

District of Columbia Death with Dignity Act

2022 Data Summary



Death with Dignity Executive Summary

DC | **HEALTH**

 GOVERNMENT OF THE
DISTRICT OF COLUMBIA
MURIEL BOWSER, MAYOR

The District of Columbia Death with Dignity Act of 2016, DC Law 21-182, was effective on February 18, 2017, and applicable as of June 6, 2017. The Act establishes a process by which competent terminally ill residents of the District of Columbia can legally obtain a physician's prescription for drugs to end their life in a humane and peaceful manner. Terminally ill patients must be District of Columbia residents who have been medically confirmed to have less than six months to live.

2022 Statistics

DC Health is required by law to collect compliance information and issue an annual report. The participation summary is for the period of February 19, 2021, to February 18, 2022. During this period, there were eleven (11) prescriptions written for a covered medication¹, eleven (11) qualified patients² with written prescribed and dispensed medications. One qualified patient died before ingesting prescribed covered medications. Two qualified patients died before the prescribed medication was dispensed by the pharmacy. Two physicians wrote prescriptions for covered medications.

Below, Table 1 provides an annual statistical report of information that must be collected and reported by DC Health in accordance with D.C. Official Code § 7-661.07(b). Figure 1 shows trends from 2018 to 2022.

¹ As defined in D.C. Official Code § 7-661.01(5).

² As defined in D.C. Official Code § 7-661.01(15).

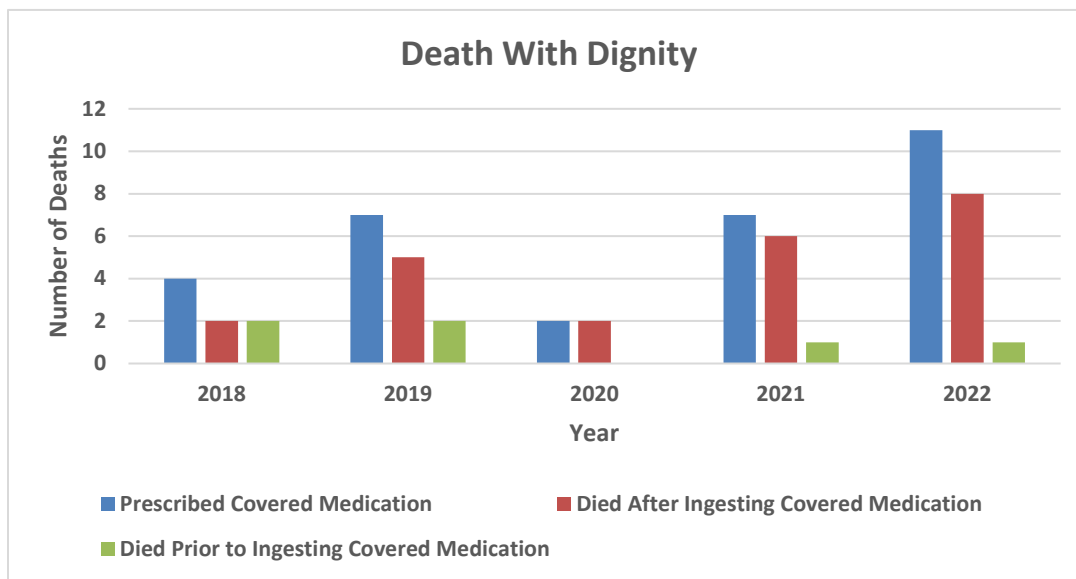
Table 1. Demographics of Death with Dignity Participants for Reporting Year 2022								
Number of qualified patients for whom a prescription for a covered medication was written.		Number of known qualified patients who died each year for whom a prescription for a covered medication was written, and the cause of death of those patients.			Number of known deaths in the District from using a covered medication.		Number of physicians who wrote prescriptions for a covered medication.	
11		11			8		2	
Demographic characteristics for qualified patients who consumed a covered medication and died.								
Age at death	56	55	80	79	88	40	84	84
Education level, if known	Bachelor's Degree	Bachelor's Degree	Doctorate Degree	Bachelor's Degree	Doctorate Degree	Master's Degree	Bachelor's Degree	Doctorate Degree
Race	Black	White	White	White	White	White	White	White
Sex	Male	Male	Female	Female	Male	Male	Male	Male
Type of insurance, including whether or not they had insurance, if known	Commercial ³	Commercial	Government ⁴	Government	Commercial	Commercial	Government	Government
Terminal disease	Cancer	Cancer	Brain Tumor	Amyotrophic Lateral Sclerosis (ALS)	Congestive Heart Failure	Cancer	Cancer	Cancer
The cause of death for one (1) patient for whom a prescription for a covered medication was written but died prior to ingesting the covered medication.								
Cause of Death	Cancer							
Two (2) qualified patients died before the prescribed medication was dispensed by the pharmacy.								
Cause of Death	Cancer							
Cause of Death	Cancer							

Source: District of Columbia Department of Health, Health Regulation and Licensing Administration

³ Commercial health insurance, also called private health insurance, is coverage issued by a private company or entity; such health insurance does not include any type of health insurance coverage provided or maintained by a government-run program.

⁴ Government health insurance refers to any insurance program run by U.S. federal, state, or local governments in which people have some or all of their healthcare costs paid for by the government. The two main types of public health insurance are Medicare and Medicaid.

Figure 1. Number of Death with Dignity participants and known deaths, District of Columbia, 2018 to 2022.



Source: District of Columbia Department of Health, Health Regulation and Licensing Administration