

**Healthcare Transition:
Moving from Pediatric to Adult Health Care for Youth and Adults with Autism Spectrum Disorder
A Workbook for Families**

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Welcome

Welcome to the Transition to Adult Healthcare Workbook for Families!

This workbook aids families in supporting the health care transition of youth with autism spectrum disorder (ASD) transition from pediatric to an adult model of healthcare. Your child is participating in a week-long course about transition to adult health care.

Transitioning from pediatric to adult health care is a process that should involve planning and support from a team. This team consists of a variety of stakeholders, institutions, and individuals, such as the community, educators, the youth, health care providers, other health care assistants, social service workers, and family members like you.

Despite the increasing demand in vocational and academic transition services and education for youth with disabilities, current programs are few and lack cohesive structure and effectiveness. Out of these transition programs, health care transition is a crucial subject that is yet to be covered. Other barriers include lack of providers with sufficient knowledge and time to work with special needs populations, and a lack of guidance for parents on how to transition their youth from pediatric to adult health services. This workbook is designed to bridge the gap in the lack of educational services regarding healthcare transition in youth with ASD.

The workbook is designed to increase these transition skills: Self-advocacy, planning and scheduling, self-monitoring, and health knowledge.

Acknowledging the depth and variance of the autism spectrum, this workbook serves as a guide for the adaptation and implementation of educational materials. This workbook is broken down into two sections: (1) general healthcare information and (2) synopsis of course lessons. Certain resources may need to be tailored to suit the individual and developmental stage of each child. We look forward to going on this exciting journey with you in making a difference in the health of youth with ASD.

GENERAL INFORMATION

Introduction to Autism Spectrum Disorder (ASD)

What is Autism Spectrum Disorder (ASD)?

ASD and autism are general terms to describe this complex neurodevelopmental disorder. This disorder/condition is generally characterized (in varying degrees) by (1) difficulties in social interaction and communication, and (2) repetitive behaviors and restricted interests.

Prior to 2013 when the most recent version of the *Diagnostic and Statistical Manual* of the American Psychiatric Association, the *DSM-5*, was published, there were 5 diagnoses that were considered part of the family of autism. These included Autistic Disorder, Asperger's disorder, Pervasive Developmental Disorder-not otherwise specified (PDD-NOS), Rett syndrome, and Childhood Disintegrative Disorder. Currently the diagnostic classification system has been simplified and all diagnoses fall under Autism Spectrum Disorder (ASD) and are categorized based on the varying levels of support that the individual needs.

In addition to core impairments in interacting and communicating with others and having unusual interests and behaviors, people with ASD may also have intellectual disability, motor coordination difficulties, and other comorbid conditions, including seizures, sleep disturbances, and gastrointestinal problems.

Many individuals with ASD have accompanying psychiatric symptoms that are not associated with autism. About 70% of individuals with ASD may have one comorbid mental disorder and 40% may have two or more. ADHD, anxiety and depression are some common comorbid disorders.

The term "spectrum" refers to the wide range of symptoms, skills, and levels of impairment or disability that individuals with ASD experience. Some individuals may be able to participate in typical activities of daily living with few supports while others may need significant support for most activities. All people with ASD have unique needs, but some are more mildly impaired by their symptoms while others are significantly disabled.

Understanding Health-Related Outcomes (Taken from Health Care Transition and autism spectrum disorders; Emory Autism Center, 2016)

Health care transition is the process of changing from a pediatric to an adult model of health care. The goal of transition is to optimize health and assist youth in reaching their full potential. Achieving this goal requires an organized transition process to support youth in acquiring independent health care skills, preparing for an adult model of care, and transferring to new providers without disruption in care.

Six Core Element of Healthcare Transition

1. **Transition Policy:** develop transition policy/statement that describes the practice's approach to transition and educate staff about this approach; post policy and discuss with families
2. **Transition Tracking and Monitoring:** establish criteria and process for identifying transition-age youth and enter their data into a registry and track progress
3. **Transition Readiness:** conduct regular transition readiness assessments to identify needs and goals; jointly develop and prioritize goals and document regularly
4. **Transition Planning:** develop and regularly update plan of care; prepare for changes once adult turns 18 (legal changes, policy and consent, self-advocacy, etc.); determine level of need for decision making; plan for timing of transfer; obtain consent for release of information for guardians; assist with finding adult provider and clarify responsibilities of pediatric vs adult provider until transfer
5. **Transfer of Care:** confirm date of first adult provider appointment and make sure transfer happens when youth is medically stable; complete transfer package and send package along with letter to the adult practitioner
6. **Transfer Completion:** contact young adult/caregiver 3-6 months after last pediatric appointment to confirm transfer of responsibilities; communicate with adult practice confirming completion of transfer; build ongoing and collaborative partnerships between adult and specialty practices

How does ASD Affect Healthcare Transition? (Taken from Healthcare Transition and Autism Spectrum Disorders; Emory Autism Center, 2016)

Spectrum: Because autism exists on a spectrum, each patient's healthcare transition plan will be fairly unique. There's no "one size fits all" transition plan that can be used for everyone that has autism. Each plan will be individualized to address each person's specific needs.

Structure: Transition will be much more successful if there is a degree of structure to the process. It will be helpful if there is a set schedule for regular doctor's visits to discuss transition (when they happen, where they happen, how the appointment flows, who is there, etc.) and this structure/schedule can eventually be transferred to an adult practitioner.

Unexpected Changes: Individuals with ASD crave structure and predictability. Anticipation of change and coping with changes are often challenging for adolescents with ASD. This is something to keep in mind as transition inherently requires change. Any expected or anticipated changes should be explained to the client clearly, as far in advance as possible, and repeatedly in order to raise his/her level of comfort.

Developmental Disability: Individuals with ASD will have to deal with issues related to his/her specific symptoms throughout his/her whole life and adjust accordingly. They will often experience social and emotional developmental milestones later than their same-age peers. For example, many young adults with ASD may struggle with abstract concepts such as disclosure and self-advocacy, and thus may benefit from transitioning to adult healthcare after the age of 18 and may need direct instruction and targeted practice in understanding these concepts.

Executive Functioning: People with autism tend to have poorer executive functioning skills. This will make the logistics of healthcare (e.g., making appointments, showing up on time, filling prescriptions, calling the office, filling out medical forms) much more difficult. Providing and subsequently fading supports (e.g., visual supports, assistive technology, structured plans) will be helpful to adolescents with ASD.

Communication: Most individuals with ASD struggle with everyday communication skills to varying degrees. It is important to understand not only how an individual communicates with others (verbal? Non-verbal? Somewhere in between?) but also how well he/she understands any receptive communication.

Social skills: Difficulties with social skills have the potential to make appointments feel odd or awkward for the nurses, doctors and other healthcare staff. It is important to understand what limitations an individual has in social skills in order to have a successful interaction. (For example, just because a client isn't making eye contact doesn't mean that he or she isn't listening).

Restricted Interests: People with ASD tend to have extensive knowledge about particular topics that are of interest to them. Knowing an individual's interests could go a long way in building rapport and engaging the individual with ASD. Depending on the interest, it could be used to help teach him or her about healthcare needs.

Sensory Issues: People with ASD may have various issues related to specific senses (for example, certain lights/sounds may be abrasive to someone with ASD). Therefore, it may be difficult for someone with ASD to adjust to the new sights, sounds, smells, etc. of a new doctor's office. This may also affect the ease with which patients interact with various medical staff.

