

# Advance Care Planning at Medicare Annual Wellness Visits – Empowering Patients to Have Meaningful Goals of Care Discussions in Primary Care

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## Introduction

- Advance Care Planning (ACP) is “a process that supports adults... in understanding and sharing their personal values, life goals, and preferences regarding future medical care”.(1)
- Older, sicker patients particularly stand to benefit from ACP.
- In 2018, 18% of the US population and 20% of the Oregon population were Medicare beneficiaries (2).
- The Medicare Annual Wellness Visit (AWV) is a designated opportunity to address ACP. ACP promotes patient-centered care, upholds patient autonomy, and may reduce health care cost (3, 4).

## Aims

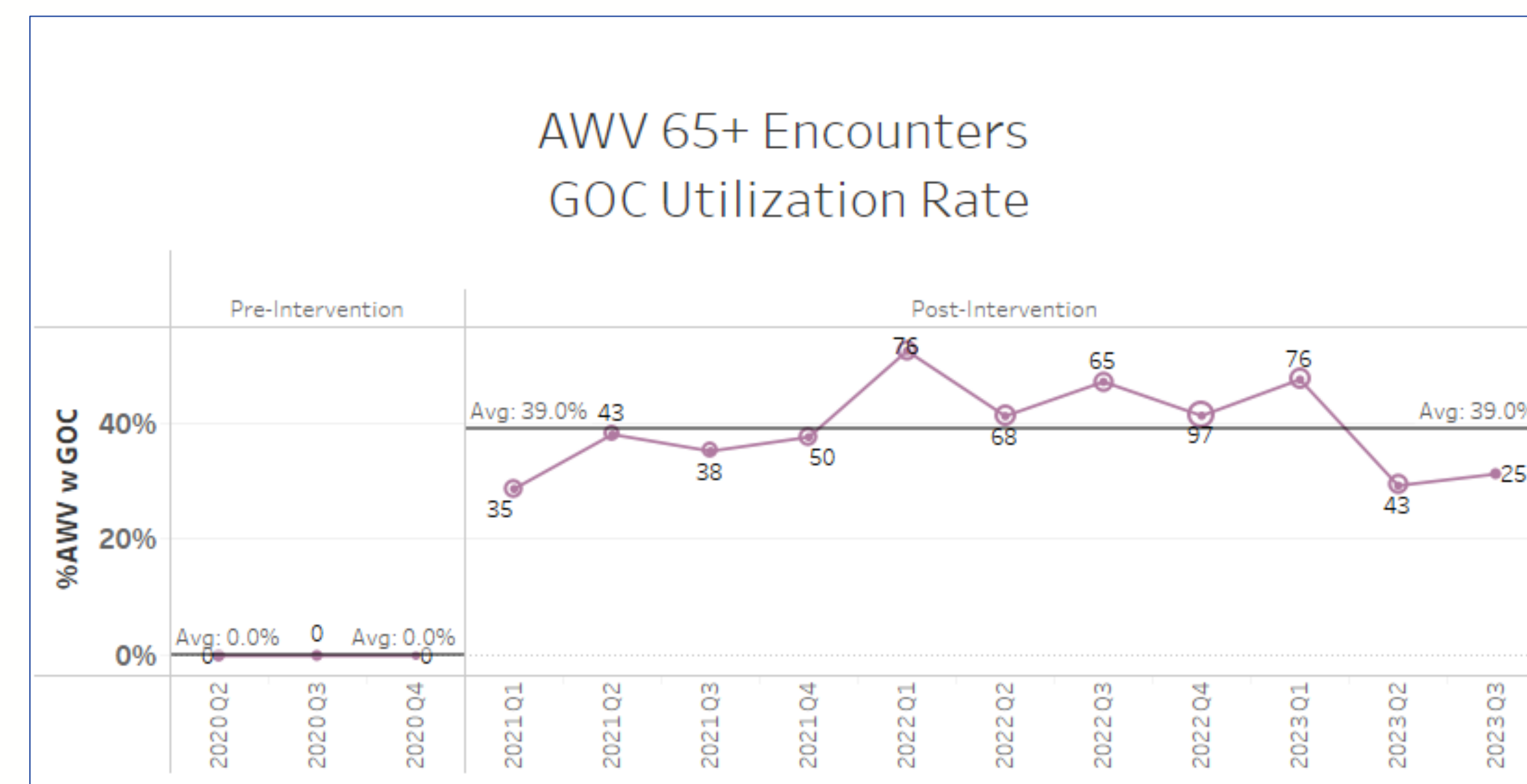
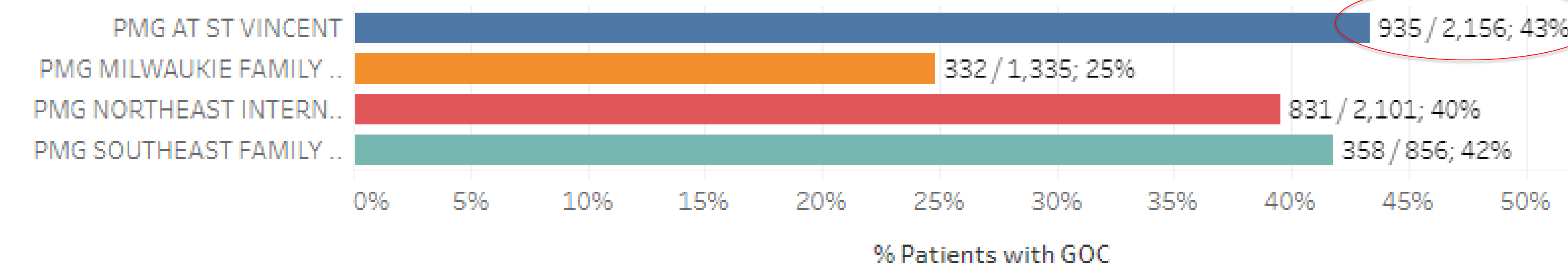
- Prior to this project, 18.3% of primary care patients >65 at Providence Medical Group-St. Vincent had a goals of care (GOC) note documented.
- Recent addition of a GOC dotphrase to the AWV note template had resulted in GOC note completion at 38% of AWV’s.
- This project aimed to increase the percentage of older adults with a GOC note by September 30th, 2023.

