



Planning Your Transition from Pediatric to Adult Health Care:

A Workbook to Help You Take Charge of Your Health

Developed by Kim Brown, MSW, University of Montana Rural Institute Center for Excellence in Disability Education, Research, and Service

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About the Rural Institute

The Rural Institute: Center for Excellence in Disability Education, Research, and Service, is one of sixty-four Centers for Excellence in Disability Education across the nation. It is an inter-disciplinary organization that promotes full participation in rural life for individuals with disabilities. The Rural Institute accomplishes this goal by developing and disseminating innovations in teaching, research, community supports, and policy advocacy.

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This is one of the many projects at The Rural Institute. This publication does not encompass all of the projects and activities currently underway at
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About Children's Special Health Services

Children's Special Health Services (CSHS), is charged by the Federal Maternal Child Health Bureau to: "Support development and implementation of comprehensive, culturally competent, coordinated systems of care for children and youth who have or are at risk for chronic physical, developmental, behavioral or emotional conditions and who also require health and related services of a type or amount beyond that required by children generally."

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The electronic version of *Planning Your Transition from Pediatric to Adult Health Care* can be found at <http://ruralinstitute.umt.edu/transition/articles.asp> and at <http://dphhs.mt.gov/publichealth/cshs/TransistionResources>.

Disclaimer

Planning Your Transition from Pediatric to Adult Health Care: A Workbook to Help You Take Charge of Your Health contains health care coverage information that may change frequently and substantially. The author and editors have made every attempt to verify that the website links and other resources published in the workbook are current and accurate as of the date of publication. The University of Montana Rural Institute and the Montana Department of Public Health and Human Services assume no responsibility for the validity of information provided on the links or in the listed resources; therefore, the reader should verify all information prior to taking action based upon said information.

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Introduction



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Introduction

Are you a child, teen or young adult with special health care needs and/or a disability? If so, this workbook is for you! The workbook is designed to help you take the lead in planning for your transition from pediatric (children's) health care to adult care. It offers information about preparing for the transition, choosing medical providers, paying for services, taking responsibility for your own health, and much more.

Health care is an important topic and it can get complicated. Ideally, you will use this workbook as a guide for conversations between you, your parents and your medical providers. The earlier in your life you can start these conversations, the better. Starting early gives you more time to explore your options, practice making your own health care decisions, and plan how you will find and pay for medical services when you are an adult.

The information in *Planning Your Transition from Pediatric to Adult Health Care* is geared toward Montanans under age 30 living with special health care needs and/or a disability. However, all young adults can benefit from the resources, suggestions and guidance in this workbook.

We hope you will find this workbook helpful as you prepare for your successful transition to adult life!

Tip: We use the terms “medical provider,” “health care provider,” and “provider” throughout this workbook. These terms refer to anyone who provides you with medical care. Some examples include:

Doctors/Physicians/Internists/Pediatricians

Specialists such as Cardiologists and Nephrologists

Physician Assistants and Nurse Practitioners

Why Research Options and Plan in Advance?

Becoming an adult can be exciting. Suddenly you have more rights and freedom than when you were a child. But you also have more responsibilities and more of your own decisions to make. You might already be thinking about things like where you want to live, what kind of job you

want to have, and where you want to go to college. In order to achieve any of your dreams, though, it is important to take care of your physical and mental health.

- Can you describe your illness or disability to a medical professional (for example, a doctor or nurse)?
- Do you know what medications you take, why you take them, and how often you take them?
- Do you have any allergies?

These are the kinds of questions you may need to answer when you move into the adult health care system. If you don't have the answers right now, don't worry! This workbook will guide you to collect and organize your health history so you will have it when you need it.

The workbook will also help you think about the choices and options you have when it comes to your health care.

- How do you choose a doctor who treats adults instead of children?
- What programs can help you pay for your medical care?
- Do you need any assistance making doctor appointments, taking your medication, or explaining your health condition to someone else?
- If so, who can provide you with that assistance?

There are a lot of decisions for you to make about your health care. In order to make the best decisions for **YOU**, it is important to take time and study your options. This is why we suggest you start planning for your health care transition well before you turn 18. Remember, the earlier you start, the better!



How to Use the Workbook

This workbook is divided into nine sections. We suggest that you read through each section with a parent, caregiver or other trusted adult. This person can answer questions you might have about the workbook, and can also help you fully explore your health care options before you make any decisions.

Some of the sections have sample worksheets or checklists. You might want to photocopy these worksheets or checklists and write on the copies instead of writing in your workbook.

Transitioning into adulthood is a process...it doesn't happen overnight. Give yourself plenty of time to go through the workbook. When you are finished, we hope you will feel confident in your ability to manage your own health care as much as you possibly can.



Courtesy of Stuart Miles, FreeDigitalPhotos.net

Transitioning from Pediatric to Adult Health Care



Transitioning from Pediatric to Adult Health Care

Pediatricians are doctors who care for children. If you are currently seeing a pediatrician for your medical services, you will probably need to change to an adult health care provider sometime after you turn 18. You will need to have a plan for sharing important information about yourself with your new medical professional. You will want to have health insurance in place to help pay for medical expenses. If you do not qualify for health insurance, you will want to know how to access low or no-cost care. You will want to feel comfortable and confident taking charge of your health. This is all part of the transition process...moving from children's health care to adult health care as smoothly as possible.

Why is it important to plan for your health care transition, even if you do not need medical care right now? Because anyone can get sick or injured. Disabilities and chronic conditions can change with age. Preventive care, such as annual check-ups and health screenings, can help you stay healthy. All of these services cost money and require you to know certain things like how to make appointments, what questions to ask the medical provider, and how to get prescriptions filled. By working together with your parents, caregivers or other trusted adults, and with your health care providers, you can make sure you are ready for the transition.



Young adulthood is a time of lots of changes, new experiences and increased independence. You will probably have more control over when and how long you sleep, what you eat, how active you are, whether or not you drink or smoke, how safely you drive or ride in vehicles (for example, do you always wear your seatbelt?), whether you are sexually active, and more. You can make healthy choices and develop healthy habits **now** that will serve you well for the rest of your life. As we have stated before, start planning for your transition to adult health care early – age 12 or even younger. This will give you more time to explore your options, practice new skills, make decisions, and gain confidence.



Tip: If you have an IEP (Individualized Education Program) at school, make sure your IEP team includes **health care transition** in the *Transition* section of your IEP. **Health care transition** can fit under *Independent Living Skills* in the *Postsecondary Goals* and *Transition Services* areas of your Transition plan.

Talking with Your Health Care Provider

The first step in transition planning is to talk with your current medical provider and your parents or caregivers. This is not a one-time meeting, but instead should be an ongoing conversation you have over the years, starting when you are around 12 years old. Here are some of the things you might want to talk about:

- What level of provider do you need? A generalist medical doctor or specialist? Physician assistant or nurse practitioner?
- Will you need to find an adult health care provider or can you stay with your current medical professional?
- Can you continue seeing the specialists you have right now or will you need to be referred to different specialists?
- If you need to find adult health care providers and/or specialists, can your current medical professional recommend anyone?
- Can you start practicing talking to your health care provider alone, without your parents or caregivers in the room?
- What areas of your health care will you need support to manage? For example, will you need someone to phone and make appointments for you? Will you need transportation to get to your doctor's office?
- Who can provide the supports you need in order to manage your health care?
- Is your current medical provider willing to be part of the transition team as you move to the adult health care system? Will they meet with you and your new adult health care provider to help ensure a smooth transition?

Your parents or caregivers may be nervous about you assuming more responsibility for your health care. Planning the transition well in advance, practicing the skills you will need, and working closely with your current and future medical professionals can help make parents and caregivers more comfortable with the process.

Tip: The “Talking with Your Doctor and Other Health Care Providers” video from the Institute for Child Health Policy at the University of Florida and the Florida Department of Health, Children's Medical Services is an excellent resource. Watch the video on YouTube at:
<https://www.youtube.com/watch?v=qAqVL5We8X0>.

Tip: Use the “Meeting with Your Provider” guide on the next page to help you remember questions you want to ask your pediatrician and parents or caregivers when you meet.

MEETING WITH YOUR PROVIDER			
QUESTION	ANSWER	DATE ANSWERED	FOLLOW-UP NEEDED?
Will I need to find an adult health care provider?			
Can I continue seeing the specialists I have right now?			
If I need to find adult health care providers and/or specialists, can you recommend anyone?			
Can I start practicing talking to you alone, without my parents or caregivers in the room?			
What areas of my health care will I need support to manage?			
Who can provide the supports I need in order to manage my health care?			
Are you willing to be part of my transition team as I move to the adult health care system?			
Other questions?			
Other questions?			

Choosing an Adult Health Care Provider

If you are currently seeing a pediatrician, chances are you will have to switch to a medical provider who works with adults after you turn 18. Even if the health care professional you see right now serves adults, you might want to choose a different provider for your future medical needs. Here are some of the reasons having a medical professional who specializes in caring for adults can be helpful:

- They have experience and expertise in providing medical care to adults.
- They are used to dealing with adults instead of children, so are more likely to treat you as an adult and to encourage you to manage your own health care as much as possible.
- They understand what effects disabilities and chronic conditions can have on the body over time.
- They may be more comfortable talking to you about adult issues such as substance use (drinking and drugs), smoking, sexual and reproductive health, and relationship violence.



This is an important decision, so take your time. You want a medical professional you feel comfortable talking to and someone you can trust. If you choose a provider and start working with them, but later decide they aren't meeting your needs, it is okay to start your search again. This is your body and your health care!

How do you find adult health care providers?

- Ask your pediatrician or current medical professional if they have any recommendations.
- Check with your local hospital and regional clinics.
- Search online for providers who specialize in the medical services you need.
- Contact local, state and national organizations associated with your disability or chronic condition to see if they know of providers in your area.
- Ask other adults or elders whose opinions you value, especially if they have a similar disability or condition as you.

