



State Representatives Tom Brinkman Sponsor Testimony- HCR 26

Chairwoman Manchester, Vice Chair Cutrona, Ranking Member Denson and members of the House Families, Aging and Human Services Committee, thank you for allowing me to share with you House Concurrent Resolution 26, which would protect the fundamental and sacred rights of the medically vulnerable and their ability to not only make medical decisions but also to designate an individual to do so on their behalf.

Over the recent years, especially during the COVID pandemic, there has been growing and serious concern over the ability to maintain medical decision-making by individuals or their representatives. Hospitals and medical facilities offer a maze of bureaucratic forms that can be confusing under the best of circumstances, but are an excessive burden for those who are experiencing a medical emergency or in medically vulnerable situations. Though it would be ideal for everyone to have a healthcare power of attorney to help guide the decision making, that is not always the case, nor is it a practical expectation that provides proper safeguards and patient protections. This reality can have profound effects, especially decisions regarding life-sustaining care and has had the real result of ending a human life before a dispute over a medical decision has been fully considered.

HCR 26 would reaffirm the rights of all Ohioans to due process, the right to make personal medical decisions, and the right to life. Further, it would find that this is in the public interest to maintain such life-sustaining care for a patient until due process has been followed and a definite decision made by an impartial decision-maker rendered in such disputes over the continuation or withdrawal of life-sustaining care. Our state's experience with the recent COVID-19 restrictions which in some cases led to the isolation of some hospitalized patients and

senior citizens in various nursing facilities, created unprecedented circumstances where family members could not, or felt that they were prevented, from directly interacting with their loved ones or reasonably assess their status. In some instances, families have even been denied all basic human contact access to their loved one. This highlights the importance of reaffirming that it is the patient or surrogate decision-maker's right to direct medical decisions in conjunction with the physician's recommendations, and to give affirmative consent for the refusal of treatments.

The seriousness of these issues cannot be more plainly stated. These issues have impacted all Ohioans. Patients and their expressed wishes should be driving the decisions about receiving or denying medical care. Important decisions such as these cannot be subjective and based solely on a medical's professional opinion of "quality of life" or any other similar arbitrary reasoning. Health care decisions belong to the patient, their family, and designated representatives, not an administrator making a judgement call on the "worth" or "quality" of continued life.

I would hope that you would join with me and the co-sponsors of this resolution to make a firm statement on Ohio's commitment to the rights of the individual or their chosen representative to direct decisions relating to their own health care and treatment. Thank you for you for the opportunity today. I would be happy to take any questions the committee may have.