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<tr>
<th>Michele Dritz, MD, FAAP</th>
<th>Dawn Anderson-Butcher, PhD</th>
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<td>- Adolescent Medicine physician</td>
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<td>- Cornerstone Pediatrics</td>
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<td>- Dayton, OH</td>
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<td>- Licensed Social Worker</td>
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<td>- OSU LiFEsports Initiative</td>
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No Financial Disclosures
Teen & Young Adult Panelists

Roshan 15

Kobe 12

Michael 16

Bailey 19

Luc 13
Agenda

• Adolescent Panel Discussion
• Adolescent Health Topics with Panel Feedback
  – Providing Quality Adolescent Preventive Care
  – Strategies to Increase & Improve Well Care
  – Making the Message Relevant to Youth & Families
• MOC II questions
YOUTH PANEL DISCUSSION

Facilitated by Dr. Dawn Anderson-Butcher
“Teen Take” Discussion

• Experiences at the doctor’s office
• Promoting physical and mental well-being
• Supporting adolescent growth and independence
• Staying healthy and getting involved
• Insights from teens and young adults
PROVIDING QUALITY ADOLESCENT PREVENTIVE CARE
Adolescent Well Care: National Data

Based on billing claims data

48% Adolescents had a preventive care visit in the past year

35% Adolescents received the recommended preventive services

40% Adolescents had confidential time alone with provider at well visit

Nordin et al, Annals of Family Medicine, 2010;8(6):511-516
JAMA Study of 556 sexually active adolescents visiting a family planning clinic

If mandatory parental notification was required for contraception:

- 59% would stop using ALL health services
- 11% would discontinue or delay HIV or STI testing and treatment
- 1% would stop having sex

JAMA 2002; 288:710-714
Medical and Family History
  +
Sports Participation Evaluation  
  +
Head-to-Toe Exam  
  +
Confidential Psychosocial Assessment  
  +
Preventive Health Screening  
  +
Immunizations  
  +
Anticipatory Guidance =

Comprehensive & Prevention-Oriented Well Care Visit
Psychosocial Assessment

- Home
- Education
- Eating
- Activities
- Drugs
- Sex/Sexuality
- Suicide (Mental Health)
- Safety
Psycho-social Screening Tools

• Comprehensive preventive care screening:
  – AAP Bright Futures questionnaire & supplemental form
    • Early, mid & late adolescent versions
  – Rapid Assessment for Adolescent Preventive Services (RAAPS)
    • Early, mid & late adolescent versions

• Condition-specific screening:
  – Depression: PHQ-2, PHQ-9
  – Anxiety: SCARED
  – Mental Health: Pediatric Symptom Checklist (PSC)
  – Substance Abuse: CRAFFT/SBIRT
## Preventive Health Screening

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<tr>
<th>AGE</th>
<th>HISTORY</th>
<th>MEASUREMENTS</th>
<th>SENSORY SCREENING</th>
<th>DEVELOPMENTAL/BEHAVIORAL HEALTH</th>
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Screening

- STDs
  - FOR ALL: HIV (15-18yo), Pap (21yo)
  - FOR SEXUALLY ACTIVE: CT, GC, HIV (yearly)
  - Additional testing based on risks

- Cardiovascular/Metabolic
  - FOR ALL: Lipid screen (17-21yo)
  - FOR OVWT/OBESE: Lipid, LFTs, glucose, A1C

- Miscellaneous
  - Screening related to medical concerns
  - Screening for college/job requirements
Immunizations

2015 Recommended Immunizations for Children from 7 Through 18 Years Old

7-10 Years
- Tdap¹
- MCV4

11-12 Years
- Tetanus, Diphtheria, Pertussis (Tdap) Vaccine
- Human Papillomavirus (HPV) Vaccine (3 Doses)²
- Meningococcal Conjugate Vaccine (MCV4) Dose 1
- Influenza (Yearly)³
- Pneumococcal Vaccine³
- Hepatitis A (HepA) Vaccine Series⁴
- Hepatitis B (HepB) Vaccine Series
- Inactivated Polio Vaccine (IPV) Series
- Measles, Mumps, Rubella (MMR) Vaccine Series
- Varicella Vaccine Series