Once you have selected a provider you think might meet your needs, schedule an appointment. Introduce yourself and talk about what you want

from your health care professional. Find out if this person has expertise in your disability or chronic condition. Ask if they will accept your health insurance (many medical providers only accept certain kinds of health insurance). This brings us to the next important health care transition topic: finding and paying for health care.

Finding and Paying for Health Care



It isn't enough to find an adult health care provider; you also need a way to pay for the medical care. This workbook will cover the different health care coverage options in greater detail later on, but here is a quick summary:

Health insurance is one way to pay part of your medical costs. You can buy health insurance through private companies or it may be offered as a benefit at your job. (If your parents have you on their health insurance, you may be able to keep that coverage until you turn 26.)

The government also offers insurance coverage through programs like Medicaid, Medicaid Waiver programs, Medicare and Healthy Montana Kids.

With most health insurance plans, you pay a monthly premium to have the coverage. You may have to pay a certain amount toward your medical bills before your health insurance pays anything (this is called a deductible). You may have to pay part of each bill for medical services (this is called a co-payment). Medical providers may not accept certain kinds of health insurance, so be sure to ask before you receive medical services. Otherwise you may be responsible to pay the entire bill yourself.

Indian Health Service (IHS) provides health care to American Indians and Alaska Natives. In Montana, medical care for eligible patients is provided on the reservations and in Billings, Butte, Great Falls, Helena and Missoula.

If you don't have any health insurance, you may need to visit free or low-cost clinics. However, this may limit your access to medical care since clinics are not available in every community, often have waiting lists, and may not provide all the services you need.

Finding a way to pay for your health care can seem complicated. Health insurance information changes often, especially with the Affordable Care Act (Federal Health Care Reform) that we will tell you more about later in this workbook. Insurance policies come with lots of rules about which services are covered and which are not. Government health insurance programs sometimes have confusing application processes. If you start planning for your health care transition early, you can explore the different ways to pay for medical care. You can talk to other people about their health insurance and what they like and don't like about their coverage. You can compare different insurance programs and policies on the Internet. You can work with your health care transition team to figure out the best option for you.



Tip: You may qualify for more than one kind of health insurance coverage. It can be helpful to have two or more health insurance policies, private or public. The policies may cover different services, or may each pay part of your medical bill so you have to pay even less.

Coordinating a Smooth Transfer of Care

Somewhere between the ages of 18 and 22, your health care will probably transition from a pediatric provider to an adult health care professional. How can this transfer of care be as smooth as possible?

- Choose your adult health care provider early so you have time to meet with both your pediatrician and your new provider.
- Sign Authorization to Release Information forms to allow your current and new health care providers to share information about your medical history and any treatments you are receiving.
- When you turn 18, you legally become an adult. This means that health care providers can't talk to your parents or caregivers about your medical care unless you or the court gives them permission. If you want help from your parents or caregivers when you are making medical decisions, you might consider signing a **Medical Advocacy Form** or **Power of Attorney for Health Care**. Examples are available on the Parents, Let's Unite for Kids (PLUK) website at: <https://sites.google.com/a/pluk.org/guardianship/Home/customized-options/sample-forms>. Some health insurance companies have their

own forms you can sign if you want another person to help you (for example, your parent, a caregiver or a trusted friend).

Taking Responsibility for Your Health Care

One of the exciting things about becoming an adult is that you have more rights – the right to vote, drive, marry, sign contracts, manage your own health care, and more. With these rights come responsibilities. How can you decide which candidate to vote for without learning about the different candidates? How can you drive safely without knowing the traffic laws? How can you manage your own health care well without knowing about your medical history and needs?

On the following pages are checklists you can use to keep track of what you already know and what you still need to learn and practice during your transition to adult health care. You can also mark those areas where you will need support, like from another person or from technology, in order to manage your medical care. We suggest you work through these checklists with your parents, caregivers, or another adult who knows you well.



HEALTH CARE TRANSITION PLANNING WORKSHEET							
Knowledge, Skill or Task	Do I know it? Can I do it?	How can I learn it?	Who will teach me?	By when?	Will I need support to do this task?	If so, what kind of support?	Date Completed
BACKGROUND							
I know my diagnosis, disability, and chronic health conditions							
I know my medical history							
I know what allergies I have							
I know my immunization record							
I have talked with my family about how much information I want shared with them once I turn 18							
I know the members of my health care team and their contact information							
SEIZURES							
I know what kind of seizures I have							
I know how often I have seizures							
I know how long my seizures usually last							
I know what people around							

HEALTH CARE TRANSITION PLANNING WORKSHEET							
Knowledge, Skill or Task	Do I know it? Can I do it?	How can I learn it?	Who will teach me?	By when?	Will I need support to do this task?	If so, what kind of support?	Date Completed
me can do to keep me safe during a seizure							
MEDICATIONS							
I know what medications I take							
I know the correct dosage of my medications							
I know the correct time to take my medications							
I can take my medications myself							
I know what my medications are for							
I know what side effects my medications can have							
I know where my prescriptions are filled (or who the prescriber is)							
I know how to order my prescriptions and refills							
I know how much my prescriptions cost							

HEALTH CARE TRANSITION PLANNING WORKSHEET							
Knowledge, Skill or Task	Do I know it? Can I do it?	How can I learn it?	Who will teach me?	By when?	Will I need support to do this task?	If so, what kind of support?	Date Completed
MEDICAL EQUIPMENT							
I know what medical equipment I use							
I know how often my equipment needs to be maintained							
I know who to contact if my equipment needs repairs							
HEALTH CARE COVERAGE							
I know what kind of health insurance I have							
I know what kind of dental/ vision insurance I have							
I know what my monthly health insurance premiums are							
I know what a copayment is							
I know what a deductible is							
I know how to find out what my health insurance covers							
I know who to call if I have questions about my insurance							

HEALTH CARE TRANSITION PLANNING WORKSHEET							
Knowledge, Skill or Task	Do I know it? Can I do it?	How can I learn it?	Who will teach me?	By when?	Will I need support to do this task?	If so, what kind of support?	Date Completed
I know how to pay medical bills							
I know how to keep copies of my medical bills, Explanation of Benefit forms, and proof I have paid the bills							
STAYING HEALTHY							
I know how to choose an adult health care provider							
I know how to schedule a medical appointment							
I know how to record the appointment on my calendar so I remember it							
I know how to get to my medical appointments							
I know how to write down questions for my provider before my appointment							
I know how to take notes during the appointment so I can remember what the							

HEALTH CARE TRANSITION PLANNING WORKSHEET							
Knowledge, Skill or Task	Do I know it? Can I do it?	How can I learn it?	Who will teach me?	By when?	Will I need support to do this task?	If so, what kind of support?	Date Completed
medical professional said							
I know about support groups where I can talk to others who have my disability or condition							
IN CASE OF EMERGENCY							
I know what to do in case of a medical emergency							
I have my emergency contact information programmed into my cell phone, on my fridge, and in my purse or wallet							

Tip: You may wish to download the “Transition Readiness Changing Roles for Youth” and “Transition Readiness Changing Roles for Families” checklists available through the National Health Care Transition Center:
http://www.advocaredoctors.com/atrium/forms/ReadinessYouthTool_06_Oct_2011.pdf

http://www.advocaredoctors.com/atrium/forms/ReadinessFamilyTool_06Oct2011.pdf

Getting Organized



Courtesy of Stuart Miles, FreeDigitalPhotos.net

Getting Organized



The first time you see a new doctor, surgeon, nurse practitioner, specialist, or other health care provider, you will be asked to fill out a medical history form. In order to provide you with safe, effective medical care, the health care provider needs to know what medications you are taking, what allergies you have, whether or not you have had any surgeries, and more. For most people, it is difficult to remember all of this information. There are lots of different ways you can organize your medical history so that you can quickly and easily provide it to anyone who needs to know. We will share some ideas and examples with you later in this section of the workbook. But first let's talk about what kinds of information your health care provider might need from you.

To begin, you will want to share how you communicate best. Do you use an augmentative and alternative communication (AAC) device like an ECO or a Delta Talker? Maybe you use an iPod or iPad instead? Sign language? Gestures? Do you speak, but perhaps need extra time to think about what you want to say? Maybe English is not your first language and you prefer to have a translator with you at appointments? Your health care providers need to know how you want them to communicate with you, and they may need you to demonstrate and teach them.

Other important information to have organized and ready to share with your medical professionals includes:

- Your name and any nicknames
- Your birth date
- Your home address, email address, and phone number
- The name of your parent or guardian (if you are under age 18 or older than 18 but have a legal guardian)
- Emergency contact names and phone numbers
- The name of your health insurance company, along with your health insurance identification number
- The names and phone numbers of your doctors and specialists (for example, endocrinologist, cardiologist, or nephrologist)
- Your diagnoses
- What surgeries you have had and when
- Your medications, including the doses and how often you take them
- Any allergies you have

- A record of your immunizations (if you do not have a record of your immunizations, you can ask your school nurse, local Health Department or clinic where you received your immunizations; visit the Montana.gov website for more information: <http://www.dphhs.mt.gov/publichealth/immunization/immunizationrecords.shtml>)
- Any recent lab work you have had completed (for example, blood or urine testing)
- Medical equipment you use (for example, a wheelchair, nebulizer, or ventilator)
- Assistive technology you use (for example, a communication device or adaptive seating)
- Any issues related to your specific disability (for example, nutritional concerns if you have diabetes)
- Summary of your overall physical and mental health
- Any dental, vision, hearing, or speech concerns
- Supports you need to help manage your own health care (for example, you may use a picture schedule to help you remember when to take your medicine or a cell phone calendar and alarm to remind you of doctor appointments)
- A copy of your health care coverage card

What is the easiest way to organize and record your medical history? That depends on how much information you have, whether or not you have access to a computer, and what format you feel most comfortable using. In the next few pages, we will describe several different options.

