



Advance Directives: Planning in Advance

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Objectives

- Define Advance Care Planning & Advance Directives
- Historical Timeline
- Evidence Behind Advance Directives
- Practical Applications in Clinical Practice

Advance Care Planning (ACP)

- ACP focus is communication
- Can be facilitated with some various types of guides or aids for planning
- Billable service
- Documentation is either AD or charting
- Can be facilitated by clinician or independent by individual
- NOT require lawyer but often part of estate planning

Advance Directives (AD)

- Living Will
- Health Care Power of Attorney
- Do Not Resuscitate (DNR) order
- ...orders for life-sustaining treatment (POLST or MOLST)

ACP vs AD



ACP or Advance Care Planning is focused on the process, mainly about COMMUNICATION.

AD or Advance Directives is focused on the products, or the legal DOCUMENTS.



Living Will

- LEGAL document
- express one's wishes, preferences, and LIMITS
- of FUTURE hypothetical situation
- preserving AUTONOMY of individual's choice
- guides clinicians & families in an IF/THEN scenario

Health Care Power of Attorney

- LEGAL document
- identifying individual's DESIGNATE
- to MAKE DECISIONS on the individual's behalf
- if/when individual is INCAPACITATED
- guides clinicians & families in an IF/THEN scenario

Do NOT resuscitate (DNR)

- LEGAL document
- identifying LIMIT of CPR (cardiopulmonary resuscitation)
- guides clinicians & families in an IF/THEN scenario, specifically with cardiac or respiratory arrest

POLST/MOLST

- LEGAL document
- Portable Medical Orders: (life sustaining treatments)
- Not legal in all states including Ohio
- more specific on LIMITS beyond CPR

POLST

Historical Timeline: Advance Directives

- Lack clear “starting line”
- Response to social and technological changes
- Living Will dates back to 1967, Luis Kutner
- Power of Attorney dates back to “common law” colony
- Patient Self-Determination Act (PSDA) Dec 1991

Federal versus State Authority

- Minimal, notably the Patient Self-Determination Act (PSDA) Dec 1991
- Otherwise, it defers to state law
- ONE exception is military personnel, preempts state law.

Land Mark Cases

- Karen Ann Quinlan
- Nancy Cruzan
- Terri Schiavo

Shortcoming of AD

*The committee, while recognizing the value of advance directives, questions the urgency of intensive efforts to universalize their use. In this area of decision making at the end of life, the law's favorite product—the legally binding document—may sometimes **stand in the way of, rather than ease**, the process, especially if these documents are naively viewed as ultimate solutions to the difficulties of decision making. Rather, the documents known as advance directives should be seen as a **set of tools** useful in the ongoing process of advance care planning.*

▪ (IOM 1997, 203)

SUPPORT Trial

- phase I observation documented shortcomings
 - in communication,
 - frequency of aggressive treatment,
 - and the characteristics of hospital death
- phase II
 - patients experienced no improvement in patient-physician communication
 - or in the five targeted outcomes

ACP is a billable service

- Advance care planning (ACP)
 - voluntary
 - face-to-face discussion
 - between a clinician
 - patient, their family member, caregiver, or surrogate
 - to discuss the patient's health care wishes if they become unable to make their own medical decisions

ACP documentation

In your documentation, include:

- visit was voluntary
- explanation of advance directives
- who was present
- time spent discussing ACP during the face-to-face encounter
- any change in the patient's health status
- The patient's health care wishes if they become unable to make their own decisions

ACP is a billable service

Table 1. Time Thresholds and Ranges for Medicare Reimbursement for Advance Care Planning Services

Time in ACP (minutes)	ACP CPT code(s)
0–15	Not separately billable
16–45	99497
46–75	99497 and 99498
76–105	99497 and 99498 x 2
106–135	99497 and 99498 x 3
ACP, advance care planning; CPT, current procedural terminology.	

