

Michigan Physician Orders for Scope of Treatment (MI-POST)

Amy Bailey, LMSW May 20, 2026




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## MI-POST Order

- Optional medical order for adults with advanced illness or frailty whose life expectancy is approximated at 12 months
- Michigan Law passed in November 2017, initial MI-POST order was available to pilot counties, and the finalized MI-POST order was made accessible statewide in 2022
- Providers and clinical team members would ideally use the MI-POST as part of the Advance Care Planning process for adult patients with serious illnesses
- Calls on providers to encourage the patient to complete a Patient Advocate Designation/Durable Power of Attorney for Health Care if the patient has not already completed this important legal document
- For use only when the patient or patient representative cannot direct care preferences
- Actionable outside of acute care; advisory during a hospital stay



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### Patient Advocate Designation/Durable Power of Attorney for Health Care (DPOA-H)

- A legal document created by the patient to identify their Patient Advocate and successor patient advocates
- Identifies what authority the Patient Advocate has:
  - Can the Patient Advocate hire and fire members of the medical team?
  - Can the Patient Advocate make a decision about organ donation?
  - Can the Patient Advocate consent to mental health treatment?
  - Can the Patient Advocate have access to the patient's medical records?
  - Can the Patient Advocate consent, refuse, withdraw or withhold medical care?
    - If the Patient Advocate has authority to withdraw or withhold care, does it also include a statement by the patient that they acknowledge that this action could or would allow the patient's death?
- May include treatment preferences as guidance for the Patient Advocate
- Michigan is 1 of 3 states that does not have a law for living wills and 1 of 4 states that lacks a Next of Kin law for making treatment decisions for another adult



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### MI-POST Order

- Completed by the Patient or their Patient Representative and their provider (physician, NP, or PA)
- Verbal order may be used as long as a true signature of the provider is completed within 10 business days.
- Patient or their Patient Representative may choose Attempt Resuscitation or Do Not Attempt Resuscitation and other medical interventions
- Actionable by Emergency Medical Services (EMS) personnel ONLY
- The August 2022 approved Michigan MI-POST form must be used; use of an outdated Michigan MI-POST, another state's form or the national POLST form requires EMS to contact Medical Control Authority for guidance while life sustaining interventions are initiated
- Must be reaffirmed when changing levels of care
- Must be reaffirmed annually or it expires
- Must include a diagnosis to qualify
- Patient and Family Information Sheet (MDHHS 5837) signed by patient or patient representative with their provider before completing the MI-POST and entered into medical record



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### Patient Representative

1. Patient Advocate named in a Durable Power of Attorney for Health Care/Patient Advocate Designation
  - Patient Advocate has signed their acceptance of the role.
  - A written determination of incapacity of the patient must be completed by either two physicians or a physician and licensed psychologist, given to the patient and made part of the medical record.
2. Court appointed legal guardian with the authority to consent to do not resuscitate.

\*\*Letters of Guardianship of Individual with Developmental Disability\*\*--Legal Guardians must obtain special approval from a judge to consent to DNR



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Part 2, Section F: Individual Assisting with Completion of MI-POST Form

Section F – Individual Assisting with Completion of MI-POST Form		
Print Preparer's Name	Title	Date
Preparer's Signature	Organization	Phone Number



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Part 2, Section F: To Reaffirm or Revoke this Form

Section G – To Reaffirm or Revoke this Form		
This MI-POST form can be reaffirmed or revoked at any time, verbally or in writing. See MDHHS-5037 for further details on reaffirmation or revocation. If this document is revoked or is not reaffirmed, and a new form is not completed, full treatment and resuscitation will be provided.		
Healthcare Provider Name/Collaborative Physician (if applicable)	Healthcare Provider Signature	
Patient/Representative Name	Patient/Representative Signature	Reaffirmation Date

Send form with Patient whenever transferred or discharged.  
HIPAA permits disclosure of MI-POST to other Health Care Professionals, as necessary.



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## Case Scenario

- 58 year old male patient served by an outpatient dialysis unit
- M, W, F dialysis schedule – attends all appointments and follows doctor's orders, but expresses limited understanding of his health and treatment plan
- Along with ESRD, patient has COPD, anemia, CHF, Type II diabetes (poorly controlled), CVD
- 7 ED visits in the past year and 2 hospital stays; often presents with altered mental status and the medical team is concerned with his capacity to make treatment decisions
- 93% risk of hospital readmission or ED visit
- During his last two hospital stays--Full Code status
- Invalid DPOA-H form
- Lives alone; has one sister who lives out of town and also lists a friend in his demographics
- Selects Attempt Resuscitation in Section A of Medical Orders and Full Treatment in Section B



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## Out of Hospital DNR

- No statewide form created – each health care entity may create their own form following criteria from law.
- No diagnosis needed. Available to any Adult, regardless of diagnosis or life expectancy; available to minors with advanced illness
- Signed and dated by the adult patient in the presence of two witnesses
- For adults who have a court legal guardian who has authority to sign a MI-POST, the legal guardian signs.
- For adults who have created a DPOA-Hand that form was enacted within the last 12 months, their Patient Advocate signs.
- Signed and dated by a physician ONLY
- Actionable by EMS, physicians, nurses and many other health professionals
- For use outside of a hospital admission
- No expiration date
- Patient may revoke this order at any time



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## Case Scenario

- 76 year old female with metastatic breast cancer (liver and brain) previously on 3<sup>rd</sup> line therapy for 24 months. The side effects of the 3<sup>rd</sup> line therapy are no longer tolerable for the patient and she chooses to stop that therapy and all scans.
- She receives a referral for Palliative Care from her PCP as she would like help with her symptoms. She notes memory loss beginning in 2026
- She completes a MI-POST order with her Palliative Care Nurse Practitioner prior to her admission on to hospice care and lives with her partner, age 86, who is not her Patient Advocate
- She chooses Do Not Attempt Resuscitation and Comfort-Focused Treatment
- Diagnosis listed on MI-POST is metastatic breast cancer
- She takes her daily nap and her partner is unable to wake her, EMS is called
- EMS evaluates – patient is pulseless and breathless – why?



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## MDHHS Final Report with Recommendation

- Created in partnership with the MI-POST Advisory Committee
- Highlights the following concerns:
  - MI-POST is actionable by EMS personnel ONLY
  - Requiring a diagnosis on the order may cause confusion for EMS and concern that only the diagnosis listed corresponds to the actions taken
  - 12 month expiration date and the need to create a new MI-POST
  - The requirement for reaffirming the MI-POST when the patient changes level of care is burdensome



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## References

- MDHHS MI-POST Website [MI-POST](#)
- MI-POST Advisory Committee testimony to HIT Commission
- Michigan Physician Orders for Scope of Treatment Report, MDHHS, December 2024
- Motamedi, M., Brandenburg, C., Bakhit, M. et al. Concerns and potential improvements in end-of-life care from the perspectives of older patients and informal caregivers: a scoping review. *BMC Geriatr* 21, 729 (2021). <https://doi.org/10.1186/s12877-021-02680-2>
- Vranas KC, Plinke W, Bourne D, Kansagara D, Lee RY, Kross EK, Slatore CG, Sullivan DR. T influence of POLST on treatment intensity at the end of life: A systematic review. *J Am Geriatr Soc*. 2021 Dec;69(12):3661-3674. doi: 10.1111/jgs.17447. Epub 2021 Sep 22. PMID: 34549418; PMCID: PMC8648994.



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## Amy Bailey, LMSW

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