Health Care Information Summary

Care Notebooks, Medical Passports, Portable Medical Summaries....these are all names for health care information summaries that allow you to record and track your diagnoses, medications, allergies, treatments, etc. in one place. You can create your own health care information summary by writing down or typing your answers to the questions on the next three pages.

Health Care Information Summary

Name _____

Nickname _____ Birth date _____

Address _____

Email address _____

Phone number _____

Parent or guardian _____

Emergency contact _____

Emergency contact phone number _____

Health insurance company _____

Health insurance ID number _____

Doctor/Specialist _____

Phone number _____

Doctor/Specialist _____

Phone number _____

Doctor/Specialist _____

Phone number _____

Diagnoses _____

Surgeries and dates _____

Medication name, dose and how often taken _____

Medication name, dose and how often taken _____

Medication name, dose and how often taken _____

Allergies _____

Immunization record (attach if possible) _____

Recent lab work _____

Medical equipment _____

Assistive technology _____

Issues related to specific disability/health condition _____

Summary of overall physical and mental health _____

Dental, vision, hearing, or speech concerns _____

Health care-related supports needed _____

Health Care Portfolios

Health care portfolios include both written information about your health history and pictures to help medical professionals quickly learn more about you. Portfolios are an excellent tool for you to start using when you are young and beginning to advocate (speak out) for your medical needs. You can use your portfolio to describe your chronic health condition or disability in both words and photos. You can also use it to tell medical professionals how you communicate best, what supports you need to help you manage your own health care, what you expect from your health care provider, and more.

How do you make a portfolio? First, you will need a few supplies:

- Digital camera (you can use a traditional camera with film, but will need a way to transfer the pictures onto your computer – this can be done by either having the photos saved onto a CD when you take them in to be developed, or by scanning the developed photographs into your computer)
- USB connector, memory card, or other way to transfer pictures from your digital camera to your computer
- Microsoft PowerPoint or another computer program that allows you to create slideshows
- Color printer
- Presentation binder with clear sheet protectors...here is an example:



Sample Portfolio in Binder

Using PowerPoint or other slideshow software, create slides that include your written medical history and photos to provide more information. For example, if you have diabetes and use an insulin pump, you might have a slide that briefly describes your diabetic history and includes a photo of your pump. If you communicate using an ECO 2 device, you might have a slide explaining that you need extra time to answer questions and then add a photo of your ECO 2. (Not every slide needs to have a picture, but sometimes pictures can help explain things more clearly than just using words alone.)

Once you have your slideshow completed, you can print the individual slides on a color printer, let the ink dry, slip each slide into a clear sheet protector, and put the slides into your presentation binder. Then you can take the binder with you to medical appointments and use it to introduce yourself to new providers and advocate for the health care you need and want. (If you have a laptop, you may choose to show health care professionals your portfolio right on your computer instead of printing it.)

As you are deciding what you will include in your portfolio, here are areas to think about covering:

- Impact of your disability (how it affects you as you learn, work, etc.)
- Diagnoses
- Medications, including what they do, how long you've taken them, side effects, who prescribes them, and which pharmacy you get them from
- Allergies
- Dietary restrictions (things you aren't supposed to eat)
- Seizure information, including what kind, how long they last, how often you have them, how to keep you safe during a seizure, and how to help you afterward
- Medical equipment information (feeding tubes, oxygen tanks, etc.): who maintains, refills, and recharges the equipment and what should be done if the equipment fails
- Accommodations to help you manage your health
- Communication strategies
- At the end of the portfolio, you might want to include fact sheets that talk about your condition (for example, polycystic kidney disease, cerebral palsy or cystic fibrosis)...you can often find these on the Internet

For more information about how to create a health care portfolio and to see portfolio examples, watch the recording of the Rural Institute Transition and Employment Projects' webinar from September 20, 2011, titled "Using Portfolios for Health Care Needs." The recording can be found on this webpage: http://ruralinstitute.umt.edu/transition/training_archives.asp

Technology

You may decide that using technology is the fastest and easiest way to organize your health care information. There are many different software programs and "apps" for mobile devices (smart phones and tablets) available. Before buying any software or apps, we suggest you read online reviews or ask people you know who have used the programs to make sure they work well and will meet your needs.



Courtesy of scottchan,
FreeDigitalPhotos.net

Here are a few examples of the kinds of technology you can turn to for help:

- My Family Health Portrait (<https://familyhistory.hhs.gov/FHH/html/index.html>) is a tool from the office of the U.S. Surgeon General. It allows you to enter your health history, print it to share with medical providers, and save and update it over time.
- The myfamily app (http://lyfechannel.com/healthfinder_app/) allows you to store basic information about your health, keep track of medical check-ups and vaccinations, create personal health alerts, and record a history of your health activities that you can share with your medical provider.
- "Blue Button" allows patients to access their health information (medications, drug allergies, lab results, etc.) online. It isn't available to everyone yet; ask your health care provider, health insurance company or pharmacy if you can download your information using Blue Button. Here is a website with more information: <http://www.healthit.gov/patients-families/blue-button/about-blue-button>.
- My Health, My Choice, My Responsibility is an app that includes a section on how to "Develop a Health Plan." Read more about the app and how to purchase it at <https://itunes.apple.com/us/app/my-health-my-choice-my-responsibility/id428382635?mt=8>.

Emergency Information

In case of an emergency (like a fire or an illness that requires you to be taken to the hospital), it is important to have certain information available right away for first responders, fire fighters, paramedics, or others coming to your aid. Enter “In Case of Emergency” numbers in your cell phone. Create an “Emergency Information” sheet or card for yourself. Post one copy on your refrigerator and keep the other one with you in your purse, wallet, or backpack. Your Emergency Information sheet should include:

- Name
- Date of birth
- Address
- Phone number
- Allergies
- Primary Care Provider and/or Specialists (names and phone numbers)
- Health insurance company and your identification number
- Emergency contact name and number
- Information related to your chronic health condition and/or disability that will help emergency personnel take the best care of you they possibly can
- Medication names and doses
- Recent illnesses, surgeries and hospitalizations
- Legal information (do you have a Living Will, Power of Attorney for Health Care, Guardian, etc.?).

You can use the forms on the next pages as your Emergency Information sheets. Fill out one copy and post it on your refrigerator at home. Fill out the other copy and keep it with you in your wallet, purse or backpack.



EMERGENCY INFORMATION

Name _____

Date this form was completed _____ Birth date _____

Address _____

Phone number(s) _____

Emergency contact _____

Emergency contact phone number _____

Health insurance company _____

Health insurance ID or policy number _____

Doctor/Specialist _____

Doctor/Specialist phone number _____

Allergies _____

Important medical information _____

Medication names and doses _____

Recent illnesses, surgeries and hospitalizations (include dates) _____

Legal Information (Power of Attorney, etc.) _____

EMERGENCY INFORMATION

Name _____

Date this form was completed _____ Birth date _____

Address _____

Phone number(s) _____

Emergency contact _____

Emergency contact phone number _____

Health insurance company _____

Health insurance ID or policy number _____

Doctor/Specialist _____

Doctor/Specialist phone number _____

Allergies _____

Important medical information _____

Medication names and doses _____

Recent illnesses, surgeries and hospitalizations (include dates) _____

Legal Information (Power of Attorney, etc.) _____

Whatever format you decide to use to organize your health care information, be sure to update it regularly. If you store the information on your computer, make a back-up copy on a flash drive or on a CD. If you are keeping a hard copy of your health care history, make a second copy and store it somewhere safe.

Consider starting a “medical log book” for yourself where you can write down questions you want to ask your medical provider...and where you can write down the answers you are given. The log book is also a place to record health care instructions you are given, such as when to schedule a follow-up appointment and how often to check your blood sugar levels.

Getting and staying organized will make it easier for you to manage your own health care. You will be able to introduce yourself to new medical professionals with confidence and provide them with complete and accurate information. You will be able to advocate for what you want and need from your health care providers. You may also find that you receive better care because your doctors and other medical professionals will have all the important details of your health history right at their fingertips.

As part of your health care transition planning, start gathering your health history today!



The Affordable Care Act – An Overview



The Affordable Care Act – An Overview

So far in this workbook, we have talked about understanding your health care needs, choosing a medical provider who will work with you when you are an adult, and organizing your health care information. Now we will start describing some of your options for paying for health care. First, we would like to tell you about the Patient Protection and Affordable Care Act signed into law on March 23, 2010. This Federal law is also called the “Affordable Care Act,” “ACA,” “Federal Health Care Reform,” or “Obamacare.” We will refer to it as the Affordable Care Act or the ACA.

The primary goal of the ACA is to make sure Americans have access to appropriate, quality health care that they can afford. To achieve this goal, the Affordable Care Act makes a number of changes to the U.S. health care system. We will tell you about the changes that are most likely to affect you and other young adults.

Individual Mandate

Under the ACA, most people are required to have health insurance. If they do not have health insurance, they may receive a tax penalty. Individuals who are not required to have health insurance include:

- People experiencing financial hardship
- People who have religious objections
- American Indians
- Undocumented immigrants
- Certain individuals with very low incomes

If you are required to have health insurance but are worried that you cannot afford it, the ACA offers reduced monthly premiums and reduced out-of-pocket costs for those who qualify. It also creates Health Insurance Marketplaces where you can shop for and purchase health insurance coverage that fits your budget.

Health Insurance Marketplaces

Health Insurance Marketplaces are also called Health Insurance Exchanges. In Montana, the federal government developed and runs the Marketplace. (States can choose whether to develop and manage their own Marketplace or have the federal government develop and manage it.)

