

Medicare Benefit: Advance Care Planning

Purpose

Medicare Part B provides coverage for a medical service called Advance Care Planning. The purpose of this medical service is to ensure that you understand how to have your wishes carried out should something happen and you cannot make the decision for yourself and that these wishes are documented in your medical record. Although many of us do not like to think about end of life, it is unavoidable, and each of us as Americans, should determine what happens based on our own values and beliefs. It is a deeply personal decision with no right or wrong answers.

Service

During this visit, your doctor will discuss what is important to you such as maximum pain relief and comfort. As your doctor they will explain exactly what that means. Your doctor will consult with you about cardiopulmonary resuscitation (“CPR”), ventilators to help you breathe if you are unable to do so by yourself, feeding and hydration and other medical interventions commonly used when patients are in distress or facing end of life.

Your doctor may also provide you important legal forms such as the Health Care Proxy form that allows you to appoint someone to make medical decisions for you in the instance that you cannot do so for yourself and the NYS Living Will form that allows you to document your advance directives informing medical providers, your friends and family of your specific wishes. You will never be obligated to complete any forms or make any decisions unless you decide you want to, and you can change your decision at any time. We encourage you to ask your doctor questions to really understand what your options are and what they may mean one day.

Financial Coverage

Advanced Care Planning is like any other Medicare Part B services and carries a 20% coinsurance. However, if your doctor provides this service during your Annual Wellness Visit, the 20% coinsurance does not apply and Medicare pays for the service 100%.

Topics to Think About & Discuss with Your Doctor

- Who would I want to make decisions about my care if I was unable to do so?
- Is there a backup person just in case that person is not available for some reason?
- How comfortable do I want to be? Would I want to feel any pain? Would I want to be able to communicate even if it meant feeling more pain?
- What types of life support treatment would I want to have? (CPR, Major Surgeries, Dialysis, Tube Feeding, Hydration, Blood Transfusions, Antibiotics)?
- Would my decisions vary based on my medical conditions (close to death; in a coma and not expected to recover, permanent and severe brain damage; other conditions)?