Communication Tips (Taken directly from DPH booklet)

People sometimes say that communication is a two-way street. But when it comes to effective communication and medical appointments for youth it is usually a three-way street:

Parent(s) + Health care provider + Youth

Transition is a time of changing roles and expectations. It is a time for youth to actively assume more responsibility and for parents as well as health care providers to encourage this change to the greatest extent possible even when they have special health care needs. Open communication is essential to this process so that the three-way street becomes:

Youth + Health care provider + [Parent(s) as needed]

Key questions for youth, health care provider, and parent(s)

- Do I show others the respect that I want to receive?
- Do I listen carefully and completely to questions or comments before responding?
- Do I participate in discussions willingly and with an open mind?
- Do I accept responsibility for my actions and opinions?
- Do I ask for further explanation when I don't understand something?
- Do I actively participate in planning and problem solving?

Key questions for youth

- Do I participate in my appointments by offering information, answering questions, expressing my concerns, and asking questions?
- Do I express my own thoughts and feelings even when they differ from my parent(s) or health care provider?
- Do I ask for some time alone with my health care provider at my appointments for private discussion and am I able to ask questions without feeling embarrassed?

Key questions for providers

- Do I focus my attention primarily on the youth rather than the parent?
- Do I discuss topics that are age and developmentally appropriate and include but are not limited to the youth's special health care needs?
- Do I offer time alone with the youth for private discussion?
- Do I respect confidentiality as much as possible?
- Do I create a comfortable environment that encourages collaboration?

Key questions for parents

- Do I actively encourage my son or daughter to participate as fully as possible?
- Do I actively encourage the health care provider to do the same?
- Do I facilitate confidential communication between my son or daughter and his or her health care provider to the greatest extent possible?
- Do I recognize my own legitimate needs as a parent during the transition process and seek appropriate supports and resources to meet these needs?

Rules of 18 (taken from DPH's Taking Charge of my Healthcare)

In Georgia, when a person reaches his or her 18th birthday, he or she becomes a legal adult. Unless a guardian has been appointed through a judge in a court of law, all the rights and responsibilities that are part of being a legal adult go into effect. Some of these rights include the ability to:

- Vote
- Get married without parental consent
- Make a will (you can legally make a will at age 14 in Georgia)
- Make a contract (such as renting an apartment, buying a car, taking out a loan, etc.)
- Give or refuse consent for medical treatment
- Make independent decisions free from parental control
- Apply for credit (including credit cards)

At the age of 18, individuals also have certain legal responsibilities, such as:

- Self-support (parents are not required to support their adult children unless the youth is enrolled into secondary school, then that age of support ends at 20)
- Serving on Jury Duty if called to do so
- Being liable for all contracts entered into (such as making loan payments)
- Every male citizen and immigrant residing in the United States must register with the selective service within 30 days of his 18th birthday. Even a male with severe disabilities who could not possibly serve in the military must register. Not registering is a federal crime. This does not mean joining the military, as there is no military draft right now where males of certain ages are required to serve in the military. However, the military still needs to know the name of every male citizen and immigrant living in the United States in case there would be a need for a military draft in the future.

What Does it Mean to be an Adult? (Borrowed heavily from DPH’s Taking Charge of my Healthcare)

Typically, turning 18 is the defining point between being a youth and being an adult, but being prepared for the increased responsibilities doesn’t happen overnight. These young adults need parents, friends, or other individuals they trust to help them think through important decisions.

In addition, parents also need to understand that they do not continue to be the legal decision-maker for their adult son or daughter, unless they have legal authority, such as a type of guardianship. Even in situations where severe disabilities are involved, adults are presumed to be able to act on their own behalf unless a court of law decides otherwise.

The issue of guardianship, conservatorship, and independence is important in making decisions, including healthcare decisions. The following items are things for the family to consider in deciding the best option for their situation:

Guardianship vs. Conservatorship

| Guardianship | Conservatorship |
|---|---|
| <ul style="list-style-type: none">• For legally incompetent individuals | <ul style="list-style-type: none">• Not considered legally incompetent |
| <ul style="list-style-type: none">• A “guardian” is assigned by the courts to make all decisions for individual | <ul style="list-style-type: none">• A “conservator” is assigned by the courts to share or make limited decisions for individual |
| <ul style="list-style-type: none">• The individual under guardianship is called the “ward” | <ul style="list-style-type: none">• The individual under conservatorship is called the “conservatee” |

Sometimes, full guardianship may not be needed. A limited guardianship can be established so that the individual who has a guardian can still keep some of his/her decision-making rights. A person may need help with legal and financial decisions, but he/she is still capable of making decisions, such as consenting to undergo a procedure. In this situation, the person may be able to have a guardian for other decisions, but still keep the right to make his/her own healthcare decisions.

A Parent's Health Care Checklist

| Question | Yes | Not Yet | First Steps |
|--|-----|---------|-------------|
| Do I know how my teen learns best? | | | |
| Can my teen describe his/her special health care needs? | | | |
| Do we discuss and demonstrate healthy lifestyle habits as a family? | | | |
| Can my teen name his/her doctor? | | | |
| Can my teen communicate that he/she is feeling ill? | | | |
| Can my teen describe symptoms when feeling ill? | | | |
| Do we use a family calendar for tracking appointments, activities, etc.? | | | |
| Is my teen involved when I schedule appointments? | | | |
| Can my teen schedule appointments on his/her own? | | | |
| Do I encourage my teen to give information and answer questions at appointments? | | | |
| Have I discussed transitioning to adult care providers with my teen's present providers? | | | |
| Do I involve my teen in registering or checking in for appointments (showing insurance/Medicaid card, etc.)? | | | |
| Do I involve my teen in filling and refilling prescriptions? | | | |
| Is my teen involved in maintaining/ordering monthly supplies, equipment or scheduling home care? | | | |
| Do I know what insurance or health care coverage will be available to my teen when he/she turns 18? | | | |
| If my teen is on my insurance, do I know how long that can continue? | | | |
| Have we talked about and made plans for guardianship (none, full, limited)? | | | |
| Have we discussed and planned for Power of Attorney for Health Care? | | | |

| | | | |
|--|--|--|--|
| Do I use formal and/or informal advocacy or supports and is my teen aware of this? | | | |
|--|--|--|--|

Health Insurance for Young Adults with ASD

Health insurance is a critical component of healthcare, but also one of the most confusing aspects to navigate. The different types of plans offered, eligibility, coverage, and jargon are especially daunting when trying to decide which healthcare plan is the most appropriate. After you are finished covering this lesson, help your son/daughter complete the “Health Insurance Activity”.

Coverage and Insurance

Healthcare coverage and insurance mean the same thing. There are private and public options. Private plans are usually supplied by an employer or can be purchased through the marketplace. These include large companies such as Aetna, Blue Cross Blue Shield, and Kaiser. Public insurance is funded through the government and includes programs like Medicaid and Medicare.

Medicaid

Medicaid is a federal insurance program for low-income families and individuals. Medicaid coverage and laws vary by state, but the federal law mandates that all people under the age of 21 who have Medicaid are entitled to Early Periodic Screening, Diagnosis, and Treatment (EPSDT) of ASD. States also must cover all medically necessary autism-related interventions that count as “medical assistance.”

Georgia Law

Under the state of Georgia, **anyone who receives Supplemental Security Income (SSI) from Social Security is automatically eligible for Medicaid.** Some allow indefinite continued coverage if the disability occurred before age 18, and the parent continues to provide 50% or more of the adult child’s care. Some SSI payments are made based on the adult child no longer being claimed as a dependent. Furthermore, there are some programs that may help youths with ASD or other disabilities. The Katie Beckett program states that at age 18, they may be eligible for SSI even if they had not been previously due to parent income. The COBRA coverage also states young adults can continue COBRA coverage up to 36 months after leaving the parent’s family insurance plan due to losing their status as a dependent, but the individual is responsible for paying individual premiums. If health and dental plans are offered separately, each plan should be considered separately.