## Method

- This project built upon a larger project to increase ACP, specifically documentation of a formal GOC note within a reliable location in the medical record.
- A literature review identified that priming patients for ACP discussions increased ACP completion during visits.
- Our stakeholder interviews with patients and staff showed that a priming letter that empowered patients to discuss ACP with their doctor was acceptable and feasible.
- We implemented distribution of a large-font letter to all patients at AWV check-in.
- We measured the % of patients >65 with any GOC note. We also tracked % of AWVs with ACP documented by use of a standardized GOC dotphrase, stratified by English Language Proficiency.

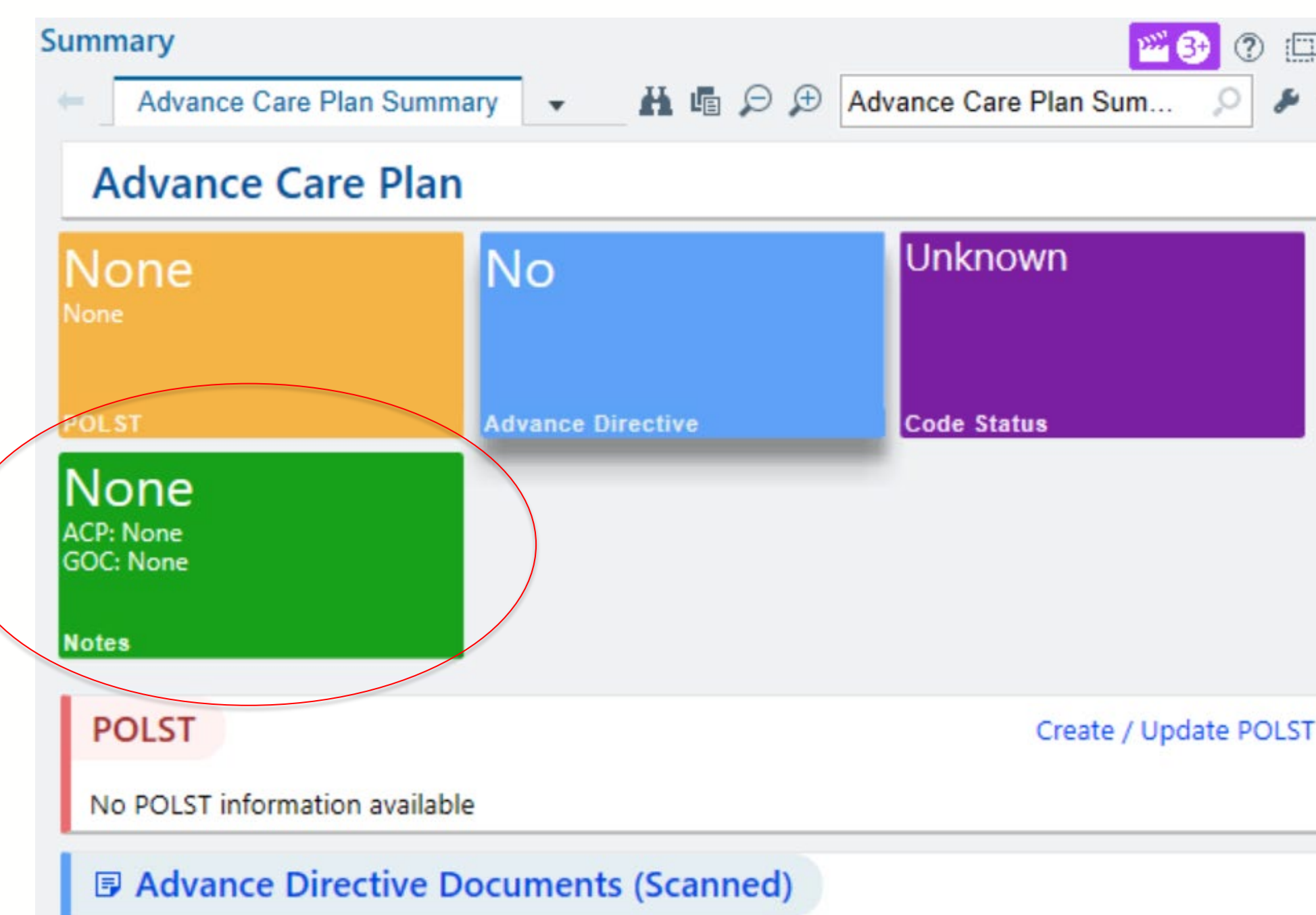
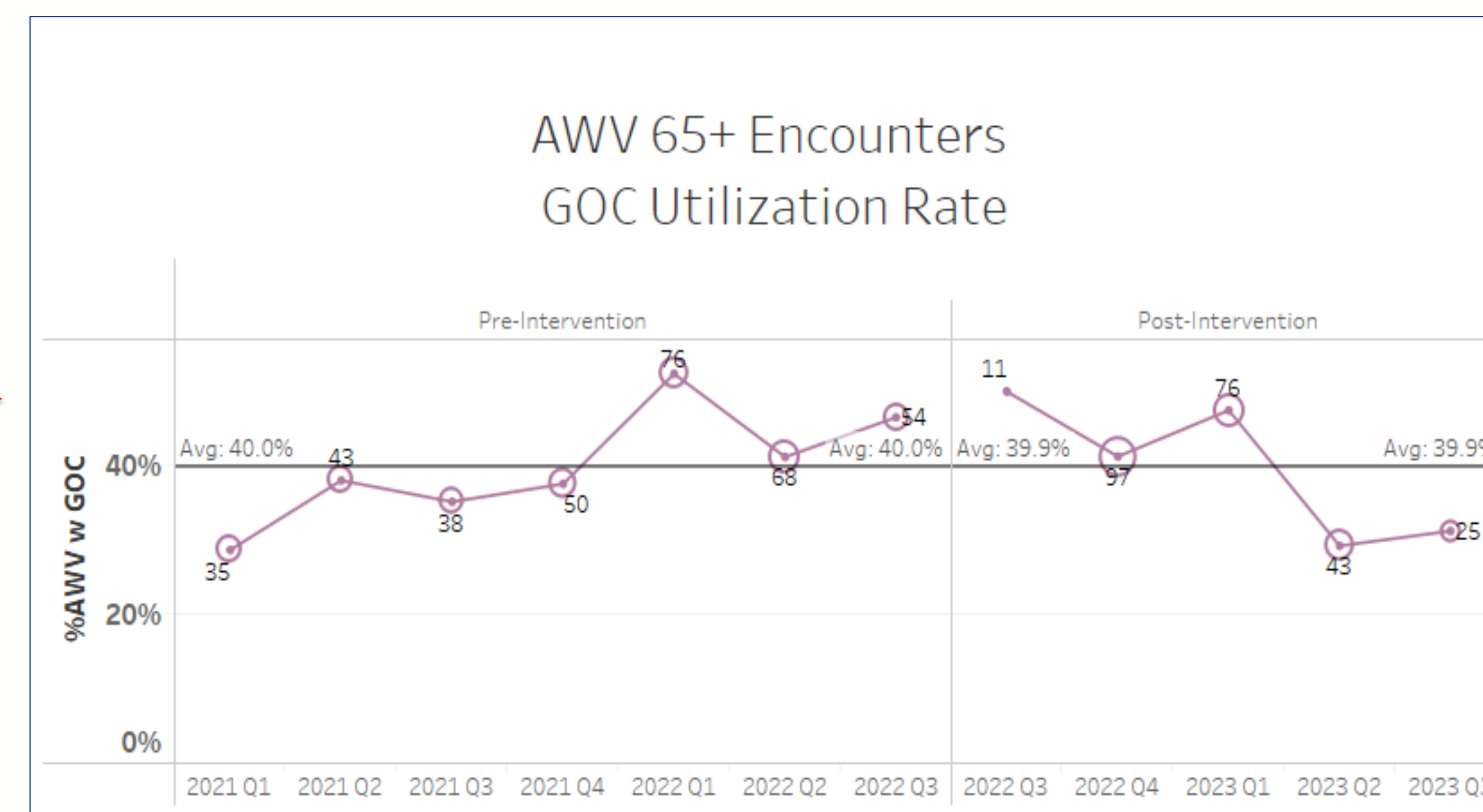
## Results

