

Department:	Care Management	Original Approval:	02/12/2016
Policy No:	CM118	Last Approval:	01/06/2025
Policy Title:	Advance Directives and Physician Orders for Life Sustaining Treatment (POLST) Policy		
Approved By:	Clinical Services Leadership Team		
Dependencies:	Advance Directives Procedure (CO291) Advance Directives Procedure (CO292) Advance Directives Policy & Procedure (CS528)		

Purpose

This policy defines the manner in which the Care Management staff and contracted providers of Community Health Plan of Washington (CHPW) will inform CHPW members of their right to implement Advance Directives and Physician Orders for Life Sustaining Treatment (POLST) documents.

Policy

CHPW Care Management staff and contracted providers will provide information to members who express an interest in developing and maintaining a Medical and/or Mental Health Advance Directive or a Physician Order for Life-Sustaining Treatment (POLST) document.

As part of the care management process of assessment, care planning, and ongoing care coordination with members, CHPW Care Management staff will include an evaluation of the member's existing Advance Directives and POLST, if available. If not available, they will provide education and resources to the member should they be interested in developing one.

CHPW will provide a copy of the Advance Directives policies and procedures and education upon request by providers, members, and/or the Healthcare Authority representatives.

Definitions

Advance Directive: - An Advanced Directive is a written document in which the principal makes a declaration of instructions or preferences regarding his or her medical and mental health treatment. The principal may also appoint an agent to make these decisions on his or her behalf. If the member wishes to appoint an agent to make decisions for them,



should they become incapacitated, a Durable Power of Attorney must be completed.

An advance directive provides written instructions about a member's future medical care if the member is unable to express his or her medical wishes. In the State of Washington, this written instruction is in the form of two documents: A **Health Care Directive** (also known as a Living Will) and a **Durable Power of Attorney for Health Care**.

A **Mental Health Advance Directive** provides instructions and/or appoints an agent to make decisions on behalf of the member if they become incapacitated by mental illness and are unable to communicate effectively.

An **Advance Directive** places the member's choices for health care into writing and tells the doctor and family what kind of health care they do or do not want if they:

- Have lost consciousness.
- Can no longer make health care decisions.
- Cannot tell their doctor or family what kind of care they want.
- Wish to donate their organ(s) after death.
- Want someone else to decide about their healthcare if they cannot.

There are three types of Advance Directives in use within Washington State:

- 1. Durable Power of Attorney for Health Care. This names another person to make medical decisions if the member is incapacitated and unable to make decisions for themselves.
- 2. Healthcare Directive (living will). This written statement tells people whether the member wants treatment to prolong their life.
- 3. Organ donation request.

If the member wishes to appoint an agent to make decisions for them, a Durable Power of Attorney must be completed. Beginning January 1, 2017, all Durable Power of Attorney for Health Care documents must either be witnessed by two individuals or be notarized. Powers of Attorney executed prior to January 1, 2017, will remain valid.

Copies of completed Advance Directives should be maintained as part of the physician's clinical records.

Agent - An Agent is a person to whom authority is given to make decisions on behalf of the member.

Member- A member is an adult who has executed a Medical and/or Mental Health Advance Directive or POLST.



Physician Orders for Life-Sustaining Treatment (POLST): The Physician Orders for Life Sustaining Treatment (POLST) is a form that gives seriously ill patients more control over their end-of-life care, including medical treatment, extraordinary measure (such as a ventilator or feeding tube) and CPR.

The members physician can use the POLST form to represent the members wishes as clear and specific medical orders. Members should be encouraged to contact their doctor to learn more. Forms are available at the physician's office or by contacting <u>Washington State Medical</u> <u>Association POLST resources</u>.

Copies of completed POLST documents should be maintained as part of the physician's clinical records.

Principal - A Principal is any individual who has capacity and who gives another individual the legal authority to act on their behalf.

List of Appendices

A. Detailed Revision History

Citations & References

CFR	42 CFR 422.128; 42 CFR 438	
WAC		
RCW	71.32	
LOB & Contract		IMC Section 10.3: Advance Directives and
Citation	🗆 внѕо	Physician Orders for Life Sustaining Treatment
	□ Wraparound	(POLST)
	SMAC	
	□нн	SMAC Section 6.6.5: discuss advance care planning
	🖾 AHE	AHE Section 10.3: Advance Directives and
		Physician Orders for Life Sustaining Treatment
		(POLST)
	🖾 MA/DSNP	MMCM Ch 4 section 180
	⊠ CS	P&P supports all LOB requirements
Other		
Requirements		
NCQA Elements	PHM5 Element D	



References

Revision History

SME Review:	04/13/2018; 04/10/2019; 02/25/2020; 02/12/2021; 01/20/2022, 1/04/2023; 12/09/2024
Approval:	03/22/2017; 04/16/2018; 04/11/2019; 03/30/2020; 03/03/2021; 01/28/2022; 01/19/2023; 12/29/2023; 01/06/2025



Appendix A: Detailed Revision History

Revision Date	Revision Description	Revision Made By
02/12/2016	Original	Melissa Shilipetar
03/22/2017	Approval	MMLT
04/13/2018	Annual update	Darla Bernstein
04/16/2018	Approval	Patty Jones, SVP
04/10/2019	Annual update	Darla Bernstein
04/11/2019	Approval	Patty Jones
02/25/2020	Annual update	Darla Bernstein
03/04/2020	Approval	Ma'ata Hardman
03/30/2020	Approval	CMO Cabinet
02/11/2021	Ownership change to CM	Cindy Bush
02/12/2021	Annual update	Shannon Baker
03/02/2021	Approval	Shanna Widener
03/03/2021	Approval	CMO Cabinet
01/20/2022	Annual update	Shannon Baker
01/21/2022	Approval	Shanna Widener
01/25/2022	Approval	Ma'ata Hardman
01/28/2022	Approval	CMO Cabinet
01/04/2023	Reviewed policy, appendix updated	Melissa Covarrubias
01/05/2023	Revised and reviewed	Danielle Maronick
01/05/2023	Approval	Shannon Baker
01/13/2023	Approval	Shanna Widener
01/17/2023	Approval	Ma'ata Hardman
01/19/2023	Approval	CMO Cabinet
12/04/2023	Reviewed policy, no changes	Cyndi Stilson
12/05/2023	Review and Revision	Danielle Maronick
12/11/2023	Approved	Shannon Baker
12/29/2023	Approval	Shanna Widener
12/29/2023	Approval	Ma'ata Hardman
12/29/2023	Approval	Clinical Services
		Leadership Team
12/09/2024	Reviewed policy, no changes	Cyndi Stilson
12/11/2024	Reviewed	Kara Smith
12/13/2024	Approval	Shannon Baker
12/27/2024	Approval	Shanna Widener



12/28/2024	Approval	Ma'ata Hardman
01/06/2025	Approval	Clinical Services
		Leadership Team