Social Security Disability Insurance

The Social Security Administration has two kinds of benefits for people with disabilities over the age of 18: Supplemental Security Income (SSI) and Social Security Disability Insurance/Disabled Adult Child Benefits (SSDI). Be aware that even if a family is receiving SSI for a child under the age of 18, they will need to go through a **re-determination process to maintain SSI benefits as an adult.** To apply for SSI disability benefits, please visit: <http://www.ssa.gov/disabilityssi>

Affordable Care Act

Under the Affordable Care Act, all insurance plans must cover essential health benefits which include mental health benefits, rehabilitative and habilitative services (like occupational therapy or speech therapy), and prescription medications. Furthermore, plans cannot deny coverage on the basis of disability. In addition, **young adults may remain on their parents’ insurance up until the age of 26.**

Private Healthcare

If you want private insurance, there are many choices available on the marketplace or from an insurance broker, several of which will be offered through employment. Here is a breakdown and comparison between the types of plans, coverage they offer, and expenses.

Plans are categorized into the following levels: bronze, silver, gold, platinum, and high-deductible, catastrophic plan for young adults under 30. Bronze plans have the least coverage but are the least expensive, while platinum plans include the most coverage but will have the most expensive monthly payments.

Large National Brands

Some commonly seen insurance brands include: Aetna, Blue Cross Blue Shield, Cigna, Humana, Kaiser, and United. Your workplace will mostly likely offer some sort of plan through these companies.

Types of Plans

There are four common types of plans: Health Maintenance Organizations (HMOs), Preferred Provider Organizations (PPOs), Exclusive Provider Organizations (EPOs), Point-of-Service plans (POS), and high-deductible health plans (HDHPs), which may be linked to health savings accounts (HSAs). There are benefits and limitations to each plan, and you should carefully go over all your options to determine the best fit for you. An HMO is the cheapest plan but offers the least freedom to your health care providers. A PPO includes more freedom and choice regarding providers, but also will be more expensive. A POS is a blend of HMO and PPO plans. A catastrophic plan is for relatively young adults under 30 that may have lower premiums. An HDHP includes less monthly payments in exchange for high deductibles. Below is a chart to compare the characteristics of each plan.

Payments and Expenses

All marketplace plans have premiums, deductibles, copays, coinsurance, and out of pocket costs that apply to most covered services. A **premium** is the amount of money you have to pay for insurance, usually paid in monthly or quarterly installments. A **deductible** is the amount you pay for covered health care services before your insurance starts to pay. For example, with a \$2,000 deductible, you pay the first \$2,000 of covered services yourself. A **copayment** is a fixed amount (\$20 for example) you pay for a covered health care service after you've paid your deductible. Like copays, coinsurance is another form of cost sharing between you and your insurance company. **Coinsurance** is a percentage of the cost for a health service or prescription paid by you after you have met the deductible. For example, an 80/20 coinsurance means the insurance company will pay for 80% of medical costs while you pay 20%, after meeting the deductible. Under this plan, if a person has met his deductible and needs to pay a \$100 medical bill, his insurance will pay \$80 while he pays \$20. **Out of pocket costs** are expenses for medical care that aren't reimbursed by insurance. Out of pocket costs include deductibles, coinsurance, and copayments for covered services plus all costs for services that aren't covered (for example, some vision or dental insurance). Generally plans with lower monthly premiums have higher deductibles and copayments, while plans with higher monthly premiums usually have lower deductibles and copayments.

Comparison Chart of Different Health Insurance Plans

| Plans | Freedom of choice | Paperwork | Referral by primary care doctor to see specialist | Doctors you see | What you pay |
|-------------------|---|---|---|---|---|
| HMO | Least amount | Least amount; no claim forms | Yes | HMO network No coverage for out of network providers (pay full bill yourself, except for emergency hospital visit) | Premium Deductible Copays/coinsurance (varies according to plan, counted toward deductible) |
| PPO | Moderate amount | In-network: little to none out of network: pay providers, then file claim to get money back from PPO | No | PPO network, some coverage for out of network providers; pay more to see out of network doctors | Premium Deductible Copay/coinsurance Other costs (if out of network doctor charges more than others in area, you may have to pay balance after insurance pays its share) |
| EPO | Moderate amount | Little to none | No | EPO network, no coverage for out of network providers (pay full bill yourself, except for emergencies) | Premium (lower than PPO) Deductible Copay/coinsurance Other costs (full bill for out of network doctor) |
| POS | More amount | Moderate amount for out of network providers- file claim to get money back from POS | Yes | In-network providers, some coverage for out of network providers; pay more to see out of network providers | Premium Deductible Copay/coinsurance (higher for out of network doctor) |
| Catastrophic Plan | For people under 30 | Keep track of expenses before you meet deductible | Yes | In-network; individual plans may have additional rules on specialists | Premium (lower) Deductible (\$7,150 for individual, \$14,300 for a family) |
| HDHP/HSA | Depends on plan (HMO, PPO, EPO, or POS) | Depends on plan; keep all your receipts to withdraw money from HSA/know you've met the deductible | Depends on plan | Depends on plan | Premium (lower) Deductible (\$1,300-\$6,550 for individuals; \$2600-\$13,100 for families) Copays or coinsurance Out of pocket (higher) |

Healthcare Insurance Activity

For the following, please indicate the best term that matches the description.

1. The amount of money you have to pay for insurance, usually paid in monthly or quarterly installments.

- A) Premium
- B) Deductible
- C) Coinsurance
- D) Copay

2. The amount of money you pay for eligible medical expenses in a calendar year. You must meet this amount before the insurance starts paying for your medical expenses.

- A) Premium
- B) Deductible
- C) Out-of-Pocket Limit
- D) Copay

3. The health care cost sharing between you and your insurance company, which is a percentage of the cost for a health service or prescription paid by you after you have reached the deductible.

- A) Premium
- B) Coinsurance
- C) Out-of-Pocket Limit
- D) Copay

4. A flat fee for a healthcare service or a prescription drug that is predetermined by your health insurance plan.

- A) Premium
- B) Coinsurance
- C) Out-of-Pocket Limit
- D) Copay

5. The maximum amount of money you may pay for medical services in a calendar year.

- A) Premium
- B) Coinsurance
- C) Out-of-Pocket Limit
- D) Copay

True/False. In the following, please indicate if the statement is true or false.

1. In general, the higher the deductible, the lower the premium of your insurance plan (the less expensive it is).

- True
- False

2. Your health insurance will pay for your medical expenses even before your deductible is met.

True
False

3. An 80/20 coinsurance means I pay a \$20 flat fee every time I visit the doctor's office or hospital.

True
False

4. Under the Affordable Care Act (ACA), I can remain on my parents' insurance until I am 26 years old.

True
False

5. Under the state of Georgia, anyone who receives Supplemental Security Income (SSI) from Social Security is automatically eligible for Medicaid.

True
False

6. If I am under 18 and my family is receiving SSI for me currently, I still need to go through a re-determination process once I turn 18 to maintain SSI benefits as an adult.

True
False

7. Medicaid is a federal insurance program for people age 65 and older, and does not vary by state.

True
False

8. Medicaid is a federal insurance program for low-income families and individuals, and varies by each state.

True
False

In the following descriptions, circle the plan or plans that fit the description. Sometimes there will be more than one right answer.

Example:

1. This plan allows you to see any doctor within the network and will pay for those expenses, but does not cover out-of-network services. If you see a doctor outside the network, you must pay the full bill yourself, except for emergencies.

- A) HMO
- B) PPO
- C) EPO
- D) POS

2. This plan allows you to see any doctor within the network and will pay for those expenses. It will also cover out-of-network services, although the coverage will not be as high for out-of-network providers. This means you will pay more to see out-of-network providers than providers within the network.

- A) HMO
- B) PPO
- C) EPO
- D) POS

3. This plan offers the least amount of freedom regarding which providers you can see. However, it does tend to be the least expensive out of the plan types.