13-18 Years
- Tdap
- HPV
- MCV4 Dose 1
- Booster at age 16 years
- Men B

¹ These shaded boxes indicate when the vaccine is recommended for all children unless your doctor tells you that your child cannot safely receive the vaccine.
² These shaded boxes indicate the vaccine should be given if a child is catching-up on missed vaccines.
³ These shaded boxes indicate the vaccine is recommended for children with certain health conditions that put them at high risk for serious diseases. Note that healthy children can get the HepA series. See vaccine-specific recommendations at www.cdc.gov/vaccines/pubs/ACIP-list.html
Anticipatory Guidance

Building on Strengths
Empowering Health Ownership
Reducing Risk Behaviors
Promoting Good Health
Preparing for Transitions
Providing Confidential Care

• Set-up expectations early
  – “Welcome to Adolescence” clinic letter
  – Display confidentiality policy in office
  – Discuss at well visits

• Start visit with both parent and patient
• Ask Parent to step out
  – Explain why – skill building, ”checking in”
  – Explain safety limits of confidentiality
  – Ensure that they will be brought back for wrap-up
• Wrap-up with Parent and Patient
Challenges to Providing Confidential Care

• Explanation of Benefits
• Electronic Medical Records
• Patient Portals
• Cell/contact numbers
• Office Culture
Tips for Confidentiality Challenges

- Display office policy in confidential care
- Have resources available such as list of clinics that are able to provide fully confidential services (i.e. Planned Parenthood, Public Health Dept)
- Candidly discuss possible breaches of confidentiality
- Create office process to obtain confidential phone numbers or methods to contact teen with confidential information when needed
- Integrate clinic-wide education to create an adolescent-friendly culture
SUMMARY

• Confidentiality is a key component to access for teens to quality health care

• Some alone time with the provider is essential for comprehensive quality care for teens

• Needs to be embedded in the office culture – from front desk to nurse to provider to relationship with teen and family
YOUTH PANEL TAKE

Facilitated by Dr. Dawn Anderson-Butcher
“Teen Take” Discussion

• The value of yearly check-ups

• Strategies to improve care

• Recognizing the importance of confidentiality
STRATEGIES TO INCREASE & IMPROVE WELL CARE
Best Practice Strategies for Increasing Well Visit Rate

1. Integrate reminder systems and processes
2. Couple well care to other patient needs
3. Leverage Insurer/Payor needs & quality metrics
4. Plan ahead & take advantage of shortcuts
5. Maximize coding & streamline documentation
6. Cultivate an adolescent-friendly environment
7. Educate teens & families on the importance of annual well visit
8. Learn from others
9. Make the most of EVERY opportunity
Efficient Reminder Systems

• **Proactive:** Anticipating the need
  - Population-based reports – well visits, immunizations
  - Reminder options: phone, text, letters, email
  - Preventive health message -- "welcome to adolescence" letters, marketing, etc
  - Scheduling next year’s visit today

• **At time of service:** Recognizing the need
  - Checking when communicating with clinic
  - Confirming during pre-clinic huddle
  - Optimizing EMR/Text/Call reminder systems
  - Completing or scheduling well visit when in clinic for other needs

• **After the Fact:** Reminding about the need
  - Follow-up communication if missed appointment
  - Opportunity to identify & address obstacles to clinic visits
Coupling & Capitalizing on Common Needs

• Paying attention is key:
  – Needs sports physical
  – Needs medicine refill
  – Needs work permit
  – Needs ADHD follow-up, etc
  – Needs school immunization form
  – Etc...

Build in “checking for last well visit” into everyone’s processes & schedule visit (front staff, schedulers, nurses, providers)
Leveraging Pay-For-Performance

Ohio Examples of Enhanced Reimbursement:

- ACO-based Quality & Access metrics
  - Close to $10K/provider each year

- Additional Incentive metrics based on current quality focus
  - Reimbursement varies

- Commercial & Medicaid Insurer Incentive metrics
  - $1-9K/provider each year per plan

Adolescent Health Clinical Performance Measures:

- Immunizations
- Well Visit
- Counseling on Diet & Exercise
- (Depression Screening)
- (Chlamydia Screening)
Planning Ahead to Save Time

• Pre-clinic team huddles/chart review
  – Due for preventive care?
  – Pertinent medical issues to address?
  – Anticipated screening/vaccines needed?

