

ADVANCE CARE PLAN

WHAT IS IT?

This quality measure evaluates the percentage of patients aged 65 and older who have:

- **An advance care plan** or a **surrogate decision maker** documented in their medical record, or;
- Documentation of a discussion about advance care planning, even if the patient declined or was unable to provide a plan.

WHY DOES EQIP USE IT?

- Helps establish medical treatment preferences prior to incapacity, reducing decision-making uncertainty.
- Enhances care coordination, reduces errors, and aligns treatment with patient goals.

HOW ARE YOU SCORED?

Denominator: Patients aged 65+ with specific eligible encounters (CPT/HCPCS codes).

Numerator: Patients with documented plans, surrogates, or discussions.

WHAT ARE THE SUBMISSION CODES?

- **1123F:** An advance care plan or a surrogate decision maker is documented in the medical record.
- **1124F:** An advance care plan was discussed but patient did not wish or was not able to provide an advanced care plan or a surrogate decision maker.

