Minnesota Law

Minnesota law allows you to inform others of your health care wishes. You have the right to state your wishes or appoint an agent in writing so that others will know what you want if you can't tell them because of illness or injury. The information that follows tells about health care directives and how to prepare them. It does not give every detail of the law.

What is a health care directive?

A health care directive is a written document that informs others of your wishes about your health care. It allows you to name a person (“agent”) to decide for you if you are unable to decide. It also allows you to name an agent if you want someone else to decide for you. You must be at least 18 years old to make a health care directive.

Why have a health care directive?

A health care directive is important if your attending physician determines you can’t communicate your health care choices (because of physical or mental incapacity). It is also important if you wish to have someone else make your health care decisions. In some circumstances, your directive may state that you want someone other than an attending physician to decide when you cannot make your own decisions.

Must I have a health care directive? What happens if I don’t have one?

You don't have to have a health care directive, but writing one helps to make sure your wishes are followed.

You will still receive medical treatment if you don't have a written directive. Health care providers will listen to what people close to you say about your treatment preferences, but the best way to be sure your wishes are followed is to have a health care directive.

How do I make a health care directive?

There are forms for health care directives. You don't have to use a form, but your health care directive must meet the following requirements to be legal:

- Be in writing and dated.
- State your name.
- Be signed by you or someone you authorize to sign for you, when you can understand and communicate your health care wishes.
- Have your signature verified by a notary public or two witnesses.
- Include the appointment of an agent to make health care decisions for you and/or instructions about the health care choices you wish to make.

If you are Catholic, the Minnesota Catholic Conference suggests that you consider the Minnesota Catholic Health Care Directive form. If the form is not attached to this document, you can get one by calling the conference at 651-227-8777 or by downloading it at www.mncc.org.

Before you prepare or revise your directive, you should discuss your health care wishes with your doctor or other health care provider.

Do I need an attorney? Will this cost me anything?

No. It is not necessary to have an attorney provide or fill out the form. However, you should contact an attorney if you have legal questions regarding advance care planning. Advance directive forms are available from a number of sources for no charge, including the Minnesota Catholic Conference.

Should I appoint a health care agent or just write down my wishes?

Although Catholics are not morally obligated to have any type of advance directive, the Minnesota Catholic Conference recommends that, if you have any advance directive, it should include the appointment of a health care agent.

Written instructions alone are only as good as your ability to accurately predict every possible future medical condition and every future medical treatment option. In addition, without a health care agent, the person interpreting those instructions may be someone who does not truly know what you wanted.

By appointing a health care agent, you can make
sure that someone who cares about you will apply your wishes and personal beliefs to the health care choices at hand—just as you would do. Even if you appoint a health care agent, you can still give written health care instructions to direct, guide, and even limit the actions of your agent.

I prepared my directive in another state. Is it still valid?
Health care directives prepared in other states are legal if they meet the requirements of the other state's laws or the Minnesota requirements. But requests for assisted suicide will not be followed.

What can I put in a health care directive?
You have many choices of what to put in your health care directive. Be sure to state in your health care directive your desire to have health care decisions made in a manner consistent with Catholic teaching. For example, you may include:

- The person you trust as your agent to make health care decisions for you. You can name alternative agents in case the first agent is unavailable, or joint agents.
- Your goals, values, and preferences about health care.
- The types of medical treatment you would want (or not want).
- How you want your agent or agents to decide.
- Where you want to receive care.
- Instructions about artificial nutrition and hydration.
- Mental health treatments that use electro-shock therapy or neuroleptic medications.
- Instructions if you are pregnant.
- Instructions to contact your parish priest.
- Donation of organs, tissues, and eyes.
- Funeral arrangements—contact parish priest.
- Who you would like as your guardian or conservator if there is a court action.

You may be as specific or as general as you wish. You can choose which issues or treatments to deal with in your health care directive.

Are there any limits to what I can put in my health care directive?
There are some limits about what you can put in your health care directive. For instance:

- Your agent must be at least 18 years of age.
- Your agent cannot be your health care provider, unless the health care provider is a family member or you give reasons for the naming of the agent in your directive.
- You cannot request health care treatment that is outside of reasonable medical practice.
- You cannot request assisted suicide.

How long does a health care directive last? Can I change it?
Your health care directive lasts until you change or cancel it. As long as the changes meet the health care directive requirements listed above, you may cancel your directive by any of the following:

- A written statement saying you want to cancel it.
- Destroying it.
- Telling at least two other people you want to cancel it.
- Writing a new health care directive.

What if my health care provider refuses to follow my health care directive?
Your health care provider generally will follow your health care directive, or any instructions from your agent, as long as the health care follows reasonable medical practice. But, you or your agent cannot request treatment that will not help you or which the provider cannot provide. If the provider cannot follow your agent's directions about life-sustaining treatment, the provider must inform the agent. The provider must also document the notice in your medical record. The provider must allow the agency to arrange to transfer you to another provider who will follow the agent's directions.