• Pre-visit screening tools
  – Gathers info prior to provider portion of visit
  – Paper or digital versions
  – May be able to link to EMR

• Sports Physical Forms
  – Medical and family history questions
  – Physical exam components for sports participation
  – Valid for 1 year in Ohio
  – Can fill out at later date if sports components done at well visit
Coding Tips for Adolescent Visits

**Well Visit only:**
Code: **Well Visit** E&M + **screeners used** (depression, CRAFFT, etc) + **specific counseling used** (nicotine cessation, SBIRT, etc)
- CPT 96127 = Patient-focused emot/behave screening = PHQ2/9, SCARED, etc
- CPT 96160 = Patient-focused risk assessment = Bright Futures, Transition, etc
- CPT 96161 = Parent-focused risk assessment = Transition, etc
- Smoking Cessation counseling: 3-10 min = CPT 99406  >10 min = CPT 99407
- SBIRT: 15-30 min = CPT 99408  >30 min = CPT 99409

**Well Visit + Acute or follow-up visit = Modifier 25s**
Code: **Well Visit** E&M + **Appropriate acute E&M level** per criteria + any screeners used + any specific counseling used + **Modifier 25**
The Modifier 25 portion of the visit should be coded at level based on normal E&M criteria (i.e. 99211-5)

**Counseling-heavy, non-WCV = Time-based billing**
Code: **Appropriate E&M level** per criteria (accounting for time)
The counseling-portion of the visit must take >50% of the visit
i.e. a HEEADSSS exam with discussion & counseling; other counseling-heavy visit like mood d/o
Document: ">50% of visit spent face-to-face discussing and counseling on XXXXX and creating plan. Total time of appointment was XXXXX"
Reimbursement: Typically ends up increasing E&M code by 1 level

Resources:
- [Modifier-25-Primer-Use-It-Dont-Abuse-It.aspx](http://www.aap.org/en-us/professional-resources/practice-transformation/getting-paid/Coding-at-the-AAP/Pages/Modifier-25-Primer-Use-It-Dont-Abuse-It.aspx)
Cultivate an adolescent-friendly environment

- Send a Teen & Family “Welcome to Adolescence” letter:
  - Opportunity to re-engage with families
  - Describe developmentally-appropriate change in visit structure, clinic confidentiality policy & why it is important
  - Highlight continued importance of annual well visits & preventive care
  - Emphasize ultimate goal of adolescent health & well-being
Cultivate an adolescent-friendly environment

- Create a welcoming, safe, united & educated front:
  - From teen-friendly space...
  - To front staff...
  - To nurses & providers...
  - To upholding confidentiality...

Find them at:
www.umhs-adolescenthealth.org/improving-care/spark-trainings/
www.amchp.org/programsandtopics/AdolescentHealth/Pages/default.aspx
Cultivate an adolescent-friendly environment

• Deliver on the promise:
  – Address both agendas – teen & parent
  – Incorporate 1:1 time with the adolescent at every visit
  – Help adolescents understand their confidentiality rights and limitations
  – Strive to include comprehensive services…and have referral options when you cannot
  – Help providers and staff feel comfortable and prepared to address adolescent needs

Remember – parents/caregivers are your allies, but the teen is your patient
Educate Teens & Families on "Why" yearly well visits

• Sports PE + MORE = Comprehensive Well Visit

• "Once a year check-up"... just as important as when they were younger

• Rapid changes 2^{nd} only to infancy =
  – physical + emotional + developmental + social + cognitive
  – The reason WHY yearly check-ups and screenings are important

• Laying the foundation for adult health habits and building skills to transition to adult care
Learn from others...
Ohio AAP – TALK program
• Reminder systems are important, but which ones are not
• Value for families in highlighting Sports PE as a part of a well visit
• EMR templates can cue screening & streamline coding/documentation