The Marketplace is a website for individuals and small employers to directly compare private health insurance options on the basis of price, benefits, quality and other factors.

Three Things to Know about the Marketplace

1. It's an easier way to shop for health insurance

- It simplifies the search for health insurance
- You can see all your options in one place
- With one application, one time, you or your family can explore every qualified insurance plan in your area

2. Most people will be able to get a break on costs

- Many people who are currently uninsured will qualify for discounted or free health insurance

3. It offers clear options with apples-to-apples comparisons

- All health insurance plans in the Marketplace present their price and benefit information in plain language

Tip: To learn more about the Health Insurance Marketplace, visit the HealthCare.gov website at <https://www.healthcare.gov/what-is-the-health-insurance-marketplace/> or phone the Healthcare.gov 24-hour toll-free consumer assistance number: 1-800-318-2596 (1-855-889-4325 TTY/TDD).

Tip: You can find answers to many of your Health Insurance Marketplace questions on the Montana Commissioner of Securities and Insurance website at <http://montanahealthanswers.com/>.

Essential Health Benefits

The ACA requires many health insurance plans to include certain medical benefits, called Essential Health Benefits, for all customers. These Essential Health Benefits fall into ten categories:

- Hospitalization
- Emergency services
- Ambulatory (outpatient) services

- Prescription drugs
- Rehabilitative (regaining skills that have been lost or preventing a further loss of skills) and habilitative (learning skills) services and devices
- Mental health and substance misuse services
- Preventive and wellness services, including chronic disease management
- Pediatric services (including dental and vision care)
- Laboratory services
- Maternity and newborn care

Expanded Access

There are many ways the ACA expands access to health care coverage for Americans. These include:

- Health insurance companies cannot refuse to cover you because you have a pre-existing health condition (for example, diabetes or obesity).
- Health insurance companies cannot set annual or lifetime limits on your coverage. (Limits are how much money the insurance company will pay toward your health care costs.)
- Health insurance companies cannot stop your coverage if you get sick or develop an expensive health condition.
- Health insurance companies cannot charge men and women different rates. They also cannot charge you more (or less) because of how unhealthy or healthy you are.
- Starting in January 2015, certain businesses will be required to provide health insurance to their employees.
- If you are covered on your parents' health insurance policy, you can stay on their policy until you turn 26, even if you are not living in your parents' home.
- If you are (or were) in foster care, you may be covered by Medicaid until you turn 26 years old.

Preventive Care

Preventive care means medical care to prevent disease, sickness or injury. It means helping you stay healthy. The ACA makes it more affordable for you to access preventive care. In fact, many tests and screenings that can

help you stay healthy and identify any health problems early are free! Here are some of the preventive services you can receive under the ACA:

- Immunizations
- Screenings for diabetes, depression, blood pressure, domestic violence and cervical cancer
- Alcohol and drug use assessments
- Obesity screening and counseling
- Well woman visits

Applying for Health Care Coverage

- Apply online at <https://www.healthcare.gov>.
- Apply for health care coverage and other public assistance programs in Montana at <https://apply.mt.gov>.
- Call 1-800-318-2596 (1-855-889-4325 TTY) to apply over the phone.

Resources

For a six-minute video overview of the Affordable Care Act, watch “The YouToons Get Ready for Obamacare: Health Insurance Changes Coming Your Way under the Affordable Care Act,” from The Henry J. Kaiser Family Foundation at <http://kff.org/health-reform/video/youtoons-obamacare-video/>.

You can access a quick guide to how the ACA affects someone with a disability at <https://www.healthcare.gov/how-does-the-affordable-care-act-affect-me/#question=people-with-disabilites>.



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Private Health Care Coverage Options



Courtesy of cooldesign, FreeDigitalPhotos.net

Private Health Care Coverage Options

Understanding your health care needs, choosing a medical provider and organizing your health-related information is a great start to your transition into adult medical services. The next step is to decide how you will pay for your health care.

Even if you are not seeing a doctor or receiving any kind of treatment right now, health insurance is an important protection to have. If you get sick or injured, have an accident, or develop a chronic medical condition, your medical bills can add up quickly. Health insurance helps you pay those bills. Also, remember that under the Affordable Care Act, most people are required to have health insurance.

In this section of the workbook, we will talk about private health insurance options. Public health care coverage options such as Medicaid and Medicare will be discussed later.

Definitions

Before we go any further, there are several terms health insurance companies use that you might not recognize. It will be helpful for you to know what these terms mean:

- **Health Insurance** helps pay part or sometimes all of your medical expenses (doctor's visits, lab work, hospital care, prescription medication, etc.). Health insurance may be available through your employer, you may purchase it privately, or you may qualify for a government health insurance program like Medicaid or Medicare. Even with health insurance, you will have certain costs you need to pay. Examples of these include:
 - Premium: the amount that must be paid to buy private health insurance coverage. Premiums are often paid monthly. You may pay the full premium yourself, your employer may pay the full amount, or you and your employer may share the cost.
 - Deductible: the amount you must pay toward your medical bills before your health insurance company pays anything. For example, if your deductible is \$250, you will be responsible for the first \$250 of your medical expenses before your health insurance pays anything.

- **Co-Insurance:** a percentage you are required to pay toward your medical bills. For example, if you have a 20% co-insurance requirement for all hospital stays, you will have to pay 20% of any hospital bill and your health insurance company will pay the other 80% of the bill.
- **Co-Payment:** an amount you have to pay for a visit or service before your health insurance company pays anything. For example, you may have a \$30 co-payment for each doctor visit. This means whenever you see the doctor for an appointment, you will have to pay \$30 toward the bill.
- **Exclusions** are medical services that are not covered by a health insurance plan. When you are shopping for health insurance, be sure to check the list of exclusions. Make certain that services you need are not on the exclusions list.

Tip: To learn more about health insurance and how it works, watch “Health Coverage 101: Back to Basics” at <http://www.phrma.org/catalyst/health-coverage-101-back-to-basics>.

Types of Private Coverage

- **Employer-sponsored Insurance:** Some employers offer group health insurance as a benefit to their employees. This is usually a less expensive option than buying insurance on your own because the employer pays part of the cost for you. Most employers require that you be working a certain number of hours each week in order to qualify for the coverage. There may also be a waiting period of up to 90 days before your employer-sponsored coverage will start.
- **Student Health Insurance Plan:** If you are enrolled in college, university, or another type of post-secondary school, you may qualify for a student insurance plan offered through your school.
- **Professional clubs or associations:** Sometimes professional organizations, associations and clubs offer health insurance to their members. This may be cheaper than buying coverage on your own.
- **Individually-purchased Health Insurance:** If you cannot get coverage through your parents, your job, your school, or a professional club or association, you may need to buy health

insurance on your own. To learn about the different prices and benefits for plans available in your area, visit the Healthcare.gov website (<https://www.healthcare.gov/>). You can also look for insurance companies in the Yellow Pages of your phone book or by searching online at websites like <http://www.ehealthinsurance.com/>.

You can shop for health insurance coverage through the Health Insurance Marketplace, also called the Health Insurance Exchange. Montanans access the Marketplace through the Healthcare.gov website at <https://www.healthcare.gov/>. The Marketplace helps you compare your options for health care coverage and find a plan you can afford that meets your needs. Marketplace Navigators can assist you in your search for coverage.



The federal government awarded Outreach and Enrollment funding to help people find and enroll in affordable health insurance plans. In Montana, 16 health centers received the funding. To locate the health center in your area, visit this website:

<http://www.hrsa.gov/about/news/2013tables/outreachandenrollment/mt.html>

Tip: If you are covered on your parents' health insurance policy, you can stay on the policy until you turn 26, even if you are not living in your parents' home.

Tip: To learn more about the Health Insurance Marketplace and to find out the latest Marketplace information, visit the HealthCare.gov website at <https://www.healthcare.gov/what-is-the-health-insurance-marketplace/>.

