

| HEALTH PLAN OF SAN JOAQUIN | | | | | |
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| Subject: Advance Directives | | | | | |
| Department: Medical Management | | | | Policy #: UM68 | |
| Effective Date: 7/1/05 | Committee/Approval Date: PRC 03/16 | Review/Revision Dates: 8/15 , 3/16 | | | |
| Applies To: | Medi-Cal | Yes | X | No | |
| | MCAP | Yes | | No | X |
| | TPA | Yes | X | No | |

PURPOSE

Health Plan of San Joaquin recognizes members’ rights to formulate Advance Directives, including the right to be informed of State law in respect to Advance Directives and receive information regarding any changes to that law. The information will reflect changes in State law regarding Advance Directives as soon as possible, but no later than 90 calendar dates after the effective date of change.

DEFINITIONS

- A. **Advance Directives:** Advance directives are specific instructions, prepared in advance, that are intended to direct a person's medical care if he or she becomes unable to do so in the future. Advance Directives allow patients to make their own decisions regarding the care they would prefer to receive if they develop a terminal illness or a life-threatening injury. Advanced care directives can also designate someone the patient trusts to make decisions about medical care, if the patient becomes unable to make (or communicate) these decisions.

PROCEDURE

- A. Members, eighteen (18) years of age and older and emancipated minors are notified of his or her right to formulate an advance health care directive at the time of initial enrollment and annually thereafter through the Combined Evidence of Coverage and Disclosure Form.
- B. Members will be referred to their Primary Care Physician (PCP) for detailed explanation of the Advance Directives process.
- C. Any changes to State laws regarding Advance Directives will be communicated to the member through member notice mailing and/or an update to the plan’s EOC.

REFERENCE

- A. 42CFR 422.128
- B. 42CFR 438.6(i)
- C. Department of Health Services Contract Attachment 18
- D. CS16 – Members Rights & Responsibilities

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| Health Plan of San Joaquin |
| Approval: Signatures on File |

DHCS Contract Deliverables/Stanislaus Medi-Cal

| <i>Contract Reference</i> | <i>Date of Approval</i> | <i>DHCS Unit</i> | | <i>Contract Reference</i> | <i>Date of Approval</i> | <i>DHCS Unit</i> |
|----------------------------------|--------------------------------|---|--|----------------------------------|--------------------------------|-------------------------|
| 13.d | 8/1/12 | <i>Member Rights & Program Integrity Unit</i> | | 13.9 | 5/26/16 | MMCD |