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Feedback

Advance care planning

Medicare Part B (Medical Insurance) covers voluntary advance care planning as part of your yearly "Wellness" visit. Medicare may also cover this service as part of your medical treatment.

Your costs in Original Medicare

You pay nothing for this planning if your doctor or other health care provider accepts assignment and it's part of your yearly "Wellness" visit. If you get it as part of your medical treatment, the Part B deductible and coinsurance apply.

What it is

Advance care planning involves discussing and preparing for care you would get in the future if you need help making decisions for yourself. As part of advance care planning, you may choose to complete an advance directive. This is an important legal document that records your wishes about medical treatment in the future, if you can't make decisions about your care.

Advance directives include 2 parts:

- 1. Your **health care proxy** (sometimes called "durable power of attorney") names someone you trust to make decisions about your health if you can't.
- 2. Your **living will** describes which treatment(s) you want if your life is threatened, including dialysis, breathing machines, resuscitation, and tube feeding. It also states if you want your organs or tissues donated after you die.

You can talk about an advance directive with your health care provider, and they can help you fill out the forms, if you prefer. You can update your advance directive at any time.

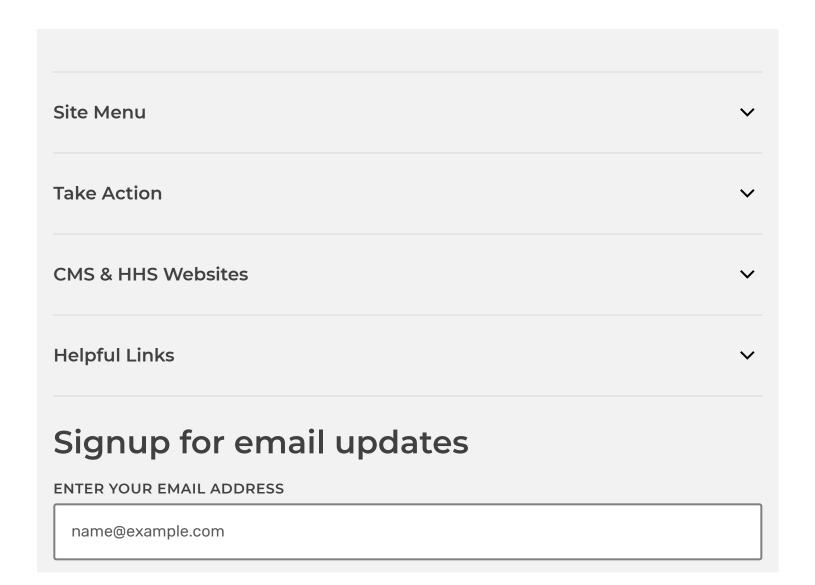
Things to know

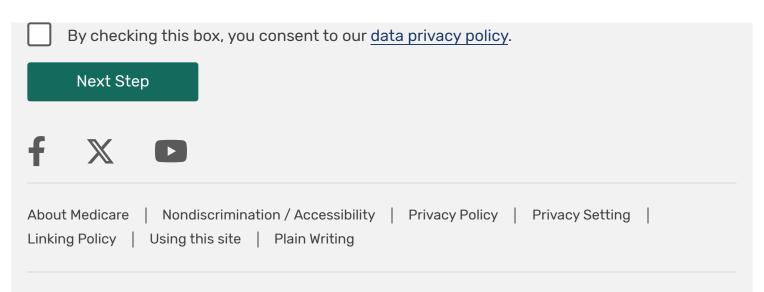
Consider carefully who you want to speak for you and what directions you want to give. You have the right to carry out your plans as you choose without discrimination based on your age or disability. For help with advance directives, <u>visit the Eldercare Locator</u>. You can also contact your state health department.

Is my test, item, or service covered?

Type your test, item, or service here

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