- A) HMO
- B) PPO
- C) EPO
- D) POS

4. This plan offers a moderate amount of freedom regarding which providers you can see.

- A) HMO
- B) PPO
- C) EPO
- D) POS

5. This plan is for people under 30 years old, who are generally healthy. It also has the lowest premiums out of all the plans.

- A) HMO
- B) Catastrophic Plan
- C) HDHP/HSA
- D) POS

6. This plan requires the least amount of paperwork and there are no claim forms to fill out.

- A) HMO
- B) PPO
- C) EPO
- D) POS

7. This plan requires you to pay for out-of-network providers by yourself first, then file a claim to the insurance. After processing the claim, the insurance will give back to you the portion of money they will cover for those services.

- A) HMO
- B) PPO
- C) EPO
- D) POS

8. This type of plan has the lowest premiums, but usually have very high deductibles. There are several plans you can choose from, and they are linked to a Health Savings Account.

- A) HMO
- B) Catastrophic Plan
- C) HDHP/HSA
- D) POS

Healthcare Insurance Activity Answers

For the following, please indicate the best term that matches the description.

1. The amount of money you have to pay for insurance, usually paid in monthly or quarterly installments.

A) Premium

- B) Deductible
- C) Coinsurance
- D) Copay

2. The amount of money you pay for eligible medical expenses in a calendar year. You must meet this amount before the insurance starts paying for your medical expenses.

A) Premium

B) Deductible

- C) Out-of-Pocket Limit
- D) Copay

3. The health care cost sharing between you and your insurance company, which is a percentage of the cost for a health service or prescription paid by you after you have reached the deductible.

A) Premium

B) Coinsurance

- C) Out-of-Pocket Limit
- D) Copay

4. A flat fee for a healthcare service or a prescription drug that is predetermined by your health insurance plan.

A) Premium

- B) Coinsurance
- C) Out-of-Pocket Limit
- D) Copay**

5. The maximum amount of money you may pay for medical services in a calendar year.

A) Premium

- B) Coinsurance
- C) Out-of-Pocket Limit**
- D) Copay

True/False. In the following, please indicate if the statement is true or false.

1. In general, the higher the deductible, the lower the premium of your insurance plan (the less expensive it is).

True

False

2. Your health insurance will pay for your medical expenses even before your deductible is met.

True

False You must meet your deductible before your insurance starts paying

3. An 80/20 coinsurance means I pay a \$20 flat fee every time I visit the doctor's office or hospital.

True

False Coinsurance is the percentage paid by you and the insurance, while copay is an agreed-upon flat fee

4. Under the Affordable Care Act (ACA), I can remain on my parents' insurance until I am 26 years old.

True

False

5. Under the state of Georgia, anyone who receives Supplemental Security Income (SSI) from Social Security is automatically eligible for Medicaid.

True

False

6. If I am under 18 and my family is receiving SSI for me currently, I still need to go through a re-determination process once I turn 18 to maintain SSI benefits as an adult.

True

False

7. Medicaid is a federal insurance program for people age 65 and older, and does not vary by state.

True

False This is Medicare

8. Medicaid is a federal insurance program for low-income families and individuals, and varies by each state.

True

False

In the following descriptions, circle the plan or plans that fit the description. Sometimes there will be more than one right answer.

Example:

1. This plan allows you to see any doctor within the network and will pay for those expenses, but does not cover out-of-network services. If you see a doctor outside the network, you must pay the full bill yourself, except for emergencies.

A) HMO

B) PPO

C) EPO

D) POS

2. This plan allows you to see any doctor within the network and will pay for those expenses. It will also cover out-of-network services, although the coverage will not be as high for out-out-network providers. This means you will pay more to see out-of-network providers than providers within the network.

A) HMO

B) PPO

C) EPO

D) POS

3. This plan offers the least amount of freedom regarding which providers you can see. However, it does tend to be the least expensive out of the plan types.

A) HMO

B) PPO

C) EPO

D) POS

4. This plan offers a moderate amount of freedom regarding which providers you can see.

A) HMO

B) PPO

C) EPO

D) POS

5. This plan is for people under 30 years old, who are generally healthy. It also has the lowest premiums out of all the plans.

A) HMO

B) Catastrophic Plan

C) HDHP/HSA

D) POS

6. This plan requires the least amount of paperwork and there are no claim forms to fill out.

A) HMO

B) PPO

C) EPO

D) POS

7. This plan requires you to pay for out-of-network providers by yourself first, then file a claim to the insurance. After processing the claim, the insurance will give back to you the portion of money they will cover for those services.

A) HMO

B) PPO

- C) EPO
- D) POS**

8. This type of plan has the lowest premiums, but usually have very high deductibles. There are several plans you can choose from, and they are linked to a Health Savings Account.

- A) HMO
- B) Catastrophic Plan
- C) HDHP/HSA**
- D) POS

Paying for Health Care

Healthcare is expensive. Teens and young adults need to know how they will meet the cost of their health care as adults. Families need to think about family insurance limits, types of health insurance coverage that might be available and the ways eligibility is determined.

In Georgia, if you receive Supplemental Security Income (SSI) from the Social Security Administration, you are automatically eligible for Medicaid. Some will allow indefinite continued coverage if the adult child is disabled and the disability occurred before 18 and the parent continues to provide 50% or more of the adult child's support or maintenance. This must be carefully considered if the adult child will be receiving Supplemental Security Income (SSI) because some aspects of SSI payments are based on the adult child no longer being claimed as a dependent by the parents, while others allow the parents to continue to provide support to the adult child but then SSI payments are at a reduced rate. For children on the Katie Beckett program, at age 18 they may be eligible for SSI even if they had not been previously because of parent income. You can apply for SSI Disability Benefits online at:

<http://www.ssa.gov/disabilityssi/>

A young adult may continue COBRA coverage for up to 36 months after leaving the parent's family insurance plan due to losing their status as a dependent. The individual is responsible for paying the individual premiums for the COBRA coverage and, while this can be quite expensive, it may still be worthwhile. If health and dental plans are offered separately, each plan should be considered based on its own cost and potential value. For example, given some of the access problems with dental care for Medicaid patients, it may be worthwhile to continue dental insurance under COBRA if the cost is affordable.

This law requires plans and issuers that offer dependent coverage to make the coverage available until a child reaches the age of 26. Both married and unmarried children qualify for this coverage. This rule applies to all plans in the individual market and to new employer plans. Beginning in 2014, children up to age 26 can stay on their parent's employer plan even if they have another offer of coverage through an employer. Parents need to read their policies carefully before their young adult reaches 26.

LESSON SYNOPSES

Lesson 1: Healthcare Transition Medical Home

MEDICAL HOME

Objectives: Your child will be able to:

1. Express intention to switch from pediatric to adult healthcare in the near future
2. Identify strengths and weaknesses in their abilities to autonomously take care of their health by going through the “Healthcare Checklist”
3. Identify goals and dates for important deadlines by creating a healthcare transition timeline
4. Create an emergency medical card
5. Describe the role of a healthcare team, and identify who is on their healthcare team

You may have heard about Medical Home as a way that some health care teams work together. The title Medical Home can be a little confusing because we usually think of a home as a place. A Medical Home is **not** a place.

It is an approach to how care is delivered that combines **where** primary care is provided, **who** provides that care and **how** they all work together.

A Medical Home includes you and your family to make sure that quality care is accessible, family-centered, continuous, comprehensive, coordinated, compassionate and culturally appropriate.

Your team includes others that you may not have considered; the support staff. Within a Medical Home there is a team of health care providers who work together along with you and your family as full partners.

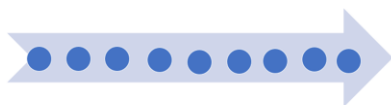
The clinic staff knows who you are and remember you from visit to visit. They support you by providing other really important things, like scheduling your appointments, taking your weight and blood pressure, and helping you find resources in the community, such as therapist and other providers.

