

Objectives

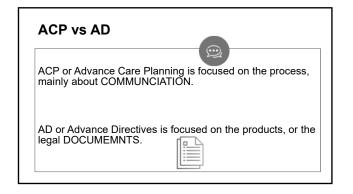
- Define Advance Care Planning & Advance Directives
- Historical Timeline
- Evidence Behind Advance Directives
- Practical Applications in Clinical Practice

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)



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

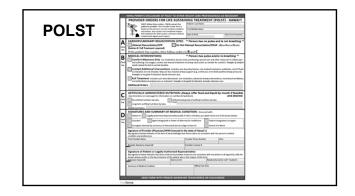
- LEGAL document
- identifying individual's DESIGNATE
- · to MAKE DECISIONS on the individual's behalf
- if/when individual is INCAPCITATED
- guides clinicians & families in an IF/THEN scenario

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



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.

■(<u>IOM 1997</u>, 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

Fime 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.

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

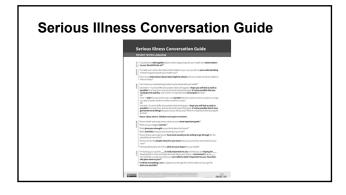
Applications in Clinical Practice

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

PREPARE for your care		Españo International Int
How to Use * The PREPARE 5 Steps * Summary of By Wishes: Advance Directive: Tools for Providers *		
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History Advance Directives

Advance Directives/Care Planning: Clear, Simple, and Wrong R. Sean Morrison

Journal of Palliative Medicine 2020 23:7, 878-879

Advance care planning and advance directives: an overview of the main critical issues

Sedini C, Biotto M, Crespi Bel'skij LM, Moroni Grandini RE, Cesari M. Aging Clinical Experimental Research 2022 Feb:34(2): 325-330.

The evoluation of health care advance planning law and policy Sabatino CP Milbank Quarterly. 2010 Jun; 88(2):211-39.

History Advance Directives

What is the evidence for efficacy of advance care planning in improving patient outcomes? A systematic review of randomised controlled trials. *Malhotra C, Shafiq M, Batcagan-Abueg APM.* BMJ Open 2022 Jul 19;12(7):e060201.

Swij Open 2022 Jul 19, 12(7).e000201.

Looking Back at Withdrawal of Life-Support Law and Policy to See What Lies Ahead for Medical Aid-in-Dying. Capron AM.

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

- <u>Veterans Affairs Advance Directives</u>
- PREPARE (prepareforyourcare.org)
- <u>The Conversation Project Have You Had The Conversation?</u>
- <u>Serious Illness Conversation Guide</u>
- <u>CMS Advance Care Planning Annual Wellness Visit</u>