Ohio AAP – QI2U program
• Effective strategies involve improving whole-clinic processes & engaging all
• Well visits are a potent avenue to enhance all adolescent care
• Improving adolescent-friendly services starts with taking a good look

U of MI – Adolescent Health Initiative
• Creating an adolescent-friendly culture requires educating & engaging the whole clinic (SPARKS)
• Engaging adolescents is a powerful tool for creative improvements

Iowa Adolescent Health State Coordinator
• Parents recognize the value of provider-teen relationship, which regular yearly visits would facilitate
• Teens & families look to provider for physical & emotional health advice

Oregon Department of Health & OPIP
• Educating families on Sports PEs being a part of a well visit resonates
• It helps if teens know what to expect
• Young adults need info & guidance on health ownership (HealthHack)

What has worked for you?
Making the Most of Every Opportunity

• **Integrate preventive care needs into any visit**
  – Psychosocial history/HEEADSSS, immunizations, screening, labs…
  – More likely if preventive care needs are known ahead of time
    • Team huddles, standardized clinic processes

• **Think outside of the scheduling & billing box**
  – Longer adolescent appointment slots with time-based billing
  – Modifier 25s for WCV + acute care combo appointments
  – Afternoon and/or weekend clinic hours
  – “Adolescent-champion” provider with teen appointment schedule
YOUTH PANEL TAKE

Facilitated by Dr. Dawn Anderson-Butcher
“Teen Take” Discussion

• How can doctors help teens stay healthy?

• What can clinics do to make teen visits worthwhile?

• How to clinic visits help support teens?
MAKING THE MESSAGE RELEVANT TO YOUTH & FAMILIES IN WORDS AND ACTIONS
So How Do We Engage Youth?

• Ask them!
• Focus on the **visual** instead of the “textual”
• Use “**mobile-first**” campaigns (catch them where they are)
• Let them be **interactive consumers** (interactive sites & quizzes that drive them to YOUR brand)
• Encourage **sharing** - let them **go viral**!
  – Positive messages get shared more than negative messages
  
  *(Berger J, J Marketing Res 2011)*
Using Tech

• **Who:** Adolescents and/or families
• **What:** Global vs patient-specific messaging
• **How:**
  – Global platforms:
    • Instagram, Snapchat, YouTube, Twitter, Facebook
  – Patient-specific platforms:
    • OhMD ohmd.com
    • DocHalo halocommunications.com
    • TigerText tigerconnect.com
    • Your current EMR or Population Health system
Messaging to Teens in Oregon

As you become more independent, there is a lot to think about – school, friends, family, body image, self-esteem… What’s on your mind matters to us, and our trained staff are here for you! At the ENTER CLINIC NAME we offer a wide variety of services to address all your health needs both physically and emotionally. Our health providers are specifically trained to work with teens and are available to help you with whatever you need.

**COMMON TOPICS YOU CAN HAVE ADDRESSED:**
- Your health questions – our priority is partnership
- Emotional health and wellness
- Guidance for healthy relationships
- Bullying
- Health exams and sports physicals
- Weight, diet and overall physical health
- Drug or alcohol use or experimentation
- Sexual Health
- Treatment for mental health
- Vision exams and hearing screenings
- Immunizations and vaccines

**YOUR PRIVACY IS IMPORTANT**
At the CLINIC NAME we have specific policies around confidentiality. You may be used to having a parent or guardian come to your appointments, but you can also talk to your service alone. This is part of transitioning to adult care, and learning how to get the care you need. As long as you are safe and healthy, it will not be shared with your parents or others. If something needs to be shared, we will work with you on how to do that.

**BILLING & INSURANCE**
Under the Affordable Care Act, your appointed care visit is a covered service that provides a visit by your insurance with no cost to you! Check with your individual health plan for details.

**WHERE ARE WE LOCATED?**
ENTER STREET ADDRESS
ENTER CITY, STATE, ZIP CODE
ENTER general location (nearest hospital)

** WHEN ARE WE OPEN?**
Monday – Friday @ TIME
Saturday & Sunday @ TIME

Trustworthy * Convenient * Confidential

Find it at:
www.oregon-pip.org/projects/MODA-AWC_sub2.html
Messaging to Parents in Ohio

Find it at: ohioaap.org/

“But my teen just needs a physical for sports, not a well care visit…” THINK AGAIN!

