

There is a new nonprofit organization in California, A Better Exit, that is trying to expand California's End of Life Option Act (EOLOA) for medical aid in dying (MAID) via a legislative proposal. Currently, in order to be eligible for MAID, Californians must meet the following requirements:

1. Be a California resident.
2. Be 18+ years old.
3. Be able to communicate health care decisions — be of “sound mind.”
4. Have a terminal illness with six months or less to live.
5. Be able to self administer the medication, which means that it needs to be ingested. The American Medical Association has defined ingestion as something that is introduced anywhere within the gastrointestinal tract. So, this can be swallowed, introduced through a feeding tube or a rectal tube, but the patient has to manage the cup or straw if being swallowed or push a plunger on a syringe if being introduced through a tube.

The final three requirements combined exclude many people living with some type of neurodegenerative disease such as Alzheimer's (or any type of dementia), ALS, Parkinson's, and many others because by the time the person meets the requirement of having less than six months to live, they either are no longer of “sound mind” or they can no longer physically self administer the medication.

A Better Exit is grateful that California has MAID available, but feels California's law is very restrictive, particularly when compared to other countries around the world that have MAID. While A Better Exit appreciates the work that Compassion & Choices has done to get MAID in the ten states & District of Columbia where it is available, their understanding is that Compassion & Choices' goal is to get the same 26 year old law in place in every state before looking at ways to improve the law. A Better Exit doesn't think Californians should wait for that to happen.

A Better Exit is requesting the following three specific changes to the current law:

1. Broaden the eligibility criteria for MAID to allow for inclusion of individuals who are suffering from grievous and irremediable diseases and have longer life expectancies than six months.
2. Allow an individual the choice to self-ingest or receive an IV infusion when utilizing MAID, in accordance with their personal preferences and medical needs.
3. Allow a person with early to mid-stage dementia to be evaluated for and access MAID when two physicians find that they have sufficient capacity to understand the consequences of their choice.

To learn more about this legislative proposal and to sign up in support, please visit [www.ABetterExit.org](http://www.ABetterExit.org). Additionally, if you belong to an organization that could be approached about supporting this legislative effort, please send an email to [contact@ABetterExit.org](mailto:contact@ABetterExit.org). Just as Brittany Maynard became a recognizable advocate

for MAID, A Better Exit is looking for individuals who might be willing to share their stories of wanting to receive medical aid in dying, but aren't eligible under the currently restrictive California law. If you or someone you know would be willing to discuss this possibility with A Better Exit, please email them at [contact@ABetterExit.org](mailto:contact@ABetterExit.org).