**Figure 1: Total Patients >65 with a GOC Note Documented**

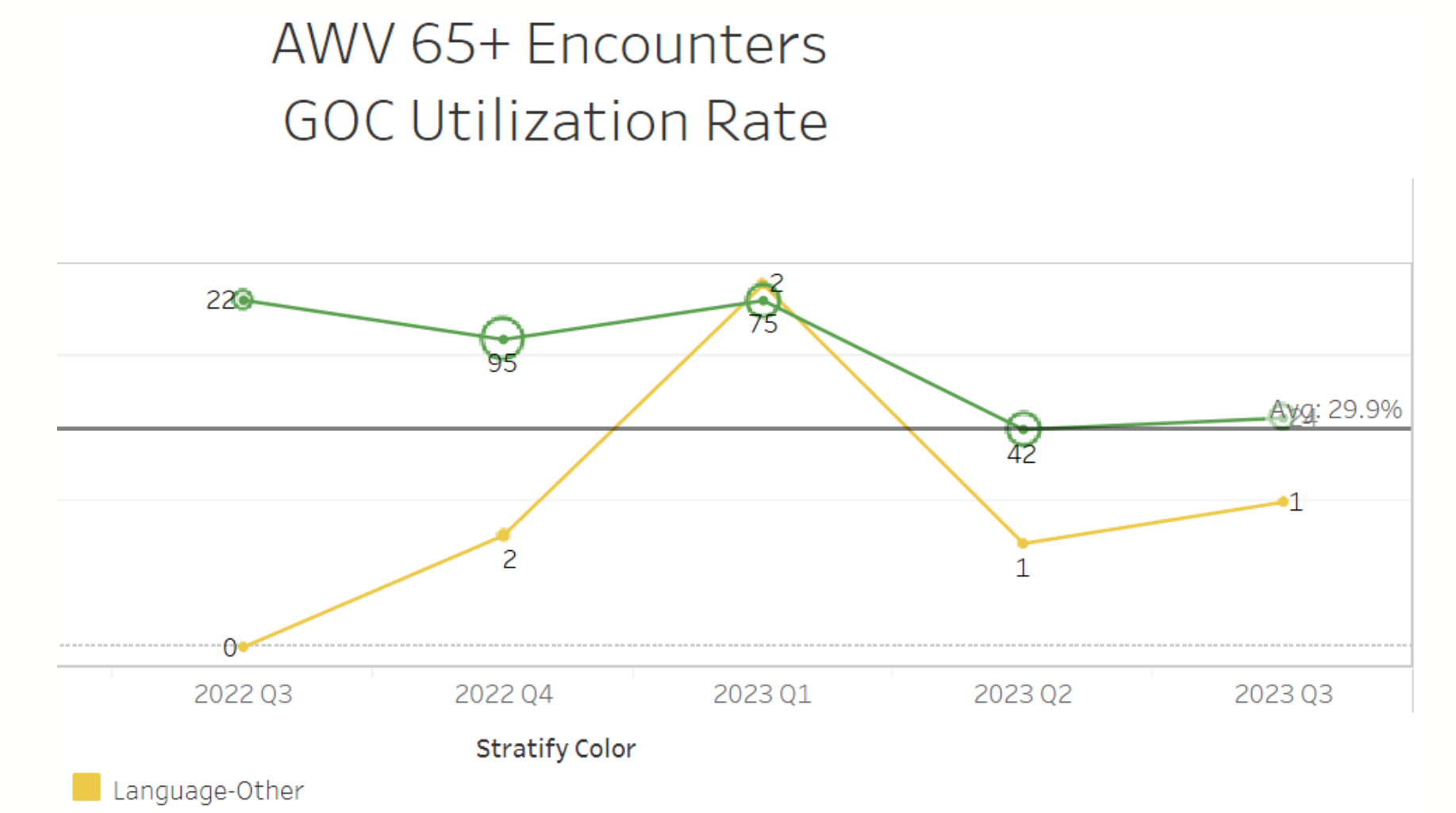


**Figure 4: GOC Conversations at AWVs as Stratified by Limited English Proficiency vs English Speakers**

**Figure 2: Overall increase in GOC Documentation Rate at AWVs from 0% to 39% Average. Post intervention with Priming Letters, GOC Utilization Rate Average Was Maintained**



**Figure 3: Green Tile for GOC Documentation in Epic under the Advance Care Planning Tab**



## Discussion

- This project maintained the rate of GOC discussions during AWVs while steadily increasing, over time, the percentage of older patients with a formally documented GOC note.
- This low-cost intervention was simple to implement and well-accepted.
- Disparities in ACP documentation among limited English proficiency patients may be improved by translating the priming letter.
- As the percentage of patients >65 with documented ACP increases, the percent of individual AWVs with a GOC note may plateau, as stable preferences may not require yearly reassessment.
- **A priming letter is a low-cost, high-value intervention easily adopted in other primary care settings to enhance care plans and reduce waste, while empowering patients to be active participants in their care.**