Your teen still needs a comprehensive well care visit each year to assess their overall health and well-being. You might think a sports physical is enough, but check out the difference:

Well Care Visit
- Personal & family history
- Evaluation for risk factors for substance abuse, mental health, reproductive health, long-term health
- Teen-Specific Immunizations
- Confidential discussion with your trusted physician

Sports Clearance
- Personal & family history
- Surface physical exam
- Evaluation for risk factors for sports

Comprehensive Physical Exam
- Age-appropriate health screening tests for physical and emotional well-being

$0 No Co-Pay® for most insurance companies

Everyone ages 11-18 needs an annual well care appointment.

Schedule a well care visit for your teen today!

Happy Birthday!

Our gift is a free well care visit with your doctor!

Transforming Adolescent Care Learning Collaborative

Call today to schedule a well-care visit for your child!

Transforming Adolescent Care Learning Collaborative

American Academy of Pediatrics

Ohio Chapter
Language Matters

Once-a-year check-up –
Our chance to check-in and help you stay healthy

See you again this same time next year for your yearly checkup

Every age. Even TEENage.
Having a once-a-year checkup is important at every age.

A sports physical is part of a comprehensive once-a-year checkup –

Even if you don’t have your sports/work/school form with you today, just drop it off later & we’ll be able to look back at today’s visit to fill it out
Messaging to Your Own Patients: "Welcome to Adolescence" Letters

FOR PARENTS AND GUARDIANS
A LETTER FROM YOUR TEEN’S HEALTH CARE TEAM

Hello! My name is Dr. Michele Dritz and I am the Adolescent Medicine specialist at Cornerstone Pediatrics. My medical training is in Pediatrics with additional specialty training in the care and well-being of teens and young adults. I practice Adolescent Medicine because I truly enjoy working with adolescents and helping take care of the unique health needs that can arise during this developmentally important time in life.

My role as a physician specializing in Adolescent Medicine is to work with your son or daughter and you to help keep them healthy, safe, and ready to make that important transition into adulthood. Of course, raising a child takes a village and raising an adolescent can sometimes feel like it takes even more. That is where the Cornerstone Pediatrics team and I are here to help. My role will be to assist the other physicians with both general preventive care for your teen (such as yearly comprehensive well visits that incorporate a sports physical plus recommended developmental care, preventive screening and immunizations), as well as some of the more time-intensive or unique adolescent issues that may arise such as mental health concerns, gynecological issues, contraception services, smoking medicine issues, and acne treatment, just to name a few. This type of care and these conversations often require more time, so you will also notice that we schedule longer appointment times compared to before.

Now that your son or daughter is a teenager, there are some important things I would like to share with you to help us provide them the best possible care. These are exciting years with tremendous growth in brain and physical development, social skills, and independence. There are also many health risks during these years that we try to prevent, such as accidents, violence, depression, anxiety, unprotected sex, alcohol/drug use, and unhealthy habits.

Some of the areas of teen health that we may talk about during appointments are:
- Nutrition, exercise, and body image
- Fighting, danger, and violence
- Stress and coping skills
- Sexuality and sexual behavior
- Safety and driving
- Smoking, drugs, and alcohol
- Working/Jobs
- Dating and relationships
- Family life
- School life and academic success
- Healthy habits and preventing disease
- Peer pressure
- Transitioning to adulthood

As you know, it is good to stay close with your child. Fostering a relationship of support coupled with open communication, consistency, and love are some of the best things we can do as parents to help prepare our children for a healthy adulthood. With that in mind, base at home, it is also important that we give them time alone with the doctor at every visit to encourage important conversations about their health, bodies, and lives. Our goal as your child’s doctor is to help your teenager stay healthy and to learn to make healthy decisions for themselves. We help foster this development by creating time at every visit for your teenager to talk one-on-one with us. As adolescents begin to develop into adults, we need them to learn and practice the skill of taking responsibility for their health and their decisions. That requires providing teens a safe space where they know they can always ask questions and get information about things they may feel self-conscious talking about with parents or caregivers. Parents may also need special guidance and support through these years. That is why Cornerstone’s goal is to provide comprehensive health care to teens AND their families.