Remember that you have a lot of people supporting you and they want to see you succeed and live independently.

| My Health Care Team | |
|--|--|
| You | Remember, in addition to being the patient, you are part of the team |
| Primary Care Doctor | |
| Specialty Doctor(s) | |
| Physician Assistant or Nurse Practitioner | |
| Nurse(s) | |
| Dentist | |
| Dentist Hygienist | |
| Therapists (physical, occupational speech/language, etc.) | |
| Dietician/Nutritionist | |
| Pharmacist | |
| Mental Health Professional (counselor, psychologist, psychiatrist, etc.) | |
| Social Worker | |
| Care Coordinator | |
| School Nurse | |
| Home Health Care Workers | |
| People you trust to help you with medical decisions. These may include: | |
| Parents or Other Family Members | |
| Friends | |
| Others | |

Transition Timeline

Generally, it is best to start planning for transition early. You should help your child in the transition process, which may take months or even years to complete. The end goal is to select an adult provider and to make appointments with them, rather than the pediatrician.



Example:

August- Teach your child about his/her health condition(s) and medication(s)

September-Identify your child’s healthcare transition team, create an emergency medical card,

October- Network to identify potential adult providers



November- Explore options for healthcare coverage

December- Explore option of legal guardianship

January- Select adult provider and transfer all related healthcare information



February- Have your child make first appointment with adult provider

March- Tour adult provider’s office before appointment to meet nurses and/or doctor.....

| HEALTH CARE CHECKLIST | Yes | Working On It |
|--|-----|---------------|
| Managing Health Care | | |
| Can I describe my healthcare needs? | | |
| Are there ways my health care needs affect my day-to-day life? (For example, do I need medication, a special diet...?) | | |
| Do I know what to do when I get sick? | | |
| Managing Medications  | | |
| Do I know what medications I take and why I take them? | | |
| Do I know when to take my medications? | | |
| Do I take my medications correctly and on my own? | | |
| Do I know what to do if I'm having a bad reaction to my medications? | | |
| Do I know how to get my prescriptions filled and refilled? | | |
| Do I reorder medications before they run out? | | |
| Doctor Appointments  | | |
| Can I make my own appointments? | | |
| Can I keep track of my appointments/activities? | | |
| Do I know what to bring to my appointments? | | |
| Do I know how to check in and fill out the medical history form, including a list of my allergies? | | |
| Can I provide information and answer questions at my appointments? | | |
| Do I know what questions to ask at my appointments? | | |
| Do I arrange for my ride to medical appointments? | | |
| Do I have someone I trust who can go to appointments with me? | | |
| Do I call the doctor about unusual changes in my health? | | |
| Do I follow-up on any referrals for tests, check-ups or labs? | | |
| Other Important Information | | |
| Do I know what my health insurance covers? | | |
| Do I know what kind of health insurance I will be able to have when I am 18? | | |
| Do I know health emergency phone numbers and/or carry emergency contact information with me? | | |
| Do I know about how drugs/alcohol affects my health care condition? | | |
| Is there someone to help me make medical decisions? | | |
| Do I know what kind of help I might need with making decisions after I am 18? | | |
| Do I know about Power of Attorney for Health Care and Advanced Directives? | | |

An **emergency medical information card** is quite important as it contains information regarding your medications and allergies, to be read by another person when you are incapable of giving that information yourself. In other words, if you got into a car accident and became unconscious, responders will be able to learn the most important medical information about you from this one little card so they can help you in time. This card can, and does, save lives.

| My Health Care Team | |
|--|--|
| You | Remember, in addition to being the patient, you are part of the team |
| Primary Care Doctor | |
| Specialty Doctor(s) | |
| | |
| Physician Assistant or Nurse Practitioner | |
| Nurse(s) | |
| | |
| Dentist | |
| Dentist Hygienist | |
| Therapists (physical, occupational speech/language, etc.) | |
| | |
| Dietician/Nutritionist | |
| Pharmacist | |
| Mental Health Professional (counselor, psychologist, psychiatrist, etc.) | |
| | |
| Social Worker | |
| Care Coordinator | |
| School Nurse | |
| Home Health Care Workers | |
| | |
| People you trust to help you with medical decisions. These may include: | |
| Parents or Other Family Members | |
| | |
| Friends | |
| | |
| Others | |

| HEALTH CARE CHECKLIST | Yes | Working On It |
|--|------------|--------------------------|
| Managing Health Care | | |
| Can I describe my healthcare needs? | | |
| Are there ways my health care needs affect my day-to-day life? (For example, do I need medication, a special diet...?) | | |
| Do I know what to do when I get sick? | | |
| Managing Medications  | | |
| Do I know what medications I take and why I take them? | | |
| Do I know when to take my medications? | | |
| Do I take my medications correctly and on my own? | | |
| Do I know what to do if I'm having a bad reaction to my medications? | | |
| Do I know how to get my prescriptions filled and refilled? | | |
| Do I reorder medications before they run out? | | |
| Doctor Appointments  | | |
| Can I make my own appointments? | | |
| Can I keep track of my appointments/activities? | | |
| Do I know what to bring to my appointments? | | |
| Do I know how to check in and fill out the medical history form, including a list of my allergies? | | |
| Can I provide information and answer questions at my appointments? | | |
| Do I know what questions to ask at my appointments? | | |
| Do I arrange for my ride to medical appointments? | | |
| Do I have someone I trust who can go to appointments with me? | | |
| Do I call the doctor about unusual changes in my health? | | |
| Do I follow-up on any referrals for tests, check-ups or labs? | | |

| | Yes | Working On It |
|--|-----|---------------|
| Other Important Information | | |
| Do I know what my health insurance covers? | | |
| Do I know what kind of health insurance I will be able to have when I am 18? | | |
| Do I know health emergency phone numbers and/or carry emergency contact information with me? | | |
| Do I know about how drugs/alcohol affects my health care condition? | | |
| Is there someone to help me make medical decisions? | | |
| Do I know what kind of help I might need with making decisions after I am 18? | | |
| Do I know about Power of Attorney for Health Care and Advanced Directives? | | |

Emergency Medical Information Card

Name _____ Date of Birth _____
Address _____
Phone _____
Allergies to Latex or Medications _____

Emergency Contacts:

Name _____
Relationship _____
Phone _____

Name _____ Relationship _____
Phone _____

Health care Contacts:

Primary Doctor _____ Phone _____
Specialist Doctor _____ Phone _____
Hospital/Clinic _____ Phone _____
Insurance Card Number _____ Phone _____

Special Health Care Needs Information:

Chronic Illnesses/Diagnoses/Disabilities _____
Equipment/Other _____
How I Communicate _____
Other Important Stuff _____

Medications:

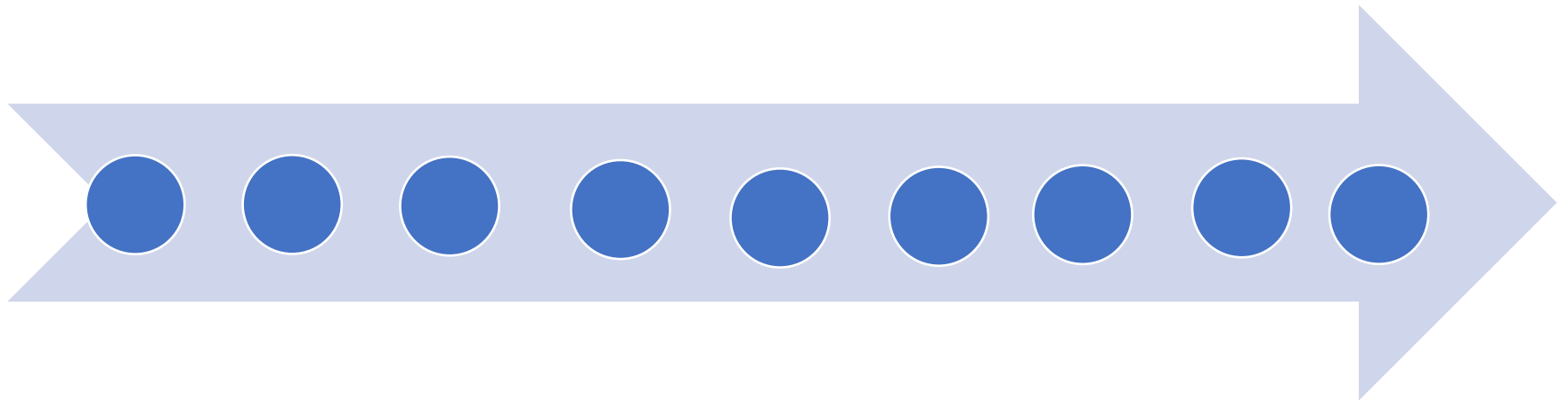
| | |
|------------|------------|
| Name _____ | Dose _____ |
| Name _____ | Dose _____ |
| Name _____ | Dose _____ |
| Name _____ | Dose _____ |
| Name _____ | Dose _____ |

Power of attorney for health care? Yes _____ No _____

If Yes, Who? _____
Phone _____

Conservator/Guardian? If Yes, Who? _____
Phone _____

Transition Timeline



Lesson 2: Healthcare Transition Doctor Appointments

Objectives:

At the end of this lesson, your child should be able to:

1. Identify symptoms for going to the doctor
2. Make a doctor's appointment
3. Describe ways to get to and from an appointment

Important Things to Remember When You Make an Appointment:

Be Prepared. If you have never done this before, have someone help you. You might even want to practice before you actually make your call.

Have your calendar ready so you can check the date and time. Put your appointment on your calendar right away.

You may need to repeat some of the information if the first person you speak to transfers you to someone else.

You may need to know your date of birth. You may need information from your insurance so have that ready as well.

Know the name of the person you need to see. It may be a doctor, a nurse practitioner or another health care provider.

Know the reason you need the appointment. Is it for a regular check-up or are you having a problem or concern?

If you will need a lift or other assistance to get onto the exam table or some other type of help, such as an interpreter, be sure to mention it when you call.

When Should You Go to the Doctor

1. You have a persistent, high fever
2. Your cold becomes unusually bad
3. You've lost weight suddenly and without explanation
4. You're short of breath
5. You experience severe chest, abdominal or pelvic pain
6. Your bowel movement or urination has changed
7. Bright flashes interrupt your vision
8. You experience confusion or changes in mood
9. You suspect you have a concussion
10. You develop unexpected symptoms after a procedure or starting a new medication
11. You are due for your annual physical check-up

Before You Make an Appointment

To prepare ahead of time for your call, write down the following information so you can easily access it while making your appointment.

Physician/Clinic phone number:

Name of Physician You want to See:


Name of Insurance Carrier (on card):


Insurance Number (on card):


Name of who has the insurance (you, mom, dad, etc.):


How to Make an Appointment


1. Have these things ready before you call:

Physician/Clinic phone number. 

Name of Physician you want to see. 

Health insurance card, if you have one. 


Pen and paper so you can take notes. 


Calendar, so you know your schedule. 

2. Call the doctor office.

If no one answers, call back!

If you hear a message, follow the steps in the message to talk to a live person or leave a message to get a call back.


3. Say, "Hello, my name is _____." Give your first and last name and your date of birth. Let them know if you're a new patient. 

4. Tell them the physician you would like to see and the reason for your visit. 

"I would like to make an appointment to see Dr. Miller for [and given them a reason]..."

"...a physical exam."


"...a personal issue."

5. Make an appointment time that works for you. Ask, "How soon can I get in?" 

If the date and time are ok, say "Thank you that will be fine."

If the date and time do not work for you say: "That won't work for me. Can you look for something else?"

Mark the date and time on your schedule/calendar.

6. If they ask, give them the name of your health insurance plan and card information. 

7. Find out if you need to bring anything to the visit.

Medical records 

Current medications 

8. Say, "Ok, I will be there on _____ at _____. Thank
(Date) (Time)

you. Good-bye."

HOW TO ARRANGE TRANSPORTATION FOR YOUR APPOINTMENTS

Start making plans for transportation as soon as you make your appointment.

You may be asking a friend or relative to drive you or you may be using a transportation service. Your chances of being able to get a ride are better if you plan ahead.

Remember to plan for a ride back home after your appointment if you will need one.

If you are taking a city bus you will want to make sure you know which bus to take and how long it will take so you are not late. You may even want to take a practice ride on the bus if you have not done this before just to make sure you know where and when to get on the bus.

If you are using a regular taxi cab you probably won't need to call until the day before or the day of the appointment but you will want to check with the company ahead of time.

The most popular option for rides that people use nowadays is Lyft or Uber, which is similar to taxi. Lyft and Uber are ride sharing programs that require an app on the smartphone. You will need to make an account in order to request a ride. Consult with your parents to see if that is something they would want you to do.

If you are not sure who to call or what to do, ask your parents, your county case manager or social worker at the clinic or hospital.

Lesson 3: Healthcare Transition Prescription Information

READING A PRESCRIPTION LABEL

Objectives:

At the end of this lesson, your child should be able to:

1. Describe prescriptions and where to pick them up
2. Fill up and reorder prescriptions
3. Identify information on a prescription label
4. Describe side effects of prescription medicine

Name and address of the pharmacy: Bidwell Rx, www.bid-medical.org, 1815 Metropolitan St, Pittsburgh, PA 15233, 412.323.4000
Prescription number: DEAF AB4567890, RX 0123456789, DR JOHN SCHIOLTIES, PEARSON, PATRICIA, 08/31/2013
Patient's name: PEARSON, PATRICIA
Directions for use: TAKE ONE TABLET BY MOUTH EVERY DAY
Medication name, strength, and dosage form: Atorvastatin calcium 20 mg Tablets, Watson
Quantity dispensed: QTY 30
Refills left: REF 2

Auxiliary labels:
Avoid consuming grapefruit or grapefruit juice while on this medication.
Consult your pharmacist or doctor about using this medication if you are pregnant, plan to become pregnant, or if you are breast feeding.

Name of medication: Atorvastatin calcium
Dosage: 20 mg
Directions: Take 1 tablet by mouth/day
Quantity: 30
Date filled: 08/31/2013
How many times you may refill: NA
What date you should refill by: NA
Expiration date: NA
Prescription number: 0123456789

Prescription Information

When your doctor wants you to take medication, a prescription may be called in by telephone to a pharmacy. You will need to go to the pharmacy to pick up your medicine. If the doctor gives you a written prescription you will need to take it to the pharmacy to get it filled. Be sure to take your Medicaid and/or insurance card with you. There may be a co-pay charge so you will want to have some money too. Sometimes there is a pharmacy located right in the clinic where you see your doctor. You may have a neighborhood drug store or another pharmacy you can use. If you will be taking the medication for a while, the doctor may write on the prescription that you may have refills. You will want to make sure you order your refill before your medication is gone so you don't miss any doses. Mark your calendar to remind you of when to call in your prescription refill. Call to order your medication when you have one week of medicine left, so you don't run out on a weekend, holiday or while on a trip. There are some special rules about certain drugs. These are also known as controlled substances. These prescriptions cannot be ordered too far ahead, the prescription cannot be faxed and the use of these medication are carefully monitored. To order a refill on a medication, you will use the information on the medication label. There are other options of prescription refills. You can request home delivery, re-occurring pick up at your local pharmacy and mail order. You can also take your medication bottle to the pharmacy or you can call ahead and order the refill by telephone. When you call the pharmacy, a person may answer and take all the information. Sometimes you may get an answering machine telling you how to give the information the pharmacy needs to refill your prescription. If this is too hard or confusing, you can usually stay on the phone or push a number to get help from a person. Some pharmacies have apps for your phone or electronic device that can be used to refill prescriptions. Make sure you understand how and when to take your medication. Make sure you understand any possible side effects to be aware of and what to do if you experience them. You will get written information along with your medication but be sure to ask the pharmacist any questions you may have. If you get home and have a question or concern about your medication, call your pharmacist (number is on your prescription bottle). You can also contact your doctor's office and ask to speak to your doctor's nurse. Nurses can answer a lot of questions and can check with your doctor, if needed. If you are taking a prescription that makes you feel different or bad, let someone know. Some medications have side effects that can change how you feel.