## References

1. Sudore RL, Lum HD, You JJ, Hanson LC, Meier DE, Pariltilat SZ, Matlock DD, Rietjens JAC, Korff MJ, Ritchie CS, Kutner JS, Teno JM, Thomas J, McMahar RD, Heyland DK. Defining Advance Care Planning for Adults: A Consensus Definition from a Multidisciplinary Delphi Panel. *J Pain Symptom Manage*. 2017 May;53(5):821-832.e1. doi: 10.1016/j.jpainsymman.2016.12.331. Epub 2017 Jan 3. PMID: 28062339; PMCID: PMC5278851.
2. KFF. Medicare Beneficiaries as a Percent of Total Population, Timeframe 2010-2018. Accessed 17 January 2022. <https://www.kff.org/medicare/state-indicator/medicare-beneficiaries-as-of-total-pop/>
3. Bond WF, Kim M, Franks-Rovinsky CM, Weinberg JS, Swendsen JD, Fehr LS, Funk A, Sawicki R, and Asche CV. Advance Care Planning in an Accountable Care Organization is Associated with Increased Advanced Directive Documentation and Decreased Costs. *Journal of Palliative Medicine*. Apr 2018. 489-502. <http://dx.doi.org/10.1089/jpm.2017.0566>.
4. Klingler C, in der Schmitzen J, Marckmann G. Does facilitated Advance Care Planning reduce the costs of care near the end of life? Systematic review and ethical considerations. *Palliative Medicine*. 2016;30(5):423-433. doi:10.1177/0269216315601346