As part of that commitment to you and your teen, we ask parents to leave the room for part of each visit to create that space for discussions and to build trust. We also encourage teenagers to share information about their health with their parents and caregivers. However, there may be some things that your teenager would rather talk about with a doctor, nurse or counselor. Ohio law allows teenagers to receive some health services on their own. Health care providers can, and in some cases must, keep those services CONFIDENTIAL. “Confidential” means that we will only share the information if a teenager says it’s alright. Of course, there are limitations to confidentiality when safety is a concern -- so please know that we will share information if we are concerned that your child may hurt themselves, hurt others, or if someone is hurting them.

We can discuss most of the services your teen receives. However, if your teenager receives the following services, we cannot give you information about these visits without permission from them:
- Prevention and treatment of sexually transmitted infections (STI/STD)
- Counseling and treatment for pregnancy prevention
- Counseling and care for drug or alcohol problems
- Initial counseling for mental health concerns

I ask that you support these care standards and help your teen learn the important, developmental skill of caring for their own health needs. Our goal, like yours, is to keep your teenager healthy and safe – first and foremost – and we value the trust you put in us to help care for your children. I am happy to talk about any questions or concerns you may have. We look forward to working with you to provide high quality medical care for your teenager or young adult. I hope to meet you soon!

Michele Dritz, MD
Adolescent Medicine Specialist
Cornerstone Pediatrics
TRANSITION ≠ TRANSFER

It is a process that starts early and develops over time.

It is important for **ALL** adolescents – regardless if they have a significant medical condition or not.
It is shaped as you...

- Begin your clinic visits saying “hi” to the teen 1st, directing your questions directly to the teen and letting them defer to parents when needed (starting ~10-11 years old).

Helping teen know they play a vital role in their health and care.
It is shaped as you...

- Educate families and teens about how healthcare looks different during adolescence for important, developmentally-appropriate reasons (~12-13 yo)

Taking the opportunity to send a “Welcome to Adolescence” letter to teens and parents to welcome them to this new stage of health
It is shaped as you...

• Build confidential one-on-one time into your adolescent visits starting in early adolescence (~12-13yo)

Practicing the important skills of feeling comfortable talking to provider, knowing medical history, etc
It is shaped as you...

- Help teens and parents understand how to practice taking ownership of their health and healthcare

Providing guidance on developmentally-appropriate skills to practice to build competency

Resource: www.umhs-adolescenthealth.org/improving-care/health-center-materials/
It is shaped as you...

• Work with teens to ensure they understand their medical conditions, practice medication compliance and offer guidance to promote healthy behaviors.

Along with their family, provide support and opportunities to practice health ownership skills.
It is shaped as you...

- Begin to discuss with teens and parents the timing and process involved in transitioning to adult health care (~16-17-18yo)

Navigating the healthcare system can be hard, so provide resources on ongoing adult preventive care, how the system works and how to start preparing.

Resource: younginvincibles.org/what-we-do/consumer-education/
It is solidified as you…

• Set goals with teens about setting up their 1st adult provider appointment(s) and transferring their medical records, prescriptions, etc (~18-19yo)

Offer guidance to teens and families through process & document transition plan to ease transfer of care
And if teen does have complex medical issues...

- Utilize robust, formal transitioning tools available to ensure effective and proper transition of all healthcare needs

Often includes aligning specialists, medication plans, summary of care plans and physical “handoffs” to avoid falling through the cracks

Resources:
www.gottransition.org/providers/index.cfm
www.aap.org/en-us/professional-resources/practice-transformation/echo/Pages/Transition.aspx
Making the Message
Connect with Teens & Young Adults

WHATEVER YOUR PASSION, REGULAR WELLNESS VISITS HELP YOU LIVE WELL.

WHATEVER YOU’RE PASSIONATE ABOUT, fitness or food, music or your favorite sports team, regular checkups help you live well so you can create more memories. During your checkup, you may discuss and receive a number of screenings, vaccines and other care that help you take charge of your health and your family’s health. And there is little or no cost if you are enrolled in Medicaid or the Children’s Health Insurance Program (CHIP). For more information visit healthfinder.gov, and call your doctor or local health clinic to schedule a visit today.
YOUTH PANEL TAKE

Facilitated by Dr. Dawn Anderson-Butcher
“Teen Take” Discussion

• How can providers “market” health better to teens and their families?

