. I listen. I offer gentle counsel and education on what to expect. I hold space for the fears, regrets, and “I love you’s” whispered before death. Every day, I witness struggle and beauty, loss and peace. Dying is complicated. It is not always easy, but it is sacred. Dying is an integral part of the human experience.

In Minnesota, we already have the resources we need to bring comfort and peace to those who are dying. Death with dignity is possible –with quality hospice care! With hospice care, doctors, chaplains, nurses, social workers, music and massage therapists, home health aides, and volunteers partner together to address holistically the emotional, spiritual, and physical pain that patients may experience at end of life. Needed medications for symptoms, equipment and supplies, resources, counseling, and advance care planning—all are available to patients on hospice care and are covered under Medicare and nearly all insurance plans.

Unfortunately, hospice care is underutilized in Minnesota and across the country. Barriers to accessing hospice remain, particularly within communities of color.<sup>1</sup> Further education on hospice, both for patients and medical professionals, is needed. Racial disparities, care for the uninsured and underinsured, and poor health literacy around serious illness must be addressed.<sup>2</sup> Our energies need to be focused on these issues and not on plans to bring a controversial practice with a limited research base and few patient protections to our state.

End of life options to relieve suffering exist in Minnesota! I say it again: death with dignity is already possible. Seasoned, compassionate professionals like myself are ready to offer care and relief to those who are dying. Neither prolonging life nor hastening death, we honor each moment, each smile, each tear, each story, each breath. Even in our dying, we live. How misguided it is to push for medical aid in dying when the gift of quality hospice care is not yet more widely known and shared! How shortsighted to seek an end to life when care and comfort for the living are close at hand! Dying is complicated. It is not always easy, but it is sacred. Please join me in opposition to HF1930. Thank you!

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<sup>1</sup> National Hospice and Palliative Care Organization (NHPCO)  
<https://www.nhpc.org/nhpc-publishes-hospice-through-the-dei-lens-research-report/>

<sup>2</sup> NHPCO  
[https://www.nhpc.org/wp-content/uploads/Medical\\_Aid\\_Dying\\_Position\\_Statement\\_July-2021.pdf](https://www.nhpc.org/wp-content/uploads/Medical_Aid_Dying_Position_Statement_July-2021.pdf)