Source: Jones, Christopher A et al. "Top 10 Tips for Using Advance Care Planning Codes in Palliative Medicine and Beyond." *Journal of palliative medicine* vol. 19,12 (2016): 1249-1253. doi:10.1089/jpm.2016.0202

Evidence

- Legislations, institutional policies, and cultural factors influence ACP development.
- Positive perceptions toward ACP do not necessarily translate into more end-of-life conversations.
- Many factors related to patients' and providers' attitudes, and perceptions toward life and mortality influence ACP implementation, decision making, and completion.

Evidence

- Limited, low-quality evidence points to several ACP benefits, such as improved end-of-life communication, documentation of care preferences, dying in preferred place, and health care savings.
- Recurring features that make ACP programs effective include **repeated and interactive discussion sessions**, decision aids, and interventions targeting multiple stakeholders.

Applications in Clinical Practice

- ACP starts with communication.
- Advance Directives can be an unfamiliar and uncomfortable conversation for clinicians and patients/families.
- Numerous Tools/Guides/Protocols

Applications in Clinical Practice

- Fee-based service:
 - Attorney
 - Commercial Products
- FREE-based service:
 - Patient
 - <https://prepareforyourcare.org/en/welcome>
 - <https://theconversationproject.org/>
 - Clinician
 - <https://www.ariadnelabs.org/wp-content/uploads/2023/05/Serious-Illness-Conversation-Guide.2>

Prepare For Your Care



Prepare For Your Care



The Conversation Project

the conversation project

Helping people share their wishes for care through the end of life.

Free Guides

- Conversation Starter Cards
- Guide to Planning a Health Care Proxy
- Guide to Being a Health Care Proxy
- Guide for Talking with a Health Care Proxy
- What Matters to Me Worksheet
- Guide for Companies of People with Advance Care Directives
- Guide for Companies of Older with Advance Directives
- Being Prepared to Be There at the End of Life

Serious Illness Conversation Guide

Serious Illness Conversation Guide

Helping Patients Understand

1. How do I talk together about what I hope for my health and what wishes I have about the end?

2. How do we know what we want? How do we know if we have a good understanding of what we want and what we need?

3. How do we know what we might be afraid of about my health and how to handle it if it happens?

4. How do we know what we want if we are not sure? How do we know what we need if we are not sure? How do we know what we want if we are not sure? How do we know what we need if we are not sure?

5. How do we know what we want if we are not sure? How do we know what we need if we are not sure? How do we know what we want if we are not sure? How do we know what we need if we are not sure?

6. How do we know what we want if we are not sure? How do we know what we need if we are not sure? How do we know what we want if we are not sure? How do we know what we need if we are not sure?

7. How do we know what we want if we are not sure? How do we know what we need if we are not sure? How do we know what we want if we are not sure? How do we know what we need if we are not sure?

8. How do we know what we want if we are not sure? How do we know what we need if we are not sure? How do we know what we want if we are not sure? How do we know what we need if we are not sure?

9. How do we know what we want if we are not sure? How do we know what we need if we are not sure? How do we know what we want if we are not sure? How do we know what we need if we are not sure?

10. How do we know what we want if we are not sure? How do we know what we need if we are not sure? How do we know what we want if we are not sure? How do we know what we need if we are not sure?

History Advance Directives

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Advance care planning and advance directives: an overview of the main critical issues
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The evolution of health care advance planning law and policy
Sabatino CP
Milbank Quarterly. 2010 Jun; 88(2):211-39.

History Advance Directives

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Looking Back at Withdrawal of Life-Support Law and Policy to See What Lies Ahead for Medical Aid-in-Dying.
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The Yale Journal of Biology and Medicine. 2019 Dec 20;92(4):781-791

SUPPORT Study
Journal of American Medical Association. 1995 Nov 22-29;274(20):1591-8.
 Erratum in: *JAMA 1996 Apr 24;275(16):1232.*

Resources

- [Veterans Affairs Advance Directives](#)
- [PREPARE \(prepareforyourcare.org\)](http://prepareforyourcare.org)
- [The Conversation Project - Have You Had The Conversation?](#)
- [Serious Illness Conversation Guide](#)
- [CMS - Advance Care Planning Annual Wellness Visit](#)