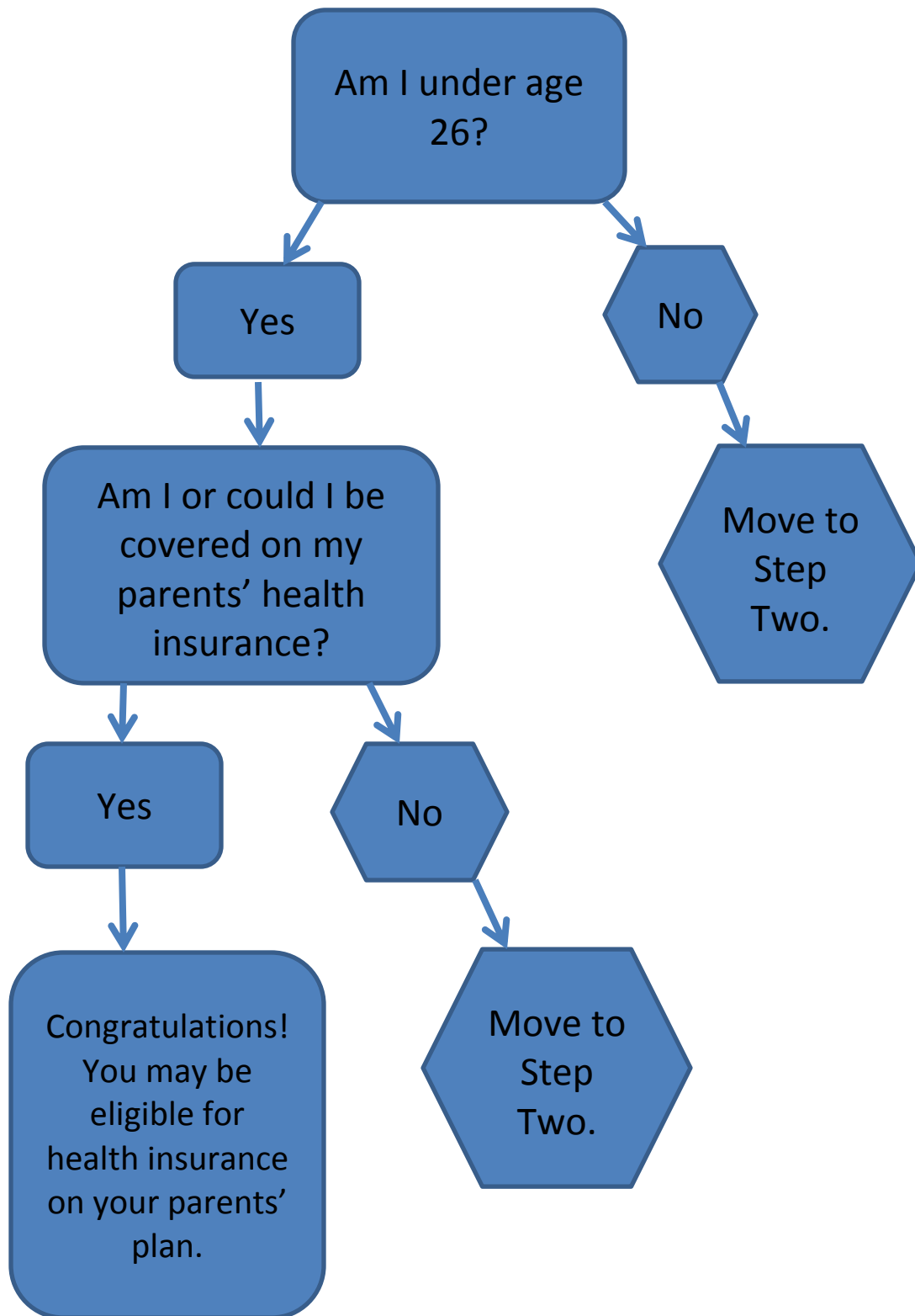
Tip: You may qualify for more than one kind of health insurance coverage. It can be helpful to have two or more health insurance policies, private or public. The policies may cover different services, or may each pay part of your medical bill so you have to pay even less.

Tip: If you plan to travel outside Montana, check your health insurance policy to make sure you will be covered. Before seeing a doctor or having a medical procedure done in another state, make sure the medical provider will accept your health insurance. (Medical providers in other states may not accept health insurance from Montana.)

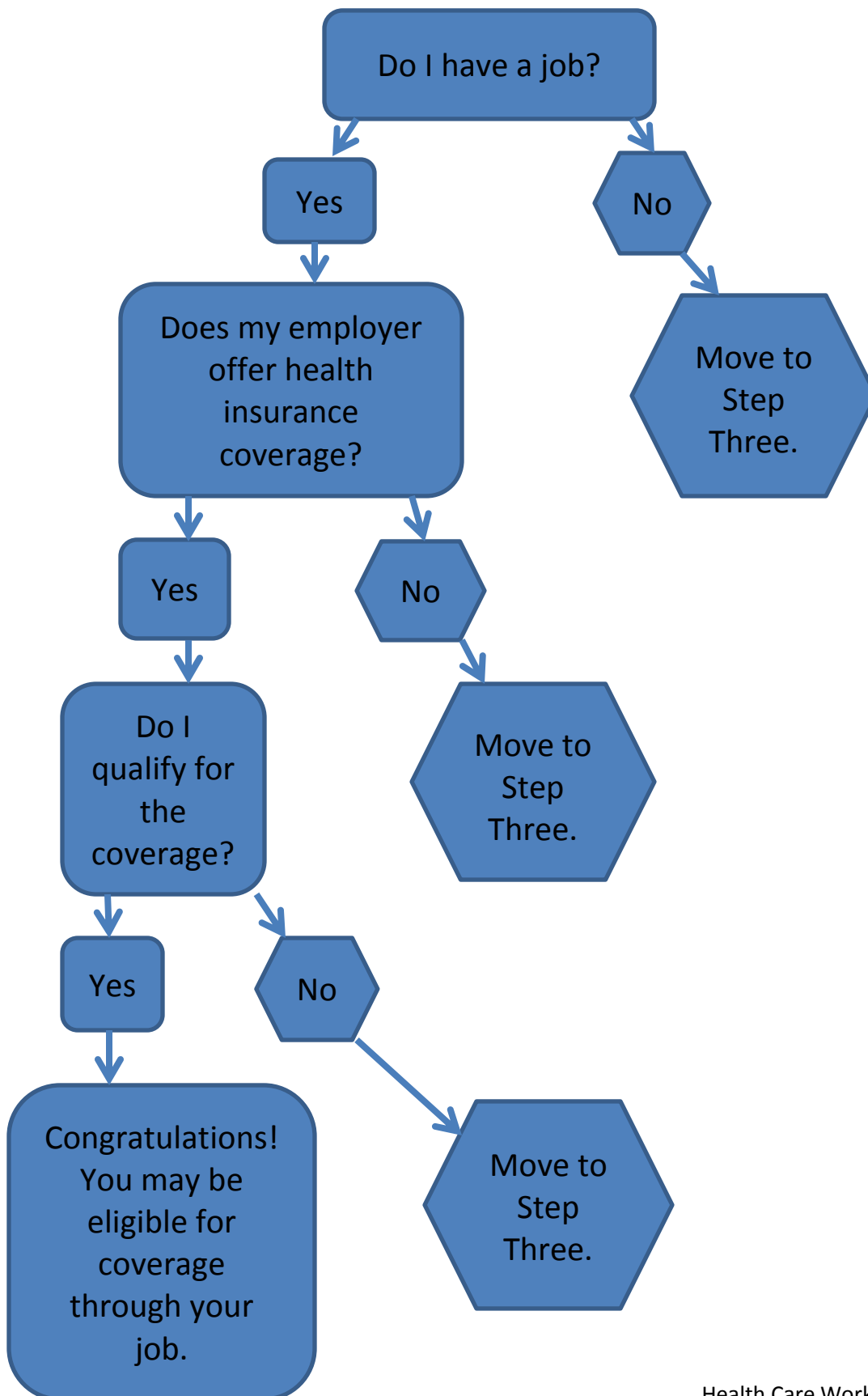
How to Choose

The private health insurance choices can seem overwhelming. Try taking it one step at a time by following the flow charts on the next pages.

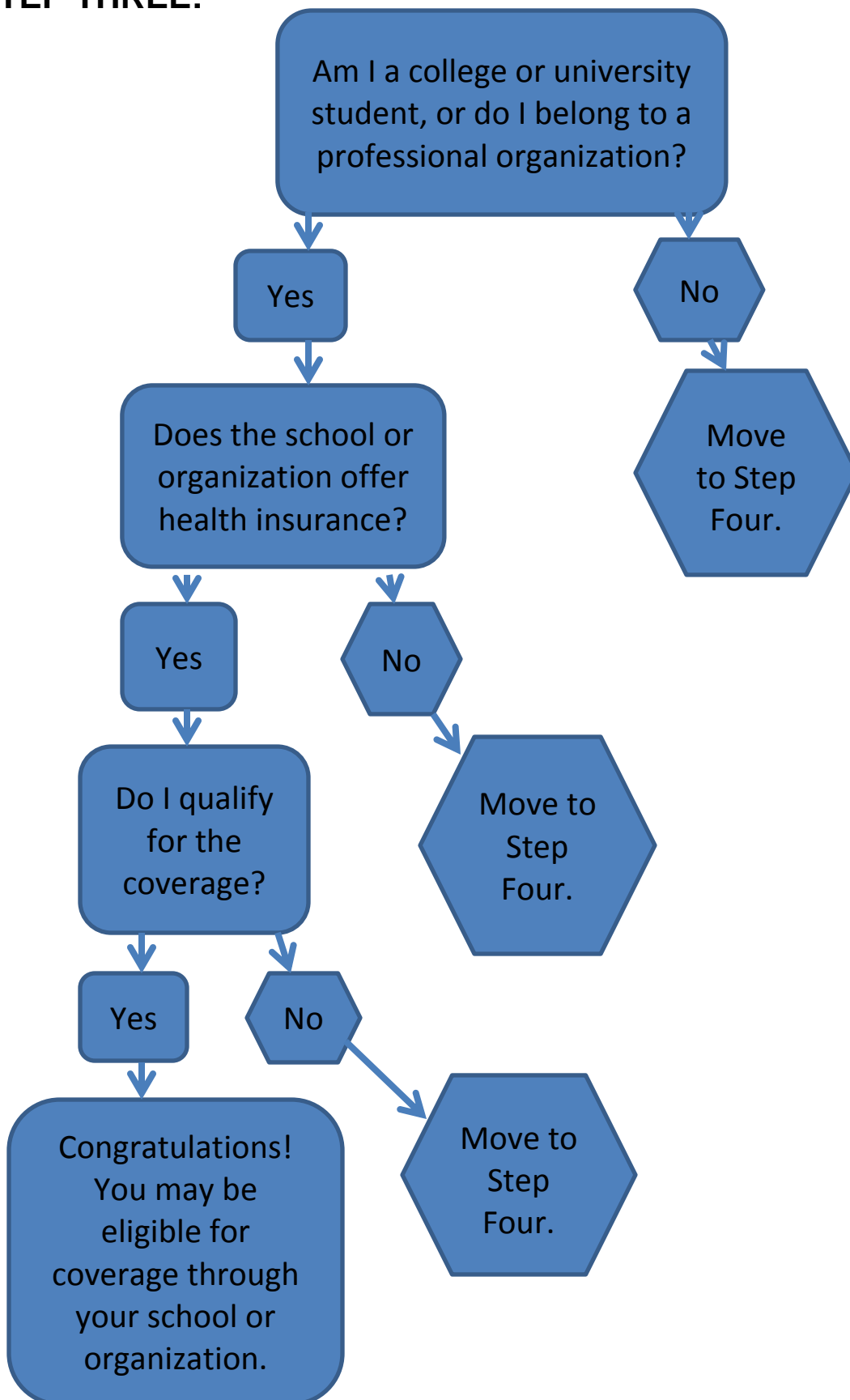
STEP ONE:



STEP TWO:



STEP THREE:



STEP FOUR:

If you do not qualify for coverage through your parents, work, school, or a professional organization, it is time to research individual health insurance options. Talk to your friends, family members, and other people with health conditions or disabilities similar to yours – where do they get their health care coverage? What do they like about their insurance plan? What do they dislike? Ask your doctor’s billing clerk or office manager for suggestions and advice. Contact an ACA Healthcare Navigator – you can find your local navigator by visiting this website: <https://localhelp.healthcare.gov/>.

