

MOLST Advisory Council

April 2, 2024 | 9:30-10:30

Meeting Minutes

Members present: Amelia Breyre, Rebecca Henderson, Mary Horan, Barbara Jacobs, Cathy Ludlum, Jim McGaughey, Mag Morelli, Carl Schiessl, Scott Sussman

Members absent: Matt Barrett, Kadesha Collins, Judge Darby, Richard Kamin, Sherry Ng, Cynthia O'Sullivan, Yuliya Riat, John Spencer, Jonathan Weber, Gary Wiemokly, Tracy Wodatch

DPH: Melia Allan, Dante Costa

Introduction

- Barbara opened the meeting and welcomed members
- The group approved the February 6, 2024 minutes

MOLST Form Discussion

- Discussion of the address field within the MOLST
 - For houseless people, the group decided that they would not dictate how to fill out the address field
 - The group was interested in making the address field optional in case an address has changed – the form should not be invalid just because the address has changed or is incomplete
- Discussion of the diagnosis section
 - The group revisited the goals of treatment subsection, to discuss hospitalization
 - This section was finalized by the members present
- Barbara Cass recommended that physicians of the group “trial” the current form alongside the current approved form and let the group know if there are challenges, or if the updated form works well
 - Scott Sussman volunteered to begin integrating this form
 - Amelia Breyre volunteered to circulate the form among EMTs if it would be useful – recommended that a “mock” form be filled out
- Discussion of miscellaneous provisions across the form
 - Barbara flagged some loose ends and phrasing edits that may need to be made to clarify the form
- Discussion of lime green form vs electronic form
 - The group is supportive of making the form more accessible, but the color is probably preferred; the group needs more feedback from EMS before making a decision

Massachusetts MOLST – Cathy Ludlum

- Cathy gave an overview of MOLST’s intersection with disability rights, as well as the differences between Connecticut and Massachusetts MOLST forms
- In Connecticut, disability rights advocates got involved with MOLST because they had a lot of misgivings with it, including confusion that providers have between chronic disability and terminal illness, as well as medical practitioners potentially steering people away from life sustaining treatments
- CT is a model of a disability-friendly MOLST
- Cathy spoke about the expanded guardianship process
- In MA, Medicare licensing requires that every nursing home has the end-of-life care discussion with each resident
 - This is being implemented as “every resident must have a MOLST,” which is not what it says
- In MA, the MOLST does not have a do everything option (full treatment) like Connecticut’s does
- Discussion
 - Barbara brought up the discussions of portability of MOLSTs and how this may impact CT especially with neighboring states
 - Jim brought up the importance of looking at different classifications of guardians/conservators

Update on HB 5290

- DPH update: the agency is continuing to work through any challenges with knowledge or awareness of the MOLST witness signature provision

Closing

- Barbara Cass adjourned the meeting at 10:35am