



July 5, 2018

## Advance Care Directive: Tips and Billing Information

The advance care directive is not a part of the CBI 2018 program. However, the Alliance encourages providers to continue having these important discussions. It's necessary for patients to document their wishes regarding their medical treatment to ensure that they are carried out, and should they become unable to communicate with their healthcare professional.

It's also important to reassure patients that most people have ambivalence around the specific treatments they would want under various circumstances, and it's possible that feelings on these issues might evolve over time. It's not necessary to know all the answers in order to begin advance care planning; having a meaningful discussion about general wishes with loved ones and healthcare providers is the most important step in the process.

Following are tips for starting the conversation with patients:

- \* Emphasize that all adults should contemplate and discuss their wishes around end-of-life care using language such as, "I like to ask all my patients to think about choices they might want to make for their future health care".
- \* Another approach may be to discuss advance care planning in terms of information I need from you to ensure that I respect your wishes."
- \* Ask the patient if they have written down their wishes, if they have discussed them with loved ones, and/or if they have someone they would trust to make healthcare decisions.
- \* Emphasis should be placed on having an ongoing conversation about end-of-life care rather than a single conversation where all decisions are made and documents are completed.

Providers are reminded to bill using the following codes:

- o Provider spends 20 minutes in discussion regarding advance care planning with the patient.
  - Bill 99497 (billable once the mid-point is reached)
- o Provider spends 46 minutes in discussion regarding advance care planning and completes an advance directive with the patient.
  - Bill 99497 AND 99498 (99498 is billable once the mid-point is reached)
- o Provider spends 40 minutes in discussion regarding advance care planning with the patient and the patient's family.
  - Bill 99497
  - 99498 is not billable since the mid-point was not reached.
- o Please ensure you are **no longer** billing code S0257. This is not a reimbursable code.