

Resources and Tools to Improve Health Care Transition in Florida

March 27, 2019

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Agenda



Current Policy and Tools

State and National Resources

Questions/Discussion

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Current Policy and Quality Improvement Tools for Practitioners



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### Why Do Adolescents Need a Structured Health Care Transition Process?



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- Evidence of need for transition services
  - 2016 National Survey of Children's Health shows that, nationally, only 16.5% of youth with special health care needs, and 14.2% without special health care needs, received the services necessary to make transitions to adult care
  - Florida is below national average: 7.5% of youth with special health care needs, and 7.0% without special health care needs, received the necessary services
- Evidence of improved outcomes with a structured approach
  - Evaluation studies indicate improvement in population health (adherence to care, perceived health and quality of life, self-care); increased patient and family satisfaction; decreased barriers to care; improved utilization of ambulatory care in adult settings; reduced hospitalizations

Sources: 2016 National Survey of Children's Health, <http://childhealthdata.org>  
 Gabriel, McManus, Rogers and White (2017). Outcome evidence for structured pediatric to adult health care transition interventions: a systematic review. *Journal of Pediatrics*, 188:263-269.

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### AAP/AAFP/ACP Clinical Report on Health Care Transition\*



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- In 2011 (and affirmed in 2018), Clinical Report on Transition published as joint policy by AAP/AAFP/ACP
- Targets all youth, beginning at age 12
- Algorithmic structure with:
  - Focus on planning, transfer, integration into adult care
  - Branching for youth with special health care needs
  - Application to primary and specialty practices
- Extends through transfer of care to adult medical home and adult specialists

<b>Age 12</b>	Youth and family aware of transition policy
<b>Age 14</b>	Health care transition planning initiated
<b>Age 16</b>	Preparation of youth/parents for adult approach to care; discussion of preferences and timing for transfer to adult health care
<b>Age 18</b>	Transition to adult approach to care
<b>Age 18-22</b>	Transfer of care to adult medical home and specialists with transfer package

Source: American Academy of Pediatrics; American Academy of Family Physicians; American College of Physicians; Transitions Clinical Report Authoring Group; Cooley WC, Saperman PL (2011). Supporting the health care transition from adolescence to adulthood in the medical home. *Pediatrics*, 128(1):182-200.

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National Center  
for Health Care Transition Improvement

<http://www.gottransition.org/>

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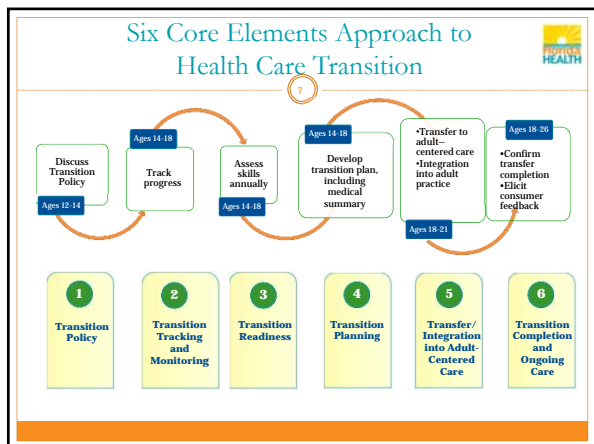
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### Customizable Tools and Templates

The image shows a 'Sample Transfer of Care Checklist' form. It includes fields for Patient Name, Date of Birth, Primary Diagnosis, and Transition Complexity. A checklist of items to be included in the transfer package is provided, such as: Transfer letter, Final transition readiness assessment, Plan of care, and Insurance information. At the bottom, there are checkboxes for 'Send transfer package' and 'Communicated with adult provider about transfer'.

Download Six Core Elements templates at [www.gottransition.org/providers/index.cfm](http://www.gottransition.org/providers/index.cfm)

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### Six Core Elements Adapted Toolkit for Specific Conditions

The image is a screenshot of the ACP (American College of Physicians) website showing the 'Adapted Toolkit for Specific Conditions'. It lists various medical specialties that have adapted the toolkit, including: General Internal Medicine, Cardiology, Endocrinology, Gastroenterology, Hematology, Nephrology, Neurology, and Rheumatology. A URL is provided at the bottom: [www.acponline.org/clinical-information/high-value-care/resources-for-clinicians/pediatric-to-adult-care-transitions-initiative/condition-specific-tools](http://www.acponline.org/clinical-information/high-value-care/resources-for-clinicians/pediatric-to-adult-care-transitions-initiative/condition-specific-tools)

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### How Can Pediatric Providers Ensure a Smooth Transition to New Adult Care Providers?