Next, select several health insurance plans available in your area. Fill out the “Choosing Health Care Coverage” sheet on the following pages for each of the plans. Then use this information to compare the insurance plans and see which, if any, fit within your budget and will meet your health care needs.



CHOOSING HEALTH CARE COVERAGE	
QUESTIONS	ANSWERS
Am I eligible for health insurance through this company?	
What are my health care needs now? Do I think my health care needs will change in the next year?	
Does this insurance plan cover the medical services (including prescriptions) I need covered?	
Does the plan cover assistive technology and durable medical equipment?	
Does the plan cover preventive services? Does it cover wellness services?	
What medical services are excluded (not covered)?	
Which hospitals and clinics can I use with this health insurance plan?	
Do I have to get approval in advance (prior authorization) for certain medical services?	
Will my medical providers accept coverage from this health insurance company? Will they file the health claims with the insurance company?	

CHOOSING HEALTH CARE COVERAGE	
QUESTIONS	ANSWERS
How much can I afford to spend on health care each month?	
How much is the monthly premium for this health insurance plan?	
How much is the deductible?	
How much is the co-insurance?	
How much are the co-payments?	
Is there someone at this company I can talk to if I have questions or problems?	

Tip: Save your medical bills, “Explanation of Benefit” forms (health insurance companies send you these to show what portion of the medical bill they will pay and what portion you must pay) and proof of the payments you make on your medical bills. You may be able to claim part of your medical expenses on your taxes. Ask your tax preparer for more information.

Resources

To learn more about private health insurance, visit the Montana Commissioner of Securities and Insurance website (<http://montanahealthanswers.com/>). You might also want to download and read *Health Insurance: A Guide to Your Rights and Choices*, available at http://www.csi.mt.gov/health/cap/docs/pdf/CSI_HealthInsuranceGuideWEB_3.pdf.

In the next section of our workbook, we will explore public health care coverage options, such as Medicaid and Medicare.

Public Health Care Coverage Options



Public Health Care Coverage Options

In earlier sections of this workbook, you learned how to choose a medical provider and organize your health-related information. Then you learned about the Affordable Care Act (also called “Obamacare”) and private health insurance options that can help you pay for your medical care. Now we will tell you about public health care coverage options such as Medicaid and Medicare. These programs are funded by the government, which is why we refer to them as “public” options. Each program has different rules about who is eligible and what will be covered. We will give you a brief overview of the programs and tell you how you can get more information about each of them.

Remember, even if you do not have medical expenses right now, it is important to explore your health insurance choices. You never know when you might get sick or injured, have an accident, or develop a medical condition, and health care bills can add up quickly. Health insurance helps you pay those bills, but you want to have it in place BEFORE you need it.

Tip: You may qualify for more than one kind of health insurance coverage. It can be helpful to have two or more health insurance policies, private or public. The policies may cover different services, or may each pay part of your medical bill so you have to pay even less.

Tip: To learn more about health insurance options available to you, visit the HealthCare.gov website at <https://www.healthcare.gov/>. Click on “See Plans before I Apply,” answer a few questions about yourself, and find out what kinds of health insurance choices might work for you.

Medicaid

Overview: Medicaid provides health care coverage for certain people with low incomes. In Montana, Medicaid is run by the Department of Public Health and Human Services. If you are eligible for Medicaid, you will receive either full or basic coverage. Full coverage means you can get coverage for any medically necessary services that Medicaid covers. You may be eligible for full coverage if you are:

- Under age 21

- Blind or have disabilities
- Age 65 or older
- Pregnant

Most other Medicaid recipients receive basic coverage. Basic Medicaid does not cover dental care, audiology services, eyeglasses and vision exams, durable medical equipment, and personal care services in the individual's home. (These services may be covered if they are necessary for employment or in emergency situations.)

Eligibility: Different states have different Medicaid eligibility rules. In Montana, to qualify for Medicaid you must meet income and resource limits (usually this means your income must be low and you must not have many assets, such as savings accounts or stocks and bonds). You must also fit into one of these groups:

- Parents or other related adults with dependent children under age 19
- Children
- Former foster care children age 18 up to 26
- Pregnant women
- Women diagnosed with breast or cervical cancer or pre-cancer
- People who are blind or disabled (based on Social Security criteria)
- People 65 and older
- People enrolled in a Home and Community Based Services (HCBS) waiver program

Supplemental Security Income (SSI) recipients automatically qualify for Medicaid in Montana. To learn more about SSI, visit the “Understanding Supplemental Security Income SSI Home Page -- 2014 Edition” at <http://www.socialsecurity.gov/ssi/text-understanding-ssi.htm> or call the Social Security Administration toll-free at 1-800-772-1213 (TTY 1-800-325-0778). To apply for SSI, contact your local Social Security Administration office for an appointment. If you are not sure where the nearest office is, enter your zip code at this site: <https://secure.ssa.gov/ICON/main.jsp> and it will tell you which office to contact.

To Apply: There are two ways you can apply for Montana Medicaid:

- Online at <https://www.apply.mt.gov>.
- Submit an application to your local Office of Public Assistance. You can ask your local office to mail you an application form. Find out how

to contact your local office on this website:
<http://dphhs.mt.gov/hcsd/OfficeofPublicAssistance>.

If you need help filling out your application, call this toll-free number:
1-888-706-1535.

For More Information: Visit the DPHHS website at
<http://dphhs.mt.gov/MontanaHealthcarePrograms.aspx> or phone 1-888-706-1535 (toll-free). You can also visit the Medicaid Reference Desk website at <http://www.thedesk.info/> to read or listen to more information.

Tip: The Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) benefit is available to all Medicaid-eligible members under age 21. EPSDT includes comprehensive and preventive health care services.

Tip: Not all medical providers accept Medicaid as health insurance coverage for their patients. If possible, check with your health care professionals to make sure they accept Medicaid before you have medical services performed. You might have to pay for your care if you receive services from a provider who does not accept Medicaid, or you receive services not covered under Medicaid.

Healthy Montana Kids

Overview: The Healthy Montana Kids Plan (HMK) is the program name for two health care coverage groups for children. It is a free or low-cost health coverage plan for eligible Montana children up to age 19. Healthy Montana Kids Plan groups are:

- Healthy Montana Kids *Plus* coverage group (formerly children's Medicaid)
- Healthy Montana Kids coverage group (formerly the Children's Health Insurance Program or CHIP)

HMK is run by the Montana Department of Public Health and Human Services (DPHHS). Some of the covered services include:

- Office and clinic visits
- Emergency and hospital services

- Well-child checkups
- Prescription drugs
- Mental health and substance abuse services
- Dental care
- Vision exams and eyeglasses
- Hearing exams and hearing aids

Eligibility: To qualify for HMK, you must be a Montana resident under 19 years old. Your household also must meet income guidelines. You can see the income guidelines on this webpage: <http://dphhs.mt.gov/hmk/abouthmk>.

To Apply: There are several ways you can apply for HMK.

- Apply online at <https://www.apply.mt.gov>.
- Call 1-877-543-7669 and ask for an application to be mailed to you.
- Pick up an application in your community. Applications are available at the county Offices of Public Assistance, health departments, health care facilities, Indian Health Service facilities, and many more community locations.

For More Information: Visit the HMK website at <http://www.hmk.mt.gov> or phone 1-877-543-7669 (toll-free).

Children's Special Health Services (CSHS)

Overview: Children's Special Health Services (CSHS) provides limited financial assistance for specialty care and therapies for children and youth with special health needs. CSHS also offers pediatric specialty clinics, such as cystic fibrosis and cleft/craniofacial clinics.

Eligibility: To receive financial assistance from CSHS, you must meet income and medical condition requirements and be under the age of 19. You do not have to meet the income requirements to attend a pediatric specialty clinic.

To Apply: To apply for CSHS financial assistance:

- Download the application form from <http://dphhs.mt.gov/publichealth/cshs/CSHSFinancialAssistanceApplicationProcess>.
- Complete and print the application.

- Mail the completed form with your original signature, progress notes from your physician, and the requested income information to:
Children's Special Health Services
PO Box 20295
Helena, MT 59620

For More Information: Visit the Children's Special Health Services website at <http://www.cshs.mt.gov> or phone 1-800-762-9891 (toll-free).

Genetic Testing Financial Assistance (GTFA)

Overview: GTFA provides financial assistance for genetic testing for people of all ages.

Eligibility: There are no income criteria for GTFA. Limited funding is available, so it is possible that not everyone who qualifies for assistance will receive the funding for genetic testing.

To apply:

- Download the application form from <http://dphhs.mt.gov/publichealth/cshs/GeneticFinancialAssistanceApplicationProcess>.
- Complete the application.
- Mail or fax your completed application, including physician records that support your request for genetic testing, to:
Children's Special Health Services
PO Box 20295
Helena, MT 59620
FAX: (406) 444-2750

For more information please contact Children's Special Health Services at (406) 444-3622 or toll free (800) 762-9891.

