

# 10 Tips To Help Care Communities Use the MOST Form Correctly



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VALUE IN HEALTH CARE

- ① MOST form cannot be mandated. (“A healthcare facility shall not require a person to have executed a MOST form as a condition of being admitted to, or receiving medical treatment from, the healthcare facility” per C.R.S. 15-18.7-108) Facilities with policies requiring MOST completion are in violation of state law. To comply with CMS requirements, facilities solely need to advise residents of the right to complete advance directives and document that discussion. Form should not be included in admission paperwork or move-in packets (lost opportunity for conversation, form may not be understood, sends message it must be completed).

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- ② MOST form is not appropriate for everyone. Only intended for seriously ill or frail people at high risk of life-threatening medical event. Additionally, not everyone wishes to state CPR wishes for reasons such as cultural practices or religious beliefs. Alternative documents to comply with requirements are a CPR directive or Acknowledgment of Notice of My Right to State Advance Directives.

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- ③ Any care community staff member who understands MOST program may initiate MOST conversation and prepare form with resident or decision-maker if resident wants a form. Resident must have decisional capacity to complete form; if not, decision-maker should be contacted. Refer specific medical questions to healthcare providers.

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- ④ Demographic box at top right of form must be completed, preferably by person preparing the form.

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- ⑤ Conversation is essential to ensuring resident's goals are documented. Care must be taken not to check boxes without a discussion. After verifying understanding of choices, resident or decision-maker and physician/APN/PA must sign and date form.

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- ⑥ In the absence of advance directives or MOST form, American standard of medical care requires administration of full life-saving measures. Ensure this practice is understood.

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- ⑦ Readily recognizable Astrobrights® “Vulcan Green” or “Terra Green” paper is preferred but any color or white paper is acceptable. Copies, scans and faxes are allowed.

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- ⑧ MOST form is portable and should accompany residents on transfers to and from hospitals and care communities. Resident or decision-maker should be asked if resident has MOST form. Another form should not be completed just because resident changes location or has a new provider.

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- ⑨ Replace form when changes are made. Avoid strikeouts that could cause confusion. Void old form by drawing black line with marker through form and writing VOID in large bold letters. Sign and date.

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- ⑩ Review MOST form regularly. Frequency is not specified in statute but it is recommended form is reviewed at admission, during care conferences and when resident condition changes. Document review on back of form or, when that is full, attach supplemental form that is available at link below.

MOST program information

and resources are available at <https://www.civhc.org/programs-and-services/most-program/>