



Policy and Procedure

Policy Name:	Advance Health Care Directive Information Is Offered		
Effective Date:		Revision Date:	
Department(s)/Site(s):			
Document Owners:			
Approved By:			
Relevant Law/Standard:	<p>California Department of Health Care Services under Title 22, California Code of Regulations, Section 53230. (Requires the review and certification of Primary Care Practitioner (PCP) sites.)</p> <p>Department of Health Care Services (DHCS) All Plan Letter 20-006, Site Reviews: Facility Site Review and Medical Record Review</p> <p>California Probate Code, Sections 4701; 42 CFR 422.128:42 CFR</p> <p>Assembly Bill No. 3000 Chapter 266)</p>		

Purpose:

To identify adult patients (18 years and older or emancipated minors) have been offered information on Advance Health Care Directives and, if executed, patient’s preferences are maintained within the Medical Record.

Definitions:

Advance medical directives: These directives pertain to treatment preferences and the designation of a surrogate decision-maker in the event that a person should become unable to make medical decisions on their own behalf. Advance directives generally fall into three categories: living will, power of attorney and health care proxy.

A living Will

- This form lets you list the care you want at the end of your life.
- A living will applies only if you won’t live without medical treatment. It would apply if you had
- Advanced cancer or a massive stroke. .
- It takes effect only when you can no longer express your wishes yourself

A Durable Power Of Attorney for Health Care

- This form lets you name someone else to be your agent.
- This person can decide on treatment for you only when you can’t speak for yourself.
- You do not need to be at the end of your life. He or she could speak for you if you were in a coma but more likely to recover.

A health care proxy is a document that names someone you trust as your proxy, or agent, to express your wishes and make health care decisions for you if you are unable to speak for yourself. A health care proxy may also be called a durable medical power of attorney or an appointment of a health care agent or health care surrogate.

Policy:

Adult (18 years and older or emancipated minors) medical records include documentation of whether the member has been offered information or has executed an Advance Health Care Directive (AHCD).

The AHCD is reviewed with the patient every 3-5 years as appropriate to the member's circumstance.

Physician Orders for Life-Sustaining Treatment (POLST) form and Five Wishes are acceptable if appropriately completed and signed by the necessary parties.

Procedure:

1. Provide AHCD information
2. Discuss AHCD preferences with patient
3. Document information provided, completed AHCD in patient's Medical Record or document patient's declination to execute.
 - a. Optional - Provide other options: POLST/Five Wishes – document in patient's Medical Record

First Name Last Name – Title

Date

First Name Last Name – Title

Date

The material in this document is a knowledge-sharing tool provided by the FSR team to enhance compliance with Facility Site Review requirements. All content is for informational purposes and may be used and/or modified according to site-specific practices. Ensure appropriate review and approval by site management prior to adoption.

Appendix A: Example of Advanced Health Care Directive Work Flow

