

Massachusetts Health Decisions

Federal Patient Self Determination Act: Highlights

■ Bill sponsored by Senators Danforth (Rep-MO) and Moynihan (Dem-NY) and Congressman Levin (Dem-MI) was passed as part of the Omnibus Budget Reconciliation Act (OBRA) in November 1990 (Public Law 101-508; U.S.C. Sections 4206 and 4751, effective 12/1/91).

■ Applies to all health care facilities funded by Medicare or Medicaid (virtually all hospitals, hospices, home cares, HMOs, and extended care facilities in Massachusetts and nationwide)

Health care providers **must** give written information to each patient on admission (or on enrollment or entrance into service) on the following:

the person's rights under state law (either by statute or by case law) to make decisions concerning medical care, including the right to accept or refuse medical or surgical treatment and the right to complete "advance directives" such as the Massachusetts Health Care Proxy (see "**Decisions Concerning Your Medical Care**" to be adapted for use in your facility / agency and distributed to patients or residents); *and*

the written policies of the provider concerning the implementation of these rights.

Health care providers **must also**:

document in the person's medical record whether or not the individual has completed an advance directive;

inform the patient of the address and telephone of the state licensing agency responsible for responding to complaints about a facility's failure to honor advance directives;

ensure compliance with state law on advance directives;

provide education to facility staff *and* to the wider community on issues concerning advance directives. According to the Final Rule of the PSDA (6/95), facilities must be able to document their community education efforts.

Health care providers may not condition the provision of services or discriminate against a person based on whether or not the person has completed an advance directive.

NOTE: The Joint Commission on the Accreditation of Healthcare Organizations (JCAHO) incorporates these requirements into its standards, has added its own additional requirements, and applies these standards to *ambulatory care organizations* in addition to providers listed above.