



DCS Comprehensive Health Plan INTERNAL POLICY

TITLE End of Life Care and Advanced Care Planning	POLICY NUMBER HS-MM-01
RESPONSIBLE AREA Health Coordination	EFFECTIVE DATE 08/31/2023
Initiated: 11/26/19 CHP Policy Committee Approval: 11/26/19; 05/28/20; 08/15/22; 08/15/23	

POLICY STATEMENT

This policy outlines a set of services for End of Life (EOL) Care and the provision of Advanced Care Planning covered by the Department of Child Safety Comprehensive Health Plan (DCS CHP).

AUTHORITY

[A.R.S. § 8-512](#), Comprehensive medical and dental care; guidelines.

[A.R.S. § 8-514.05\(C\)](#), Foster care provider and department access to child health information; consent to treatment.

[A.A.C. R9-22-215](#), Other Medical Professional Services.

The Intergovernmental Agreement (IGA) between Arizona Health Care Cost Containment System (AHCCCS) and Arizona Department of Child Safety (DCS) for DCS CHP outlines health plan operational requirements.

The contract between the Department of Child Safety (DCS) for the Comprehensive Health Plan (CHP) and it's the Managed Care Organization (MCO) contractor outlines the contractual requirements for compliance with the End of Life Care for DCS CHP members.

DEFINITIONS

Advanced Directive: A document by which a person makes provision for health care decisions in the event that, in the future, he/she becomes unable to make those decisions.

Advanced Care Planning: A part of the End of Life care concept and is a billable service that is a voluntary face-to-face ongoing discussion between a qualified health care professional and the member to:

- Educate the member/guardian/designated representative(s) about the member's illness and the health care options that are available to them;
- Develop a written plan of care that identifies the member's choices for treatment; and
- Share the member's wishes with family, friends, and his or her physicians.



Curative Care: Health care practices that treat patients for a terminal illness with the intent of improving or eliminating symptoms and to curing medical problems. An example is antibiotics for bacterial infections, or chemotherapy, which seeks to cure cancer patients.

End-of-Life (EOL) Care: A concept of care, for the duration of the member's life, that focuses on Advance Care Planning, the relief of stress, pain, or life limiting effects of illness to improve quality of life for a member at any age who is currently or is expected to experience declining health, or is diagnosed with a chronic, complex or terminal illness.

Hospice Services: A program of care and support for terminally ill members who meet the specified medical criteria/requirements.

Practical Support: Non-billable services provided to a member by a family member, friend or volunteer to assist or perform functions such as, but not limited to: housekeeping, personal care, food preparation, shopping, pet care, or non-medical comfort measures.

POLICY

DCS CHP through its contracted Managed Care Organization (MCO) covers medically necessary services provided by qualified providers for treatment, comfort, and quality of life for the duration of the member's life concurrently with curative and hospice care.

PROCEDURE

DCS CHP members are enrolled in Integrated Care Management (ICM) which monitors members to achieve quality of life through the provision of services such as physical and/or behavioral health treatment to:

- Treat the underlying illness and other comorbidities;
- Relieve pain; and
- Relieve stress.

Referrals to community resources for services such as, but not limited to:

- Pastoral/counseling services;
- Other services based on the member's needs; and
- Practical supports provided by a family member, friend or volunteer to assist or perform functions to support the family with non-billable services.

DCS CHP members are children placed in out-of-home care who have custodial and legal guardians. EOL Care and Advanced Care Planning meet the legal requirements of consent and court involvement as is dictated by Department of Child Safety (DCS) ([see DCS Program Policy, Chapter 5: Section 31, Services and Supports to Prepare Youth for Adulthood](#)).

Members may receive Curative Care concurrently with EOL care and hospice care.



The presence of Advance Directives does not affect the decision making or provision of care for members. A member is allowed to decide on the execution of the advance directive, and can choose not to without facing discrimination. No conditions to the provision of care are allowed because of the existence of Advanced Directives.

Advance Care Planning

DCS CHP in coordination with the MCO's Integrated Care Management team assists members, caregivers, DCS Specialists and other parties of the member's team in coordinating EOL care services and referrals to physicians for Advance Care Planning.

It is the responsibility of the member's qualified health care professional to conduct Advanced Care Planning and develop Advance Directives as part of EOL care. The qualified health care professional is also responsible to educate the member, biologic family if applicable, out-of-home caregiver, custodial guardian and legal representative about the member's illness and the health care options to enable them to make educated decisions. Advanced Care Planning includes the development of a written plan of care, completion of Advance Directives, and communication with additional medical providers.

Additional services may include:

- Identifying the member's health care, social, psychological and spiritual needs;
- Discussing the choices for care and treatment; and
- Assist in identifying practical support to meet the member's needs.

The member's qualified health care professional is also responsible for sharing the member's wishes and the Advanced Care Plan with family, caregivers, custodial agency representatives, DCS, the member's physicians and other providers such as home health staff, respite care, etc., and the courts if needed.

Any member, caregiver, legal guardian, DCS Specialist, or provider can request care management assistance from DCS CHP to facilitate EOL care and Advanced Care Planning services.

DCS CHP may identify the need for EOL care coordination through other health plan activities such as, authorizations, concurrent review of hospital stays, other utilization reviews and/or care management processes.

Providers are instructed to send a copy of a member's executed Advance Directive or documentation of refusal, to the member's Primary Care Provider (PCP) for inclusion in the member's medical record, and educate their staff on issues concerning Advance Directives.

General advance care directive information, including the members rights, applicable state law and the right to file complaints with Arizona Department of Health Services (ADHS) Division of Licensing must be made available to members on admission to a hospital or nursing facility and each time the member is in the care of a home health agency, hospice or personal care provider. If incapacitated at the time of admission, this information must be provided when the member is able to receive this information or be provided to the family member, caregiver or guardian.



REFERENCES

[AHCCCS Medical Policy Manual \(AMPM\), Section 310-HH - End of Life Care and Advanced Care Planning](#)

[AHCCCS Medical Policy Manual \(AMPM\), Section 310 -J Hospice Services](#)

[AHCCCS Medical Policy Manual \(AMPM\), Section 640 - Advance Directives](#)

DCS CHP Policy HS-CC-02 - Care Management

[DCS Program Policy, Chapter 5: Section 31, Services and Supports to Prepare Youth for Adulthood](#)

RELATED FORMS

N/A