• How can clinics be more inviting for teens?

• How can doctors help teens take an active role in health and support transitioning who is “in charge” of your health from parents to teens?
Resources

• University of Michigan
  – Adolescent Health Initiative

• Ohio Chapter AAP Adolescent Health
  – Document links
  – Educational webinars
Question 1

Which of the following would NOT be a recommended strategy to improve adolescent healthcare visits?

A. Have adolescent friendly reading materials in the waiting room
B. Educate staff about adolescent development
C. Have a strict policy that no patient will be seen if they are more than 10 minutes late
D. Provide transportation assistance or resources to adolescent patients and their families if needed
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Question 2

At what age does Bright Futures recommend offering private time with adolescents during well-care visits?

A. Early adolescence (11-14 years old)
B. Middle adolescence (15-17 years old)
C. Late adolescence (18-21 years old)
Question 2

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Question 3

You are seeing a 15 yo male for a visit. During the confidential part of the visit he discloses that he has suicidal thoughts and a plan. He does not want his parents to know. The best approach to this scenario is to:

A. Respect his wishes and maintain confidentiality
B. Call child protective services
C. Secretly notify his parents, but do not let him know you are doing this to maintain the relationship
D. Explain to the patient that you are worried about his safety and need to notify parents, and ask him how he would like this information to be disclosed
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Question 4

Ways to increase yearly preventative medicine visits include all except:
A. Transforming a scheduled sick visit into a preventative care visit combined with an acute care visit
B. Performing the preventative medicine visit at the same time as a sports physical
C. Encouraging use of minute clinics for preventative care
D. Proactively using social media to remind youth and families to schedule/attend a well visit
Question 4

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Pre-visit planning includes:

A. Huddle with the care team
B. Chart review to identify previous conditions, last well visit, previous medical care (vitals, labs, imaging, specialty care) and prior health maintenance
C. Anticipate screening needs
D. All of the above
Question 5

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Question 6

Which of the following are part of adolescent well visits and preventive care services:

A. Comprehensive health and development history
B. Comprehensive physical exam
C. Confidential time during the visit
D. Appropriate immunizations and screening labs
E. Developmentally-appropriate anticipatory guidance
F. All of the above
Question 6

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D. Appropriate immunizations and screening labs
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F. All of the above
1. Strategies to improve adolescent well visits and/or preventive care reimbursement include:

A. Appropriate billing mechanisms that allow for preventive care services on the same day as acute or chronic care visits (i.e. Modifier 25)

B. Strategic use of pay-for-performance measures that are utilized by both public and private insurers and aid in improving the quality of adolescent care

C. Use of time-based billing at non-well visits when addressing medical and/or psychosocial issues that involve significant time spent counseling (>50%)

D. Documenting the appropriate CPT code for health screening done at visit

E. All of the above
Question 7

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   A. Appropriate billing mechanisms that allow for preventive care services on the same day as acute or chronic care visits (i.e. Modifier 25)
   
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   D. Documenting the appropriate CPT code for health screening done at visit
   
   E. All of the above
Question 8

True or False

Providing clinicians with education and resources about recommended adolescent preventive care services, risk assessment screening strategies and local resources for support can help improve the quality of adolescent care.
Question 8

True or False

Providing clinicians with education and resources about recommended adolescent preventive care services, risk assessment screening strategies and local resources for support can help improve the quality of adolescent care.
Question 9

True or False

Parents and/or guardians of adolescents often do not realize that a yearly well visit continues to be recommended even after infancy and early childhood.
Question 9

True or False

Parents and/or guardians of adolescents often do not realize that a yearly well visit continues to be recommended even after infancy and early childhood.
Question 10

Which of the following are true about confidential care?

A. Confidential care a key component to health care for teens.
B. Time alone with providers is essential for improving adolescent health care.
C. Office culture must reflect confidential care for success.
D. All the above
Question 10

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