



It is the policy of BHI to follow applicable State law and Federal Regulations regarding advance directives and to provide adult enrollees with written information on advance directives and BHI's advance directive policy.

Definitions:

Advance Directives are written instructions recognized under State law relating to the making of medical treatment decisions and the provision of health care when or if an individual is incapacitated. Advance directives recognized under Colorado law include, but are not limited to:

Medical Durable Power of Attorney is a legal document naming an "agent" or "attorney in fact" to make health care decisions for an individual if s/he can not make them, even if s/he is not terminally ill;

Living Will instructs the individual's physician to withhold or withdraw life-sustaining procedures in the event that at some future time the individual is terminally ill, or has been unconscious, comatose or otherwise incompetent for a specific period of time of no less than 48 hours, or is unable to make or communicate responsible decisions about his/her care; and

Cardiopulmonary Resuscitation (CPR) Directive instructs medical personnel not to revive the individual, either by CPR, breathing tubes, electric shock, or anything else, if his/her heart and/or lungs stop.

Procedure:

1. BHI will provide all adult enrollees with written information on advance directives at the time of initial enrollment and annually thereafter. This information will include:
 - a. A description of applicable State law and the enrollee's rights under Colorado law
 - b. BHI's policies respecting the implementation of those rights, including a statement of any limitation regarding the implementation of advance directives as a matter of conscience
 - c. The fact that complaints concerning non-compliance with the advance directive requirements may be filed with the State Department of Public Health and Environment or BHI.

- d. The fact that enrollees are responsible to provide BHI and applicable facilities with a copy of their advance directive and to further inform them of any changes in their advance directive.
2. The information must reflect changes in State law as soon as possible, but no later than 90 days after the effective date of the change.
3. If the enrollee accesses services through one of BHI's core providers, s/he will be asked if s/he has an executed advanced directive in place at the time of accessing services. If so, the advance directive, and any future changes indicated by the enrollee will be documented in the "Medical Information" section of the individual's current medical or patient care record. Presence of an advance directive in the chart will be indicated by a large, prominently displayed sticker on the front of the chart. The sticker will indicate the date the initial advance directive was received and included in the chart, as well as the dates of any subsequent changes or modifications to the advance directive. BHI will ensure that it's providers have policies and procedures in place for the appropriate handling of advance directives.
4. BHI will make no attempt to persuade an adult enrollee to revoke or alter an existing advance directive.
5. The provision of care is not conditioned on the presence or absence of an advance directive. Individuals will not be discriminated against on the basis of whether or not an advance directive has been executed, amended, or revoked.
6. BHI will not provide care that conflicts with an advance directive, except in the following cases:
 - a. The individual is known to the attending physician to be pregnant, and a medical evaluation has determined that the fetus is viable and could with a reasonable degree of medical certainty develop to live birth with continued application of life-sustaining procedures;
 - b. A court petition to challenge the validity of an advance directive has been filed by the individual's spouse, adult children, parent, or attorney in fact under durable power of attorney, within forty-eight (48) consecutive hours after the certification by two (2) physicians that the individual has a terminal condition, in which case a temporary restraining order is issued until a final determination as to validity is made; and/or

- c. There is actual notice of revocation, fraud, misrepresentation, or improper execution of the advance directive.
7. In the event that an attending physician or health care facility refuses to comply with an advance directive on the basis of policies based on moral convictions, religious beliefs, or other conscientious objections, BHI will facilitate transfer of the individual to the care of another health care provider or health care facility willing to comply with the advance directive.
8. BHI will inform facility providers of their rights and responsibilities related to advance directives in the provider manual, through the BHI Website, and in provider and facility contracts.
9. Internal (MHC) staff will receive necessary training on advance directive policies and procedures at new employee orientation and annually thereafter.
10. BHI will not assist adult enrollees in developing advance directives, but will direct adult enrollees to available resources (i.e., the Colorado Bar Association, websites, etc.) upon request.

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