



## How to Tell Congress That Spiritual Care Matters

### 1) SIGN OUR PETITION

In health care, spiritual care matters—to patients, to families, to health care providers, and to health care settings. It is increasingly being recognized as a vital component of whole-person care. Its integration into interdisciplinary health care teams has been gaining ground across the continuum of care, especially palliative and hospice care. Patients are playing a much more proactive role in the health care they receive, and patient-centered care requires the entire team to consider spirituality in deciding how to best optimize a patient’s quality of life.

Given this, we urge Congress to recognize spiritual care as a key aspect of whole-person health care; and to support and facilitate expanded access to optimal spiritual care and resources across health care settings. For current and future patients and their families, and the health care professionals and settings they rely on, it matters.

**Please sign our petition and participate in this unified call for enhanced spiritual care.**

**Go to: [www.change.org/p/tell-congress-that-spiritual-care-matters](http://www.change.org/p/tell-congress-that-spiritual-care-matters)**

### 2) CONTACT YOUR U.S. SENATOR

In the last session of Congress, bipartisan leaders of the Senate Finance Committee introduced S. 3504, the Creating High-Quality Results and Outcomes Necessary to Improve Chronic (CHRONIC) Care Act of 2016. This important legislation seeks to improve care for Medicare beneficiaries with chronic conditions, expand innovative care models, and facilitate telemedicine coverage.

Of interest is section 502, which requires the Government Accountability Office (GAO) to conduct a study on the formulation of a comprehensive plan of longitudinal care for Medicare beneficiaries with serious or life-threatening illnesses. The study includes an examination of interdisciplinary care teams that, as defined by the legislation, “*may* include a chaplain, minister, or other clergy ...” (emphasis added). We believe this section can be further strengthened by requiring the inclusion of a chaplain, minister, or other clergy as part of a beneficiary’s care team, consistent with other provisions of the Medicare statute.

We understand that this legislation will be reintroduced in the current (115th) Congress. Given the importance of spiritual care to individuals facing chronic conditions and assessing end-of-life options, we urge the Senate sponsors to further refine the CHRONIC Care Act by amending section 502(c)(3)(B) of the bill and changing the word “*may*” to “*shall*.” This would ensure that spiritual health will be considered as part of the GAO’s study.

**Please write/email/call your U.S. Senator to help influence this legislation.**

**Go to: [www.senate.gov/senators/contact](http://www.senate.gov/senators/contact)**