Good afternoon everyone and thank you for being here. Over the next few months, this committee will be looking at many important issues facing Americans as they confront their long-term needs. Today, we are going to discuss end-of-life care.

What kind of medical care would you want if you were too ill to express your wishes? And, who would you want to make important decisions about your health if you could no longer do so yourself?

These are difficult questions to ponder and even harder conversations to have with your loved ones. Polling shows that most Americans want to have a conversation about their advanced care needs, but like many other aspects of long-term care, they don't know how or with whom to have these conversations.

Consequently, most Americans haven't taken steps to fill out a living will or designate a health care proxy. In fact, one recent survey found that only 29 percent report having a living will that states their wishes on end-of life medical care.

So what can we do to get people talking and informed about this issue? One option would be for the Centers for Medicare and Medicaid Services (CMS) to revisit its decision to remove advance care planning as something that could be reimbursed as part of the Medicare's new annual wellness. Another would be for the Department of Health and Human Services to update research on advance directives last done under the Bush Administration.

I am happy to have a wonderful panel before us today that can shed some light on what's preventing most Americans from making their health care wishes known and how best to educate the public about exercising their options.

I look forward to our discussion.