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One of the most effective transition tools is physician-to-physician communication



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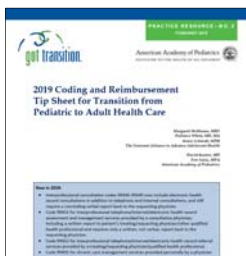
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### Is There a Way to Bill for Transition Services?

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- Got Transition and the American Academy of Pediatrics developed a transition payment tip sheet to support the delivery of recommended transition services in pediatric and adult primary and specialty care settings.
- The 2019 tip sheet provides a comprehensive listing of transition-related CPT codes, corresponding Medicare fees and several clinical vignettes.

<https://www.gottransition.org/resourceGet.cfm?id=352>

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### Patient-Centered Medical Home Recognition

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- In response to popular requests for use of the Six Core Elements for PCMH certification, Got Transition completed a series of key informant interviews with clinical and administrative leaders in the health field and developed a tip sheet.
- This resource includes an easy-to-use chart displaying specific NCQA criteria and guidance with links to related Six Core Elements tools.

<http://gottransition.org/resourceGet.cfm?id=444>

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**Starting a Health Care Transition Improvement Process**



PRACTICE RESOURCE - NO. 1  
FEBRUARY 2015

**Starting a Transition Improvement Process Using the Six Core Elements of Health Care Transition**

Patricia White, MD, MBA  
Co-Director, Got Transition Center for Health Care Transition Improvement  
Professor, Director of Medicine and Pediatrics, Harvard Medical School  
School of Medical and Public Health

No. 1 and Co-Director, MCH  
Co-Director, Got Transition The National Alliance to Advance Adolescent Health  
Chief Medical Officer, Child and Adolescent Foundation  
Clinical Professor of Pediatrics, Case Western Reserve University

James McAlister, MD, MEd, MBA  
Associate Research Professor of Pediatrics  
Children's Health Services Research  
Harvard University School of Medicine

This resource includes a step approach to starting a health care transition process in a practice/ health care delivery system. It was developed with input from the integrated health care delivery systems who have incorporated the Six Core Elements into their practice processes.

[www.gottransition.org/resourceGet.cfm?id=369](http://www.gottransition.org/resourceGet.cfm?id=369)

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Questions?

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State and National Resources  
for Youth, Families and Providers

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## Health Summary & Emergency Care Plan

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[www.floridahats.org/for-health-care-practitioners/](http://www.floridahats.org/for-health-care-practitioners/)  
[www.gottransition.org/providers/leaving.cfm](http://www.gottransition.org/providers/leaving.cfm)

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## Readiness Assessment

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[www.floridahats.org/for-health-care-practitioners/](http://www.floridahats.org/for-health-care-practitioners/)  
[www.gottransition.org/providers/leaving.cfm](http://www.gottransition.org/providers/leaving.cfm)

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## Plan of Care

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[www.floridahats.org/for-health-care-practitioners/](http://www.floridahats.org/for-health-care-practitioners/)  
[www.gottransition.org/providers/leaving.cfm](http://www.gottransition.org/providers/leaving.cfm)

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### Program Materials

[www.floridahats.org/for-youth-families/](http://www.floridahats.org/for-youth-families/)

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### Self-Advocacy Guides

[www.floridahats.org/?page\\_id=616](http://www.floridahats.org/?page_id=616)

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### Self-Management Videos

Short Videos  
with step-by-step instructions

[www.floridahats.org/for-health-care-practitioners/](http://www.floridahats.org/for-health-care-practitioners/)  
<http://healthytransitionsny.org/videos/>

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**School**



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- Incorporate self-advocacy and self-management skills in school IEP
- Transition IEPs, which are introduced at age 14 in Florida, should outline a pathway to post-secondary independent living
- Project 10 ([www.project10.info](http://www.project10.info)) is Florida Department of Education's statewide transition initiative
  - Includes employment training, post-secondary education and independent living resources