Script for Getting Prescription Medications

Hello, my name is _____
(give your first and last name)

I need to pick up a new prescription. Can you tell me about the dosage?

How often should I take this? Are there directions for how to take it?

What should I do if I miss a dose? _____

Here is a list of my other medications:

Will this one interfere with any of them? If yes, what should I do?

What are the side effects of this new medication?

What should I do if I experience any of these? _____

Is there anything else about this medication I should know about?

When can I pick it up? _____

(Can you deliver it? If yes, when?) _____

(Can someone else pick it up for me?) _____

Is there a co-pay charge? _____ How much? _____

You have been really helpful. Thank you.

Script for Getting Prescription Medication Refills

Hello, my name is: _____
(give your first and last name)

I need to get a refill on a prescription.

The prescription number is _____

The name of the medication is _____

When can I pick it up? _____

(Can you deliver it? If yes, when?) _____

(Can someone else pick it up for me?) _____

Is there a co-pay charge? _____ How much? _____

Thank you. Good-bye.

Lesson 4: Healthcare Transition Insurance Information

Objectives:

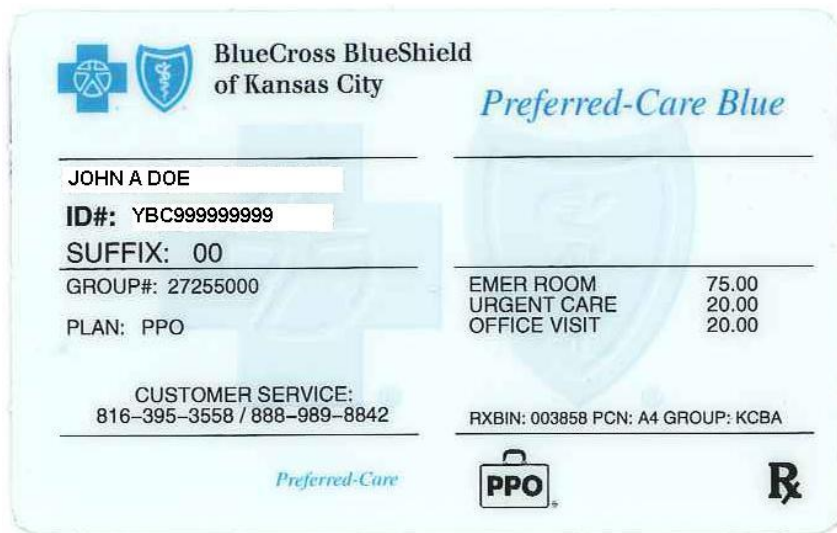
At the end of this lesson, your child should be able to:

1. Describe different types of healthcare insurance
2. Differentiate between medical, dental, and vision insurance
3. Contrast public and private health insurance
4. Identify information on a health insurance card

Health Insurance Information

Students watched the following video on health insurance:

<https://www.youtube.com/watch?v=Gx0kHOibwHA>



Insurance company: Blue Cross Blue Shield
ID number: YBC999999999
Group number: 27255000

How to Read a Health Insurance Card

When you attend a medical appointment for the first time, your receptionist will ask for your medical insurance card. Your medical insurance will help cover some of the costs, so it is important for you to know some key information on your card. Most receptionists will look at your card and fill out the necessary information. Occasionally, if you are calling over the phone to schedule an appointment, or if your insurance changes, you may need to provide the information to them.

The most important pieces of information you need to provide is the **ID number** and **group number**. Sometimes the ID number and group number will be called a different name. Just remember, the ID number is always longer than the group number. The insurance card will also contain other information like primary card holder's name, which will be your your parents' name if you are under their insurance, or your name if you are covered by your employer. It will state the health insurance's name (Blue Cross Blue Shield, Aetna, Healthcare United, etc...). Sometimes it may list expiration date, or types of services covered.

Lesson 5: Healthcare Transition Being Prepared

Objectives:

At the end of this lesson, your child should be able to:

1. Understand how to prepare for a medical appointment
2. Understand how to prepare for a dental appointment
3. Use a sample Care Plan to prepare for a medical appointment
4. Identify habits of a healthy lifestyle

Getting Ready for a Dental Appointment

You will want to do the same things you do for any medical appointment when have a dental appointment. This includes preparing ahead of time for answering and asking questions with your dentist and to write notes during your appointment about follow-up needed or care instructions.

- You will want to let your dentist know if you are taking medications.
- You will want to let the dentist know if you ate before your appointment.
- You will want to let your dentist know if you are having pain in your mouth or teeth, pain with cold or hot food or drinks or pain that wake you up at night.
- You will also want your dentist to know if you are afraid of dental appointments and what helps you to calm down. Sometimes listening to music or having something calming to look at or hold can help.
- You will want to mention if you gag easily or have trouble holding your mouth open. Your dentist and dental hygienist can work with you to help with these concerns.

Your dentist may want to know your daily care routine

- How often you brush your teeth
- The type of toothbrush and toothpaste you use
- If you floss between your teeth and how often
- If you use mouthwash, how often and what kind

Something to think about

- Can you show where on your mouth or face you have pain?
- Can you show which teeth hurt or are sensitive to hot or cold?

Questions the doctor may ask during a check-up

- How are you feeling?
- When did you get a cold?
- Is there any pain/are you feeling pain?
- Where does it hurt?
- Does it hurt if I touch here?
- Have you had constipation recently?
- Have you had diarrhea recently?
- How long ago did _____?
- Have you smoked before?
- Do you drink alcohol?
- Do you use birth control if you are having sex?
- How often do you exercise?
- What do you normally eat?

Sample Care Plan

Being prepared to answer some of the most basic questions that doctors may ask you at your appointments is very important. To prepare even further for these questions, you may want to write down most of the information prior to your appointment.

Sample Care Plan

Use this form to prepare for an upcoming appointment with your regular doctor. Fill out the first two sections before your appointment and fill out the last section during your appointment.

Section 1:

Name _____
 I like to be called _____
 Date of birth _____
 Address _____
 Phone (home) _____ (cell) _____ (work) _____
 Email _____
 Emergency Contact _____
 How I communicate best _____
 How I like to learn new information or skills _____

 What I like to do with my time (school, work, hobbies, etc.) _____

My Health Care Team
Write the names of your doctors, therapists, other health providers (including pharmacy, equipment, and supply vendors)

| Name | Specialty | Phone Number |
|------|-----------|--------------|
| | | |
| | | |
| | | |

Making Decisions (Who helps me with medical decisions and/or follow up?)

Name _____
 Relationship _____
 Phone (home) _____ (cell) _____ (work) _____
 Email _____
 Personal attorney for health care? Yes _____ No _____
 If Yes, Who _____
 Phone _____
 Conservator/Guardian: Self _____ other (name) _____

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I have a health care plan? Yes _____ No _____
If Yes, where?

