



Advance Directives

Feeding tubes?

Respirators

How do we ensure the medical wishes of our members are followed?

Organ donations?

Renal dialysis?

Advance Directives defined

- Legal documents conveying decisions about end-of-life care
- Enables communication with family, friends, and health care providers to avoid confusion
- Not required, but instrumental in helping to ensure member's wishes are known

Goals of Advance Directives

- ✓ Protects member's rights to make their own health care decisions
- ✓ Provides opportunity to learn about options for care
- ✓ Encourages discussion of wishes for care with family and PCP
- ✓ Allows individual's wishes to be respected
- ✓ Reduces court involvement
- ✓ Defines legal protection for those who initiate
- ✓ Enhances quality of life

Role of the Primary Care Manager


- Educate members (what they are, why they are important)
- Encourage members to complete
- Ensure the PCP and PCT are aware
- **Document in CaseTrakker**

Advance Directives

Goals of Care 

Function 

Date	Member Completed Docs	Location of Docs	Notes
09/07/2012	DNR	PCP's office	
01/28/2013	Healthcare Proxy	In member's home	

 [Click here to add a new Advance Directive](#)

THP goals

Tufts Health Plan conducts advanced care planning discussions with members early and often, and encourages PCPs to do the same.

Tufts Health Plan's goal is to have a discussion regarding Advance Directive with all members within the first 90 days of enrollment, and to have an Advance Directive in place within the first year of enrollment.

Types of Advance Directives in Massachusetts

Health Care Proxy (HCP)

- Document allowing you to designate an individual to make health care decisions on your behalf if you are unable to make or communicate your decisions
- Can be a trusted family member, friend, attorney, or other designated person
 - Cannot be an operator, administrator, or employee of a hospital, nursing home, rest home, etc. where you are currently a patient
- In order for a Health Care Proxy to be legal, two witnesses must sign the proxy document

Types of Advance Directives in Massachusetts

Living Will

- Written statement of your wishes for medical treatment and end of life care in the event that you are unable to make health care decisions or communicate them directly
 - If you have appointed a HCP, Living Will instructions are recognized as evidence of your wishes
- May include provisions instructing physicians of the circumstances in which you want treatment to be withheld or withdrawn, including situations when you do not want drastic life-saving steps taken

Additional forms in Massachusetts

Comfort Care/Do Not Resuscitate (DNR)

- Document created and signed by the member (or their legal representative) and a Physician, Nurse Practitioner (NP), or Physician Assistant (PA)
- Expresses member's wish not to be resuscitated in the event that their heart was to stop or they would stop breathing
 - Generally accepted to cover cardiopulmonary resuscitation (CPR) and advanced cardiac life support (ACLS) – *might* allow for intubation, as this form does not specifically exclude
- Member can still receive antibiotics, chemotherapy, dialysis, etc.

Additional forms in Massachusetts

Medical Orders for Life Sustaining Treatment (MOLST)

- MOLST is a medical order form that relays instructions between health professionals about a patient's care
- Based on an individual's right to accept or refuse medical treatment, including treatments that might extend life
- The process requires discussions between the signing clinician, the patient, and family members/trusted advisors about:
 - The patient's current medical condition
 - What could happen next
 - The patient's values and goals for care and
 - Possible risks and benefits of treatments that may be offered
- **The signed MOLST form stays with the patient and is to be honored by health professionals in any clinical care situation**

Additional forms in Massachusetts

Medical Orders for Life Sustaining Treatment (MOLST)

- MOLST can cover:
 - Do Not Resuscitate/Attempt Resuscitation
 - Do Not Intubate and Ventilate/Intubate and Ventilate
 - Do Not Use Non-invasive Ventilation (e.g. CPAP)/Use Non-invasive Ventilation (e.g. CPAP)
 - Do Not Transfer to Hospital (unless needed for comfort)/Transfer to Hospital
- Additional preferences include:
 - Use intubation and ventilation as described, but short term only
 - Use non-invasive ventilation as marked, but short term only
 - No dialysis/Use dialysis/Use dialysis, but short term only
 - No artificial nutrition/Use artificial nutrition/Use artificial nutrition, but short term only
 - No artificial hydration/Use artificial hydration/Use artificial hydration, but short term only