Montana Cancer Screening Program

Overview: The Montana Cancer Screening Program and American Indian Screening Initiative are part of the Montana Cancer Control Programs and are run by the Montana Department of Public Health and Human Services (DPHHS). Low cost screening services for eligible men and women include:

- Mammograms
- Clinical breast exams
- Pap tests and pelvic exams
- Colonoscopies and other tests for the early detection of colorectal cancer
- Diagnostic testing is provided for the follow-up of abnormal screening tests

Eligibility: To qualify for the low cost screenings, your income must be equal to or less than the income limits found on this website:

http://dphhs.mt.gov/Portals/85/publichealth/documents/Cancer/C_Screening/CurrentIncomeGuidelines.pdf.

To Apply: You may download the enrollment forms from this website:

<http://www.dphhs.mt.gov/publichealth/cancer/cancerscreening.shtml> and submit the completed forms to your local Montana Cancer Control Programs contractor. You can find your local contractor on this website: <http://www.dphhs.mt.gov/publichealth/cancer/regionalprograms.shtml>.

For More Information: To learn more about the Montana Cancer Screening Program, visit

<http://www.dphhs.mt.gov/publichealth/cancer/cancerscreening.shtml> or call 1-888-803-9343 (toll-free). To learn more about the American Indian Screening Initiative, go to this website: <http://www.dphhs.mt.gov/publichealth/cancer/maiwhc/americanindian.shtml> or call 1-888-803-9343 (toll-free).

Montana Mental Health Services Plan (MHSP)

Overview: The Montana Mental Health Services Plan (MHSP) pays for certain mental health services for eligible Montana adults. The program is run by the Montana Department of Public Health and Human Services (DPHHS).

Eligibility: To qualify for the Montana Mental Health Services Plan, you must:

- Have a severe and disabling mental illness (talk to your mental health provider about payment options for the assessment to determine whether or not you have a severe and disabling mental illness)
- Have family income that is below the program guidelines

- Not be eligible for Medicaid

There is limited funding for MHSP. This means that even if you meet the eligibility criteria, you may have to wait to receive coverage.

To Apply:

- Go to this DPHHS website:
<http://dphhs.mt.gov/amdd/Mentalhealthservices/MHSP.aspx>.
- Download and print the form.
- Work with your mental health provider to answer all the questions on the form.
- Gather proof of your income and the other items asked for on the form. This is called “documentation.”
- Take your completed application and documentation to your mental health provider so they can send it to DPHHS to determine if you are eligible for MHSP assistance.

For More Information: Visit the DPHHS website at
<http://dphhs.mt.gov/amdd/Mentalhealthservices.aspx>.

Medicare

Overview: Medicare is a federal health insurance program for people who are 65 or older, certain people with disabilities, or those with end-stage kidney disease. Medicare has four different parts:

- Part A, which covers hospital, skilled nursing facility, hospice and home health care costs. Most people do not have to pay a monthly premium for Part A.
- Part B, which covers doctors’ and other health care providers’ services, and supplies (like wheelchairs and walkers) considered medically necessary to treat a disease or condition. Most people pay a monthly premium for Part B.
- Part C, which are also called Medicare Advantage plans. These are health plan options run by private insurance companies and approved by Medicare.
- Part D, which helps cover the cost of prescription drugs.

Eligibility: Since Medicare is run by the federal government, the eligibility rules and benefits are the same in every state. To qualify for Medicare, you must fit into one of these groups:

- People with disabilities who have received Social Security Disability Insurance (SSDI) benefits for at least two years
- People who have end-stage renal disease, are receiving kidney dialysis or have had a kidney transplant
- People age 65 and over who have been U.S. residents for five years
- People with Lou Gehrig's disease (also called amyotrophic lateral sclerosis or ALS)

Some people qualify for both Medicaid and Medicare. This is called “dual eligibility.”

To Apply: Most people are automatically enrolled in Medicare Part A and Part B when they become eligible.

- If you have a disability, you are automatically enrolled in Medicare after you have been entitled to Social Security disability benefits for 24 months (two years).
- If you have end-stage renal disease, you will need to sign up for Medicare. You can do this by going into your local Social Security office and applying or applying online at <http://www.ssa.gov/medicareonly/>. You can call Social Security at 1-800-772-1213 for more information.
- If you already receive benefits from Social Security, you will automatically be enrolled in Part A and Part B once you turn 65.
- If you have Lou Gehrig's disease (also called amyotrophic lateral sclerosis or ALS), you will automatically be enrolled in Part A and Part B the month your disability benefits begin.

For More Information: Visit the U.S. Government Medicare website at <http://www.medicare.gov>. You can also call 1-800-633-4227 (toll-free) or TTY 1-877-486-2048 (for people who are deaf or hard of hearing).

You may download the *Medicare & You Guide 2014* from this website: <http://www.medicare.gov/Publications/Pubs/pdf/10050.pdf>.

A Quick Look at Medicare is a brochure you can read at this website: <http://www.medicare.gov/Pubs/pdf/11514.pdf>. The brochure includes a flowchart to help you understand your Medicare coverage choices.

The State Health and Insurance Assistance Program (SHIP) offers free Medicare counseling. To reach the Montana SHIP program, call 1-800-551-3191 (toll free) or visit <http://dphhs.mt.gov/SLTC/aging/SHIP.aspx>.

Your local Social Security office can tell you if you are eligible for Medicare Part A and/or Part B and how to enroll. Call 1-800-772-1213 (toll-free) or TTY 1-800-325-0778 (for people who are deaf or hard of hearing). You can also visit the Social Security website at <http://www.socialsecurity.gov>.

Tip: The official Medicare website has an online eligibility tool. Go to this website: <http://www.medicare.gov/MedicareEligibility/home.asp?version=default&browser=Firefox|23|Windows+7&language=English>, answer a few questions, and find out if and when you might qualify for Medicare coverage.

Tip: To apply for Social Security Disability Insurance, fill out the online application at <http://www.ssa.gov/onlineservices/#a0=0> or schedule an appointment at your local Social Security office. If you are not sure where the nearest office is, enter your zip code at this site: <https://secure.ssa.gov/ICON/main.jsp>.

The Indian Health Service (IHS)

Overview: The Indian Health Service is a federal agency. (It is not a health insurance program or a health insurance company.) It is part of the U.S. Department of Health and Human Services. The Billings Area Indian Health Service facilities are located on the eight Tribal Reservations in Montana and Wyoming. There are two hospitals and six clinics that serve American Indian and Alaska Native people in Montana and Wyoming. The IHS facilities provide a variety of services, including but not limited to:

- Direct patient care, including doctors' visits, check-ups and screenings
- Diabetes prevention and treatment

- Mental health and substance abuse treatment
- Dental care
- Pharmacy services
- Optometric (eye) services
- Some inpatient procedures at the hospital locations
 - Labor and delivery
 - Certain surgeries

Eligibility: To qualify, you must be an enrolled member of a federally-recognized tribe or have proof you are of American Indian and/or Alaska Native descent.

To Apply: To apply for IHS health care services, go to your local IHS facility and present proof that you are enrolled in a federally recognized tribe or are a descendant of a tribal member. Visit the Billings Area IHS webpage to locate your nearest IHS facility:

http://www.ihs.gov/billings/index.cfm?module=bao_su. You can visit the federal IHS website to find facilities in other states:
<http://www.ihs.gov/forpatients/index.cfm/findhealthcare/>.

For More Information: Visit the Billings Area IHS website
http://www.ihs.gov/billings/index.cfm?module=bao_directory or call 406-247-7110.

TRICARE

Overview: TRICARE is a health care program for members of the U.S. military (both active and retired) and for their families. TRICARE also offers an Extended Care Health Option (ECHO).

Eligibility: TRICARE is the health care coverage program for all seven uniformed services:

- Army
- Navy
- Marine Corps
- Air Force
- Coast Guard
- Public Health Service
- National Oceanic and Atmospheric Administration

People who may be eligible for TRICARE include:

- Active duty service members
- Spouses and unmarried children of active duty service members
- Uniformed service retirees, their spouses, and unmarried children
- Unmarried children up to age 21
- Unmarried children up to age 23 if they are full-time students
- Unmarried children age 21 and older if they have a severe disability

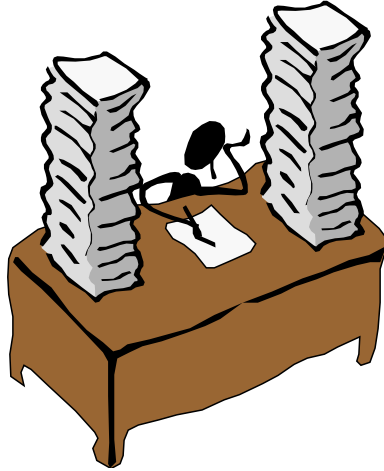
More information about TRICARE eligibility can be found on this website:

<http://www.military.com/benefits/tricare/tricare-eligibility.html?comp=7000022779075&rank=1>.

To Apply: If you are eligible for TRICARE, you will be automatically enrolled.

For More Information: To learn more about TRICARE, visit this website:

<http://www.military.com/benefits/tricare>.



That was a lot of information to read and understand. If you are feeling confused or overwhelmed, do not worry. Remember, there are people who can help you sort through your health care coverage options and decide what will best meet your needs.

