
**Report to
The Vermont Legislature**

Report Concerning Patient Choice at the End of Life

In Accordance with 18 V.S.A. § 5293

**Submitted to: House Committees on Human Services and on Health Care; and
Senate Committee on Health and Welfare.**

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Introduction

In 2013, the General Assembly passed Act 39 that allowed Vermont physicians to prescribe medication to a Vermont resident with a terminal condition with the intent that the medication be self-administered for the purpose of hastening the patient's death. Act 39 set forth conditions for the patient and the physician for this action to be taken lawfully. Those conditions include (but are not limited to) an oral and written request by the patient to the physician; instruction that all steps in the process must be voluntary; ensuring that the patient be capable of making such a decision; confirmation of the diagnosis and prognosis by a second Vermont physician; and an attestation to these steps by a non-interested witness. See Appendix A for the complete requirements set forth in 18 V.S.A. § 5283.

Once the prescribing physician fulfills all of the statutory requirements, the physician is required to report to the Department of Health that all such steps have been taken. The filing of the report confers on health care providers immunity from professional, criminal, or civil liability associated with the treatment of the patient for this hastening of the patient's death.

In 2015, the General Assembly passed Act 27 that requires the Department of Health to adopt rules (see Appendix C) to facilitate the collection of information regarding compliance. Act 27 (2015) also requires the Department to generate and make available to the public a biennial statistical report of the information collected by the Department, as long as releasing the information complies with the federal Health Insurance Portability and Accountability Act of 1996, Pub. L. No. 104 - 191.¹

Summary of Underlying Causes of Death

The following summary is based on cases reported to the Vermont Department of Health pursuant to 18 V.S.A. Ch. 113 and the Rule Governing Compliance with Patient Choice at the End of Life.

Statistics Details: July 1, 2019, to June 30, 2021

There were 29 total events reported to the Vermont Department of Health from July 1, 2019, to June 30, 2021. The events fell into the following underlying diagnoses groups:

- 72% were due to cancer (21 total cases);
- 7% were due to ALS (2 total cases);
- 10% were due to Neurodegenerative Disorders (3 total cases); and
- 10% were due to other events (3 total case).

All 29 events have a death certificate on file with the Vital Records' Office. One hundred percent of the death certificates listed the appropriate cause (the underlying disease) and manner of death (natural).

¹ This means that this report will contain no information that could be used to potentially identify any patients or health care providers who have taken steps under the 18 V.S.A Chapter 113.

Among the 29 confirmed deaths, the mechanism was:

- 17 utilized the patient choice prescription (59%)
- 10 died from the underlying disease (34%)
- 1 other (3%)
- 1 unknown (3%)

General Statistics: May 31, 2013 until June 30, 2021

From May 31, 2013, until June 30, 2021, there have been 116 events. The events fell into the following underlying diagnoses groups:

- 89 (77%) were due to cancer
- 13 (11%) were due to ALS
- 6 (5%) were due to Neurodegenerative conditions
- 8 (7%) were due to other events

Number of Prescriptions Filled

The Department of Health used the Vermont Prescription Monitoring System (VPMS) to identify patients that had filled a prescription under the law. The Department positively identified 21 out of the 29 deceased cases as having filled a prescription under the law. There are a variety of reasons that might account for the remainder of the prescriptions not being present in VPMS, including those that were not filled or were filled out of state.

Appendixes

Appendix A: 18 V.S.A. § 5283

<https://legislature.vermont.gov/statutes/fullchapter/18/113>

Appendix C: Rule Governing Compliance with Patient Choice at the End of Life

http://www.healthvermont.gov/sites/default/files/documents/2016/12/REG_patient-choice-at-end-of-life-compliance.pdf