Section 2: Information to Share with My Doctor (Make sure to let your doctor see the following information after you fill it out.)

Why I am here: _____

This is how I feel:

Important information you should know about my medical history: _____

Medications:

| Name | Amount | Dosage | When Taken |
|------|--------|--------|------------|
| | | | |
| | | | |
| | | | |

Allergies: _____

Past surgeries and hospitalizations: _____

35

Questions I have for you: _____

Section 3: Information from the Appointment

Weight: _____ Height: _____ Blood Pressure: _____

Answers to my questions: _____

Follow-up: _____

36

Living a Healthy Lifestyle:

Lifestyle habits are the things we do every day such as:

- What we eat and drink
- How much we exercise
- How much we sleep
- Our personal cares and grooming
- Leisure and relaxation activities (hobbies and other interests)
- Relationships and social network
- Family traditions
- Spiritual practices
- Work and/or school
- Safety and security practices

It's important for each person to develop a regular routine that works best for that person.

Daily Log

Order is necessary when trying to juggle all the different activities in our lives. For youth with ASD, it is especially important to have a routine and a sense of normalcy, what to expect, and when to expect it. People with ASD can feel agitated when this order is disrupted, so it is a good idea to help your student fill out a sample daily log of what they do each day. This will create a schedule as well as help them keep on track and remember what they need to do.

| Time | Activity | Special Reminders or Notes |
|------------|----------|----------------------------|
| 6:00 am | | |
| 7:00 am | | |
| 8:00 am | | |
| 9:00 am | | |
| 10:00 am | | |
| 11:00 am | | |
| 12:00 noon | | |
| 1:00 pm | | |
| 2:00 pm | | |
| 3:00 pm | | |
| 4:00 pm | | |
| 5:00 pm | | |
| 6:00 pm | | |
| 7:00 pm | | |
| 8:00 pm | | |
| 9:00 pm | | |
| 10:00 pm | | |
| 11:00 pm | | |

Sample Care Plan

Use this form to prepare for an upcoming appointment with your regular doctor. Fill out the first two sections before your appointment and fill out the last section during your appointment.

Section 1:

Name _____

I like to be called _____

Date of Birth _____

Address _____

Phone (Home) _____ (Cell) _____ (Work) _____

Email _____

Emergency Contact _____

How I communicate best _____

How I like to learn new information or skills _____

What I like to do with my time (school, work, hobbies, etc.) _____

My Health Care Team

Write the names of your doctors, therapists, other health providers (including pharmacy, equipment, and supply vendors)

| Name | Specialty | Phone Number |
|------|-----------|--------------|
| | | |
| | | |
| | | |
| | | |

Making Decisions (Who helps me with medical decisions and/or follow up?)

Name _____

Relationships _____

Phone (Home) _____ (Cell) _____ (Work) _____

Email _____

Power of attorney for health care? Yes _____ No _____

If Yes, Who _____

Phone _____

Conservator/Guardian: Self _____ Other (name) _____

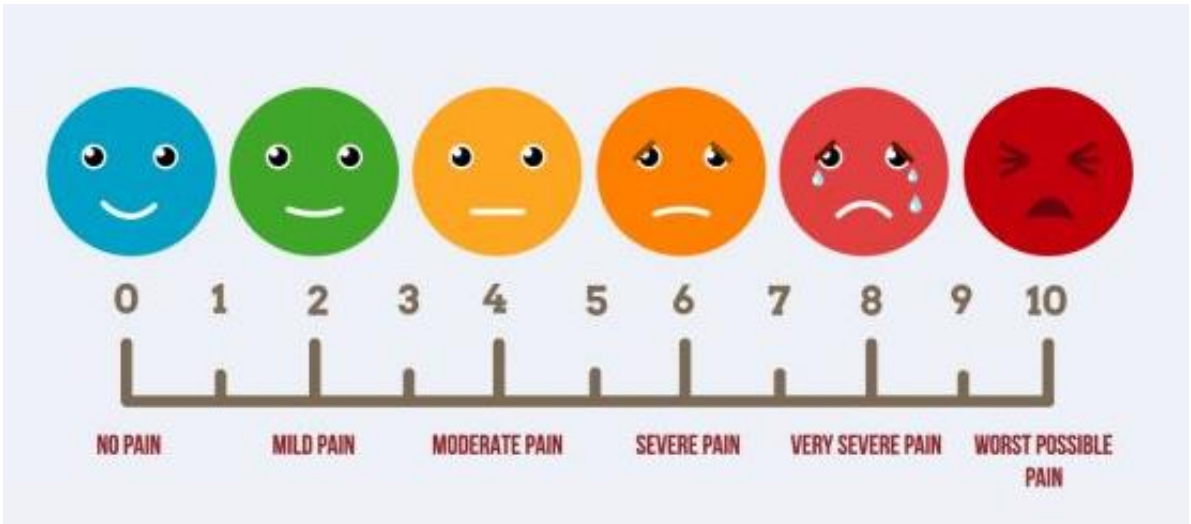
I have a health care plan? Yes _____ No _____

If Yes, where? _____

Section 2: Information to Share with My Doctor (Make sure to let your doctor see the following information after you fill it out.)

Why I am here: _____

This is how I feel



Important information you should know about my medical history: _____

Medications:

| Name | Amount | Dosage | When Taken |
|------|--------|--------|------------|
| | | | |
| | | | |
| | | | |

Allergies: _____

Past surgeries and hospitalizations: _____

Questions I have for you: _____

Section 3: Information from the Appointment

Weight: _____ Height: _____ Blood Pressure _____

Answers to my questions: _____

Follow-up: _____

Daily Log

| Time | Activity | Special Reminders or Notes |
|------------|----------|----------------------------|
| 6:00 am | | |
| 7:00 am | | |
| 8:00 am | | |
| 9:00 am | | |
| 10:00 am | | |
| 11:00 am | | |
| 12:00 noon | | |
| 1:00 pm | | |
| 2:00 pm | | |
| 3:00 pm | | |
| 4:00 pm | | |
| 5:00 pm | | |
| 6:00 pm | | |
| 7:00 pm | | |
| 8:00 pm | | |
| 9:00 pm | | |
| 10:00 pm | | |
| 11:00 pm | | |

ADDITIONAL RESOURCES

Sample Instructions and Script for Uber or Lyft: Arranging Transportation

- 1) Download the Uber or Lyft app
- 2) Register and set up with the payment method

(Show student how to use the app)

- 3) Open the app on the smartphone
- 4) Input the address or destination in (student will need to have address of medical facility ahead of time)
- 5) Call for Uber X or Lyft (other options may cost more)
- 6) Wait outside for the car and driver

Once the car arrives, DOUBLE CHECK TO MAKE SURE it is your ride! (Otherwise it can get dangerous or you will take another person's ride and end up at a different address)

- 7) Check the license plate of the car
- 8) Make sure the numbers match up exactly to the license plate information displayed on the app for that car
- 9) Authorized Uber drivers may also have an Uber logo on their windshield, but this is optional

(Getting in the car and double checking the driver and address)

- 10) Hello, what's your name? (check the driver's answer with the driver's name on your app to make sure they're the same person)
- 11) Are you going to _____?
(say the clinic or hospital name and the address)

If yes, that's all!

If no, you might have gotten into the right car. If this is the case, do not get into the car and wait for the correct vehicle. Occasionally, the driver might reject a ride once they are already on their way. After waiting 10 more minutes than the estimated time, request another ride. Be sure to leave early enough where you will get to your appointment early, around 15 minutes in advance.

Internet Resources

Georgia Department of Public Health, Transitioning Youth to Adult Care-

<http://dph.georgia.gov/transitioning-youth-adult-care>

Taking Charge of My Health Care Booklet

https://issuu.com/georgiamaternalandchildhealth/docs/taking_charge_of_my_health_care_fin