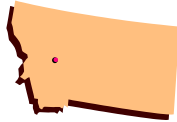


011013

# Montana's End-of-Life Registry



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## End-of-Life Registry History

- Enacted by 2005  
Legislature
- MCA 50-9-501
  - Authorized Montana's  
Attorney General to establish



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## End-of-Life Registry Goal

- Provide place to store  
advance directives online
- Give authorized health  
care providers immediate  
access



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## What is an Advance Directive?

- Document that expresses  
how you would want to be  
treated if you were seriously  
ill and unable to make  
decisions for yourself.



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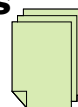
## Life Sustaining Treatment



- You may order attending physician to withhold or withdraw treatment that would only prolong the process of dying.

## Types of advance directives:

- Health care directives
- Living wills
- Declarations
- Health care powers of attorney



## How to file an advance directive:

- Complete 2 forms
  - Advance Directive
  - Consumer Registration Agreement



## Where to get forms:

### Both forms:

- Available online <http://endoflife.mt.gov>
- Office of Consumer Protection  
1-866-675-3314



## Another source for Advance Directives

### MSU Extension



- [www.montana.edu](http://www.montana.edu)
- Search on living will

## Consumer Registration Agreement also provided

- MSU Extension MontGuide
- [www.montana.edu](http://www.montana.edu)
- Search: End of Life Registry



## Send originals of forms to:

- Office of Consumer Protection  
2225 11<sup>th</sup> Avenue  
P.O. Box 201410  
Helena, MT 59620-1410  
Phone: (406) 444-5803 or  
(866) 675-3314  
Fax: (406) 444-9680  
*email: endofliferegistry@mt.gov*



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## What are legal requirements?



- At least 18 years of age
- 2 witnesses sign form
- Does not have to be notarized

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## What if I can't sign?

- May have another individual sign if unable to sign yourself
  - Disease
  - Physical impairment



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## Who can witness?

- Friends
- Acquaintances
- Business associates



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## Witnesses??????

- Family members
  - Legal, but.....  
Concern
    - Impartiality
    - Relatives may not agree about withdrawing life sustaining treatment



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## What if I change my mind?

- Complete & mail to Office of Consumer Protection
  - **New** Advance Directive
  - **New** Consumer Registration Agreement



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# Consumer Registration Agreement



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## Contents of Section A:

- Name
- Gender
- Date of birth
- Mother's maiden name
- Social Security Number
- Phone number
- Mailing address



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## Section B:



- Types of access for Advance Directives
  - *Standard* privacy
  - *Higher* privacy

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## Standard Privacy Access



- If access code unavailable
- Anyone with your
  - Name
  - Social Security Number
  - Birth date
  - Mother's maiden name

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## Higher Privacy Access



- Person who filed directive
- Registered health care providers
- Anyone with your name & access code

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## Section B: Checklist



### *I want to:*

- Store an Advance Directive in the Registry.
- Replace an Advance Directive with a new one.

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## Type of Request (cont'd.)

### *I want to:*

- Remove my Advance Directive from the Registry.
- Request a replacement wallet card.



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## Section C:

1. ....Duly executed & witnessed
2. Understand that
  - Free of charge
  - Voluntary
  - Authorization to store
  - Can revoke
  - Liability of agency



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## Section C:

1. Signature of person completing agreement
2. Printed Name
3. Date



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## Mail completed materials

- Advance Directive
- Consumer Registration Agreement

**To:** Office of Consumer Protection  
2225 11<sup>th</sup> Avenue  
P.O. Box 201410  
Helena, MT 59620-1410



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## Notification

- Within approximately three weeks, acceptance/denial letter is sent to you.



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## Enclosures

1. Your identifying access code
2. Wallet card
3. Four labels



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## Wallet Card Example

<b>How to access my Advance Directive</b>	<b>MONTANA END-OF-LIFE REGISTRY</b>
<ol style="list-style-type: none"><li>1. Go to <a href="http://www.endoflife.mt.gov">www.endoflife.mt.gov</a>.</li><li>2. Click on Start in the Registrants box.</li><li>3. Enter your name and access code.</li></ol> <p>If you do not have Internet access, call 1-866-675-3314.</p>	Name:  Access Code:

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## Label Example

**MT End-of-Life Registry**  
**1-866-675-3314**  
**[www.endoflife.mt.gov](http://www.endoflife.mt.gov)**

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## Where to place labels?

- **Back of**
  - **Driver's license**
  - **Auto insurance card**
  - **Health insurance card**
- **Your choice????**



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## What if advance directive is rejected?

- **Will be returned if does not meet Montana requirements**
- **Letter of explanation**
  - **Indicates what additional information needed**



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## Whom should I provide a copy?



- **Physician**
- **Other health care provider**
- **Family member**

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## Health Care Provider Registration Agreement

- **Facility Type:**
  - **Ambulatory Surgery**
  - **Clinics**
  - **Home Health Care Agency.....**



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## Health Care Provider Registration Agreement

- Facility Type (cont'd):
  - Hospice
  - Hospital
  - Nursing Facility
  - Private Office



## Registration Agreement

- Name of health care provider
- Facility ID
- Health Care provider License #
- Mailing address



## Access 24 / 7

- Advance Directives are stored in secure computer database
  - Free of charge
  - Available anytime



## 24-hour help desk

- Assist health care professionals
  - Determine whether Advance Directive has been filed



## Office of Consumer Protection

- Does not provide:
  - Legal advice
  - Legal services



## Further Information

Joan Eiel, Program Specialist  
Office of Consumer Protection  
2225 11<sup>th</sup> Avenue  
P.O. Box 201410  
Helena, MT 59620-1410  
Phone: (406) 444-5803 or (866) 675-3314  
Fax: (406) 444-9680  
email: [endofliferegistry@mt.gov](mailto:endofliferegistry@mt.gov)



## Additional Resources

- Association of Montana Health Care Providers
- Compassion and Choices
- Caring Connections
- National Hospice and Palliative Care Organization
- Aging with Dignity

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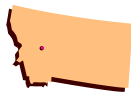
## MontGuide Reviewers

- Elderly Assistance Committee
  - State Bar of Montana
- Businesses, Estates, Trusts, Tax and Real Property Section
  - State Bar of Montana
- Office of Consumer Protection, Attorney General's Office

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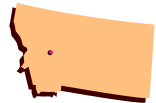
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## Montana's End-of-Life Registry

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### Program Evaluation

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