

# Advance Care Planning Resources

Advance care planning is important for everyone – whether healthy or sick, young or old. It is important to think about what your health care choices would be if you become unable to speak for yourself. Use the following resources to learn more about advance care planning.

**CCHA care coordinators can help you start the process of advance care planning and provide guidance with having the conversation with your loved ones.**

**Call CCHA Member Support Services.  
303-256-1717 | 719-598-1540 | 1-855-627-4685 (TTY 711)  
Monday through Friday 8 a.m. to 5 p.m.  
CCHAcares.com**

## Medical Durable Power of Attorney (MDPOA)

An MDPOA lets you name someone, called an agent, to make decisions about your medical care when you are unable to speak for yourself, either temporarily or permanently.

- Your agent only has the authority to make health care decisions. An MDPOA cannot pay your bills, buy or sell real estate, manage your bank accounts, etc.
- Your agent is morally and legally obligated to act according to your wishes and values, so it is important to speak with him or her about your values, goals, and preferences for treatment.
- You can terminate your agent even if you cannot make decisions.
- If you do not appoint an MDPOA while you are able to make your own decisions, Colorado law offers two options: selection of a proxy decision maker for health care or appointment of a guardian.
- Colorado is not a next of kin state and no one is given automatic authority to make decisions for another adult.

## Proxy Decision Maker for Health Care

A proxy decision maker acts on your behalf if you lack the capacity to make decisions, but have not designated an MDPOA.

- The proxy is selected by interested persons – those who know you well and have a close interest in your well-being. Interested persons may include your spouse or partner, parents, children, grandparents, siblings, or close friends.
- A proxy has less freedom than an MDPOA in making medical decisions, so it is important that you establish an MDPOA.
- A proxy provides consent for non-emergent interventions or restraint by representing you in giving “informed consent.”
- If your wishes are not known, the proxy must act in your best interests.

## Guardians

Guardians are appointed by the court to perform a certain set of duties on behalf of an incapacitated person.

- Any person 21 years or older, or an appropriate agency, may be appointed as a guardian.
- Guardianship is sometimes distributed among multiple people.
- Except in emergencies, the court process to appoint a guardian may take several months.



## Living Will

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A living will is a document you sign telling your doctors to stop or not start life-sustaining treatments if you are in a terminal condition and can't make your own decisions or if you are in a persistent vegetative state.

- A living can be combined with other paperwork including a general will and an MDPOA.
- A living will only goes into effect 48 hours after two doctors certify that you are in a terminal condition and cannot make your own decisions or you are in a persistent vegetative state. A living will must be honored unless your MDPOA is given express authority to override.

## CPR Directive (Cardio-Pulmonary Resuscitation)

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A CPR directive is often referred to as a “do not resuscitate” (DNR) order. A DNR is a written doctor’s order that prevents the health care team from initiating CPR. The doctor writes and signs a DNR at your request or at the request of your family or MDPOA if you do not want to receive CPR in the event your heart and/or breathing has stopped.

- A DNR remains in effect if you transfer from one health care facility to another.
- A DNR is honored by all emergency medical services (EMS) providers and medical facilities.
- A DNR does not instruct on how much to intervene on other pre-death care such as transfusions, dialysis and intubation for respiratory distress.

## Colorado Medical Orders for Scope of Treatment (MOST) Form

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The MOST form is for those who are seriously or chronically ill and in frequent contact with providers. It provides specific instructions to providers about which medical interventions to perform or to avoid and must be signed by both the patient and the provider.

- A MOST form covers more treatment orders than a CPR directive. Patients can express wishes for a wide range of treatments.
- MOST forms are fully honored by all providers in all settings in Colorado.
- A MOST form can be updated, but it is the patient’s responsibility to update the document with their provider and hospital system.
- A MOST form should be printed on bright green paper and a copy should be kept on the refrigerator for first responders to see.

## Five Wishes

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Five Wishes is a legally accepted document that covers personal, spiritual, medical and legal wishes related to end of life care.

- Five Wishes is intended to be followed, but an MDPOA or proxy may override.
- Medical wishes are preference-based and are not used as a guide for clinical care in medical situations.
- More information is available at [Fivewishes.org](http://Fivewishes.org).

## Conversation Project

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Conversation Project is dedicated to helping people talk about their wishes for end of life care.

- The conversation starter kit comes in many different languages and can be done online, or by print out booklet.
- Learn more and access the conversation starter kit by visiting [TheConversationProject.org](http://TheConversationProject.org).

**For additional information and forms, visit [CIVHC.ORG](http://CIVHC.ORG) > Other Resources.**

Complaints concerning noncompliance with advance directive requirements may be filed with the Colorado Department of Public Health and Environment

CCHA complies with the Colorado Medical Treatment Decision Act (C.R.S.15 – 18 – 101) y el Colorado Medical Assistance Act (C.R.S. 25.5 – 4 – 413). For more information, visit [CCHAcares.com/FAQ](http://CCHAcares.com/FAQ)