



Advance Directives Policy & Procedure

Affected LCI Units: Care Management

Developed Date: November 2014

Policy Number: MSUP0001

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Last DHS Approval: N/A

Policy Owner: Member Supports

Authorization & Date:

11/24/14

Purpose:

Lakeland Care, Inc. (LCI) will support members to appropriately document advance directives and will comply with federal and state laws as it relates to advance directives.

Scope:

This policy applies to all LCI members and IDT staff.

Definitions:

Advance Directives: *Advance Directives* are a person's written wishes regarding medical treatment, made to ensure those wishes are carried out if the person is ever unable to communicate them to a doctor.

Do Not Resuscitate Order: A *Do Not Resuscitate Order* is a legal order written either in the hospital or on a legal form to withhold cardiopulmonary resuscitation (CPR) or advanced cardiac life support (ACLS), in respect of the wishes of a patient in case their heart were to stop or they were to stop breathing.

Living Will: A *Declaration to Physicians/Living Will* authorizes the withholding or withdrawal of life-sustaining procedures or of feeding tubes when two (2) physicians, one of whom is the attending physician, have personally examined and certified in writing that the patient has a terminal condition or is in a persistent vegetative state.

Power of Attorney for Health Care: A *Power of Attorney for Health Care* authorizes a competent adult to designate another person(s) (health care agent) to make decisions on their behalf about their medical care in the event they become incapacitated.

Incapacity: the inability to receive and evaluate information effectively or to communicate decisions to such an extent that the individual lacks the capacity to manage his or her health care decisions.

Policy:

LCI encourages members to clarify medical treatment preferences while they are mentally and/or physically capable of doing so. An individual can do this through the execution of an advance directive, which includes any of the following:

- Living Will specifying preferences for medical care, e.g. a desire for treatment options.
- Power of Attorney for Healthcare specifying the person (agent) designated to make decisions about medical interventions in the event the person becomes incapable of doing so.
- Do Not Resuscitate (DNR) Order specifying a competent and fully capacitated member's desire to refuse resuscitation. Specific medical criteria must be met in order to have a DNR in place.

- Other verbal or written documentation specifying the person's treatment preferences or refusal of specific treatments or medical care.

Lakeland Care, Inc. will:

- Ensure compliance with related federal and state regulations with respect to execution of advance directives.
- Update all written information related to Advance Directives in compliance with State law when changes are made as soon as possible, but no later than 90 days of the effective date of the change.
- Not base the provision of care or otherwise discriminate against a member based on whether or not the member has executed an advance directive.
- Provide all members with information about their rights under state law to make decisions about their medical care, to accept or refuse medical or surgical treatment, and to formulate an advance directive.
- Inform members about LCI's policy and procedure on advance directives.
- Provide referral to appropriate community resources, including the resource center, for any member or individual seeking assistance in the preparation of advance directives.
- Provide training and education on advance directives to LCI staff and the community at least every three years, or more often with changes. Training will include information on recognizing, minimizing, or eliminating potential conflicts of interest associated with completion and execution of advance directives.

Procedure:

1. At the time of enrollment, Lakeland Care, Inc. (LCI) will provide written information, via the Member Welcome Packet, regarding:
 - a. The individual's rights under Wisconsin law (statutory or recognized by Wisconsin courts) to make decisions concerning medical care, including the right to accept or refuse medical or surgical treatment and the right to formulate advance directives;
 - b. The individual's right to file a grievance with the Department of Health Services, Division of Quality Assurance, regarding noncompliance with advance directive requirements;
 - c. LCI's written policies respecting the implementation of such rights, including a statement on any limitation regarding implementation of advance directives as a matter of conscience.
2. Interdisciplinary Team (IDT) staff will provide members with written information on durable power of attorney for health care if one is not established. IDT staff will also refer to appropriate community resources, or assist if requested, in the preparation of advance directives.
3. IDT staff will inform members of their right to file a complaint with the Department of Health and Family Services, Bureau of Quality Assurance, regarding noncompliance with advance directive requirements.
4. IDT staff will assist members, if requested, in filing a complaint with the Division of Quality Assurance regarding noncompliance with advance directive requirements. IDT staff will consult with a CM Supervisor and Member Rights Specialist to assist in addressing the member's complaint, which may include assisting the member in filing a complaint.
5. IDT staff will complete the care management Advance Directives worksheet in the electronic member record, and document the presence or absence of an advance directives document in the Member Centered Plan.
 - a. IDT staff will:
 - i. Obtain and document the name and contact information of the legal decision maker.
 - ii. Obtain and document the decision making authority and limitations of legal decision makers as outlined in the advance directive.

- iii. Update documentation regarding the activation or deactivation of advance directives.
6. If a member has executed an advance directive, IDT staff will review the document to ensure completeness and adherence to Wisconsin law. IDT staff will also make a copy and scan the document in the member record.
7. If a member has not executed an advance directive, IDT staff will reaffirm the member's right to make decisions concerning medical care, including the right to accept or refuse medical treatment and the right to formulate advance directives. IDT staff will review this right with members annually and document in the member record the education provided.
8. If a member is interested in completing an advance directive, IDT staff will provide the phone number of the Aging and Disability Resource Center (ADRC), and/or offer to provide a blank copy of Wisconsin *Power of Attorney for Health Care*.
9. If a member specifically requests assistance in completing an advance directive for health care, IDT staff will provide blank copy of *Power of Attorney for Health Care*, (found at www.dhs.wisconsin.gov/forms/advdirectives)
 - a. IDT staff will explain:
 - i. Selection of health care agent
 - ii. Need for two witnesses
 - iii. Incapacitation process
 - b. IDT staff may explain the process, assist in identification of a health care agent, and assist in completing the form, but may NOT act as a witness.
10. IDT staff must document discussions on advance directives with a member and/or legal representative in a case note.
11. If at the time of initial enrollment, the member is incapacitated and unable to receive advance directive information, the IDT staff will review applicable information with the legal decision maker. This may include information about Advance Directive options should the member again become capacitated.
12. If during the course of the member's enrollment, they are no longer deemed incapacitated by a physician, IDT staff will obtain a copy of the deactivation documentation from the physician's office, and update pertinent records.
13. IDT staff will provide the member or their informal supports with information regarding advance directives upon the removal of the incapacitation regardless of the presence of previous advance directives.

Reference/Cross Reference(s):

Department of Health Services (DHS) Contract