How can I make sure that decisions made on my behalf are consistent with my Catholic beliefs?
State in your health care directive your desire to have all health care decisions made in a manner consistent with Catholic teaching. The Minnesota Catholic Health Care Directive from the Minnesota Catholic Conference does this.
Appoint a health care agent who shares your beliefs, or at least sincerely intends to respect your wishes.

If your health care agent is not familiar with Catholic teaching on these matters, give your agent the name of a priest or lay leader who can provide guidance. You can include the name and contact information of that person in the health care directive. You may also want to give this information to your health care provider.

Are Catholics morally obligated to have an advance directive?
No. However an advance directive, especially one that appoints a health care agent, is one way to make sure that your care and treatment is consistent with the Catholic faith and your wishes.

Is organ donation morally acceptable?
Can I include a donation in my health care directive?
Organ donation after death is a noble and meritorious act and is to be encouraged as an expression of generous solidarity. You should, however, give explicit consent. The *Minnesota Catholic Health Care Directive* includes an optional section where you can give that consent.

How can I make sure my spiritual needs are met?
When you enter a hospital or nursing home, state that you are a Catholic and want to have a priest or lay minister care for your spiritual needs. Also state if you want to see a particular priest. Unless you have done this, certain privacy rules may prevent the hospital or nursing home from informing a priest about your presence or allow him to visit.

If you cannot communicate your wishes when being admitted, your health care directive and health care agent should be able to do this for you.

Include spiritual requests in your health care directive. The *Minnesota Catholic Health Care Directive* from the Minnesota Catholic Conference, for example, includes a request for the Sacraments of Reconciliation, Anointing, and Eucharist as viaticum, if you are terminally ill.

What is “viaticum”?
Literally, “food for the journey.” Death is not the end. Rather, it is only a “passing over” from this world to the Father. In preparation for this journey, the Church offers Eucharist as viaticum, i.e., Christ’s body and blood as food for the journey.

What if I've already prepared a health care document? Is it still valid?
Before August 1, 1998, Minnesota law provided for several other types of directives, including living wills, durable health care powers of attorney, and mental health declarations.

The law changed so people can use one form for all their health care instructions.

Forms created before August 1, 1998, are still legal if they followed the law in effect when written. They are also legal if they meet the requirements of the new law (described above). You may want to review any existing documents to make sure they say what you want and meet all requirements.

What should I do with my health care directive after I have signed it?
You should inform others of your health care directive and give people copies of it. You may wish to inform family members, your health care agent or agents, and your health care providers that you have a health care directive. You should give them a copy. It's a good idea to review and update your directive as your needs change. Keep it in a safe place where it is easily found.

Even if you appoint a health care agent, you can still give written health care instructions to direct, guide, and even limit the actions of your agent.

What is POLST?
Some providers offer "POLST" forms (Provider Orders for Life-Sustaining Treatment). POLST is intended to translate the treatment preferences into standing medical orders for those who will care for you in serious illness. POLST forms, however, present a host of ethical challenges, as well as difficulties in their implementation. In many cases, they do not even require a patient signature. The bishops of Minnesota discourage the use of POLST forms because a one-size-fits-all approach to treatment options, made outside the context of an actual care setting, is not consistent with a Catholic approach to end-of-life care. For more information on POLST, visit mncc.org/stewards-of-the-gift-of-life/.
What fundamental principles should guide a Catholic, and indeed any person, who is thinking about health care decisions?

1. *Human life is a precious gift from God.* This truth should inform all health care decisions. Every person has a duty to preserve his or her life and to use it for God's glory.

2. *We have the right to direct our own care and the responsibility to act according to the principles of Catholic moral teaching.* Each person has a right to clear and accurate information about a proposed course of treatment and its consequences, so that the person can make an informed decision about whether or not to receive the proposed treatment.

3. *Suicide, euthanasia, and acts that intentionally and directly cause death by deed or omission are never morally acceptable.*

4. *Death is a beginning, not an end.* Death, being conquered by Christ, need not be resisted by any and every means and a person may refuse medical treatment that is *extraordinary.* A treatment is extraordinary when it offers little or no hope of benefit and cannot be provided without undue burden, expense, or pain.

5. *There should be a strong presumption in favor of providing a person with nutrition (food) and hydration (water).* Providing nutrition and hydration should be considered ordinary care since it serves a life-preserving purpose, and the means of supplying food and water are relatively simple and, barring complications, generally without pain. Exceptional situations may exist in which this is not the case, such as when a person is no longer able to assimilate nourishment, or when death is so imminent that withholding or withdrawing food and water will not be the actual cause of death. In no case should food or water be removed with the intent to cause death.

6. *We have the right to comfort and to seek relief from pain.* Although our faith teaches that we can find meaning in suffering, no one is obligated to experience pain. A person has a right to pain relief and comfort care, even if the method or treatment *indirectly* and *unintentionally* shortens life. However, it is not right to deprive the dying person of consciousness without a serious reason.