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Classroom Curriculum

Lesson Plans

Parent/Student Handouts

<http://healthytransitionsny.org/skills/>  
[www.floridahats.org/secondary-post-secondary-education/](http://www.floridahats.org/secondary-post-secondary-education/)

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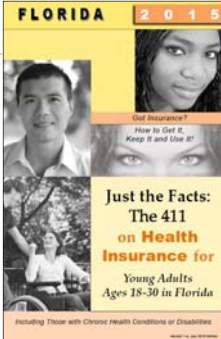
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**Health Insurance**



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- Plan for change in insurance coverage
  - Medicaid
  - Parents' plan
  - Employer-based
  - Marketplace plans
  - Plan for change in insurance coverage

[www.floridahats.org/health-insurance-financing/](http://www.floridahats.org/health-insurance-financing/)

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## Agency for Persons with Disabilities



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- Individuals with a developmental disability should apply to APD as early as age 3
- Don't wait to get on the Home and Community – Based Waiver Waiting List (called iBudget)



[www.floridahats.org/independent-living/](http://www.floridahats.org/independent-living/)

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## Age of Majority



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- Legal responsibilities
  - Financial
  - Decision-Making
  - Florida Bar's #JustAdulthood Legal Survival Guide for new adults  
[www.justadulthood.com/](http://www.justadulthood.com/)
- Disability benefits determined by ability to work

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## Decision-Making



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- Consider decision making options, such as guardian advocacy
- Explore long-term financial planning options, such as a special needs trust



[www.floridahats.org/decision-making-guardianship/](http://www.floridahats.org/decision-making-guardianship/)

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## Decision-Making

Becoming an Adult:  
Legal and Financial Planning

Nemours.

See Nemours video at <https://youtu.be/CpvlyfRjRM>

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## Supplemental Security Income

- Redetermination at age 18
- Stricter eligibility requirements

[www.floridahats.org/independent-living/](http://www.floridahats.org/independent-living/)

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## Employment

- Apply to Division of Vocational Rehabilitation 2 years before leaving high school
- Can help pay for post-secondary education and job training programs
- Assists in job placement

[www.floridahats.org/independent-living/](http://www.floridahats.org/independent-living/)

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## College Students with Disabilities



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[www.floridahats.org/secondary-post-secondary-education](http://www.floridahats.org/secondary-post-secondary-education)

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## Transfer of Care



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➤ Transfer of care

- Primary Care
- Specialty Care

[www.floridahats.org/service-directory/search-service-directory](http://www.floridahats.org/service-directory/search-service-directory)

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## Web-Based Training for Professionals



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- Cross-disciplinary training for practitioners in the clinical setting
  - 10 modules, 15-20 minutes each
  - Free CME/CE for physicians, physician assistants, LPNs, RNs, and other allied health professionals, through Florida AHEC Network at [www.aheceducation.com](http://www.aheceducation.com)
  - Modules also posted on [www.FloridaHATS.org](http://www.FloridaHATS.org)



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## Web-Based Training for Professionals



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- Training for teachers, school nurses and other professionals in the school setting
- Available at [www.FloridaHATS.org](http://www.FloridaHATS.org)

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## Other Transition Resources



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- Assistive Technology and Equipment** [FAAST](#)
- Independent Living** [Centers for Independent Living](#)
- Housing** [Housing in Florida: A Resource Guide for Individuals with Developmental Disabilities](#)
- Transportation** [Florida Community Disability and Transportation Services](#)

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## Follow Up Questions?

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### Title V Coaches

<p><b>Northwest Region</b>  <b>North Central Region</b>                  Deidra Faulkner                  Deidra.Faulkner@flhealth.gov                  850-544-8518</p>	<p><b>Big Bend Region</b>  <b>North Central Region</b>                  Staci Jagoe                  Staci.Jagoe@flhealth.gov                  850-491-0972</p>
<p><b>South Region</b>  <b>Southeast Region</b>  <b>Central Region</b>                  Sofia Thomas                  Sofia.Thomas@flhealth.gov                  850-445-3525</p>	<p><b>Southwest Region</b>  <b>Tampa Bay Region</b>  <b>Central Region</b>                  Angie Chatfield                  Angela.Chatfield@flhealth.gov                  (239) 691-0100</p>

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**Presenter**

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**Questions/Discussion**

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