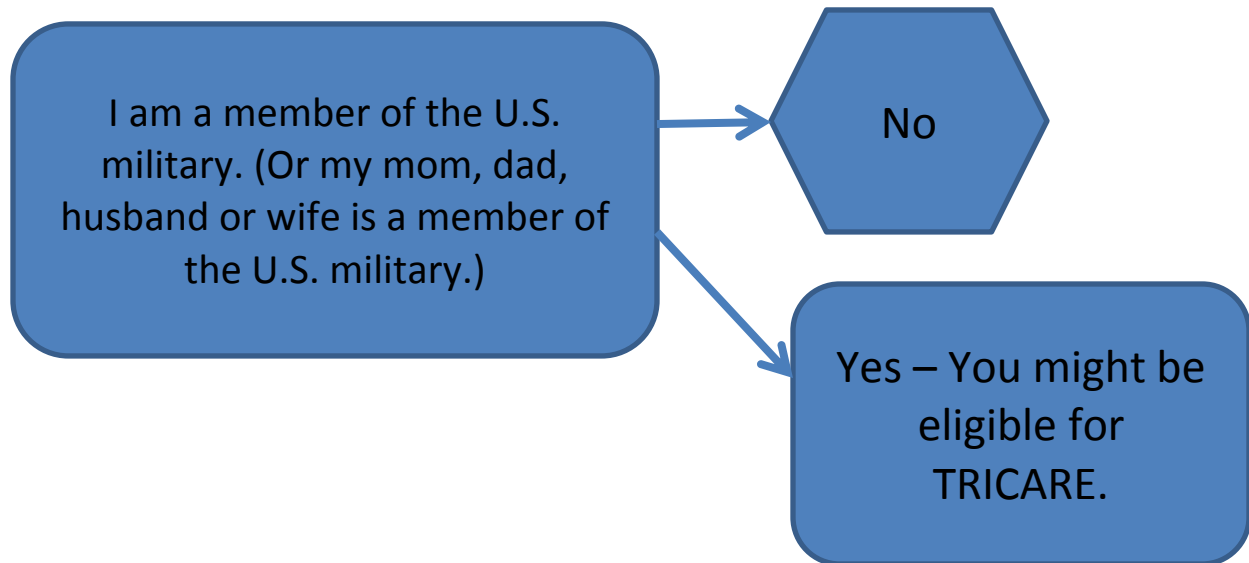
On the following pages, there are several questions for you to answer. This will help you to narrow down the kinds of public health insurance you might be eligible to receive. Once you have figured out which programs you might qualify for, you can re-read the information about those programs. You can also visit the websites listed in the “For More Information” section of each program description. Remember, you might qualify for more than one health care program.

Note Page

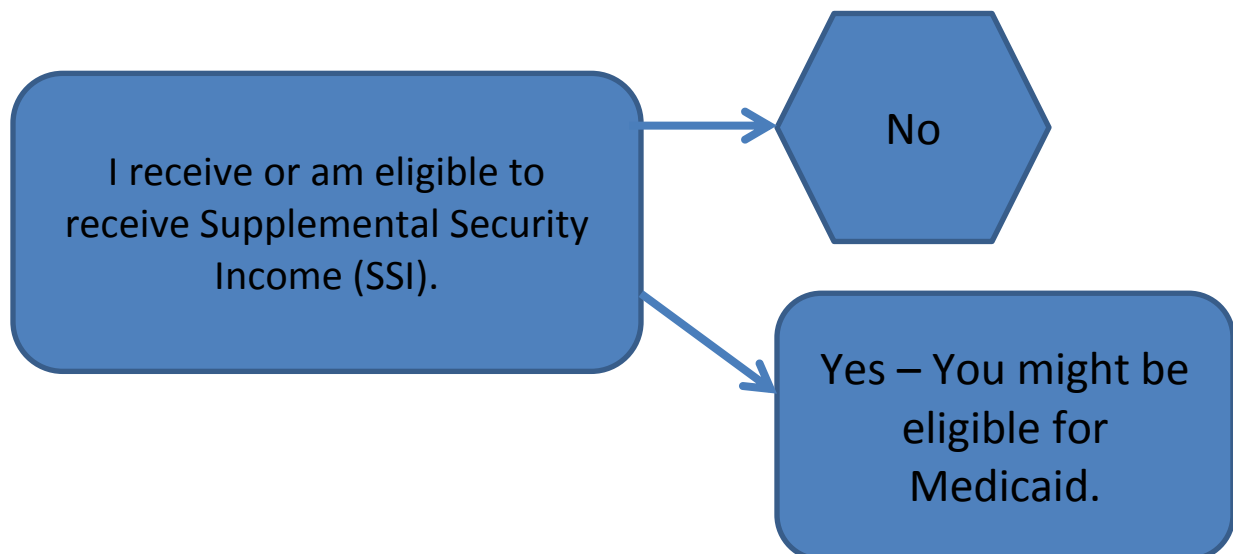
As you answer the questions on the following pages, write down the programs you might be eligible for on this Note Page. Then you can go back to the beginning of this workbook section, re-read the information for the programs you have listed here, and decide if you want to apply.

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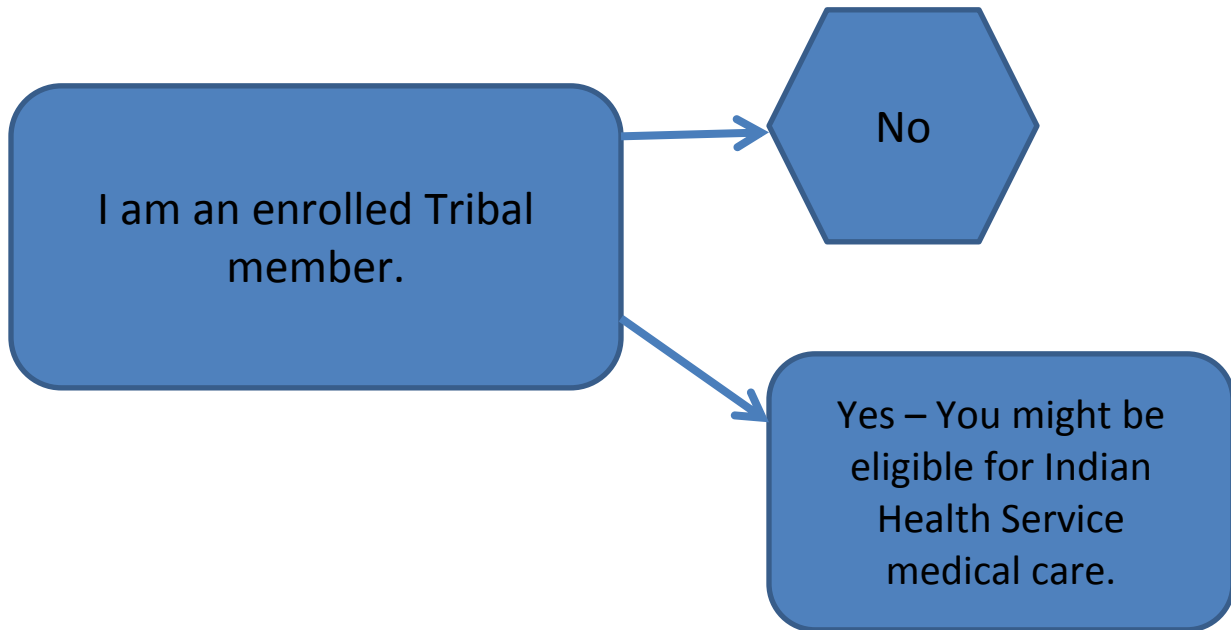
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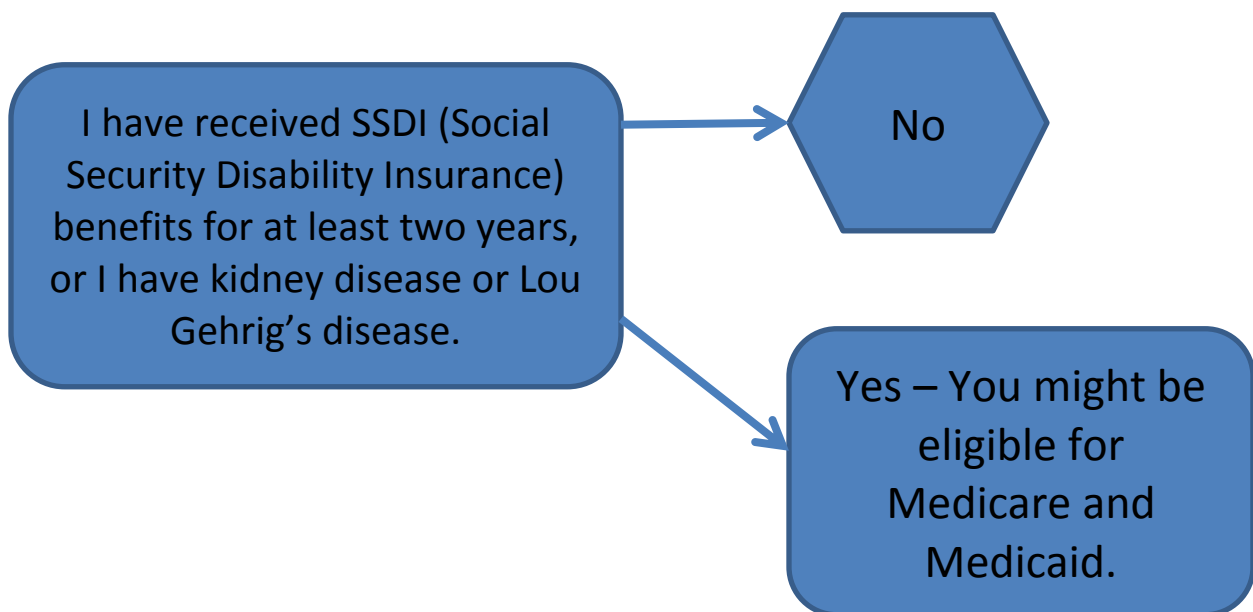
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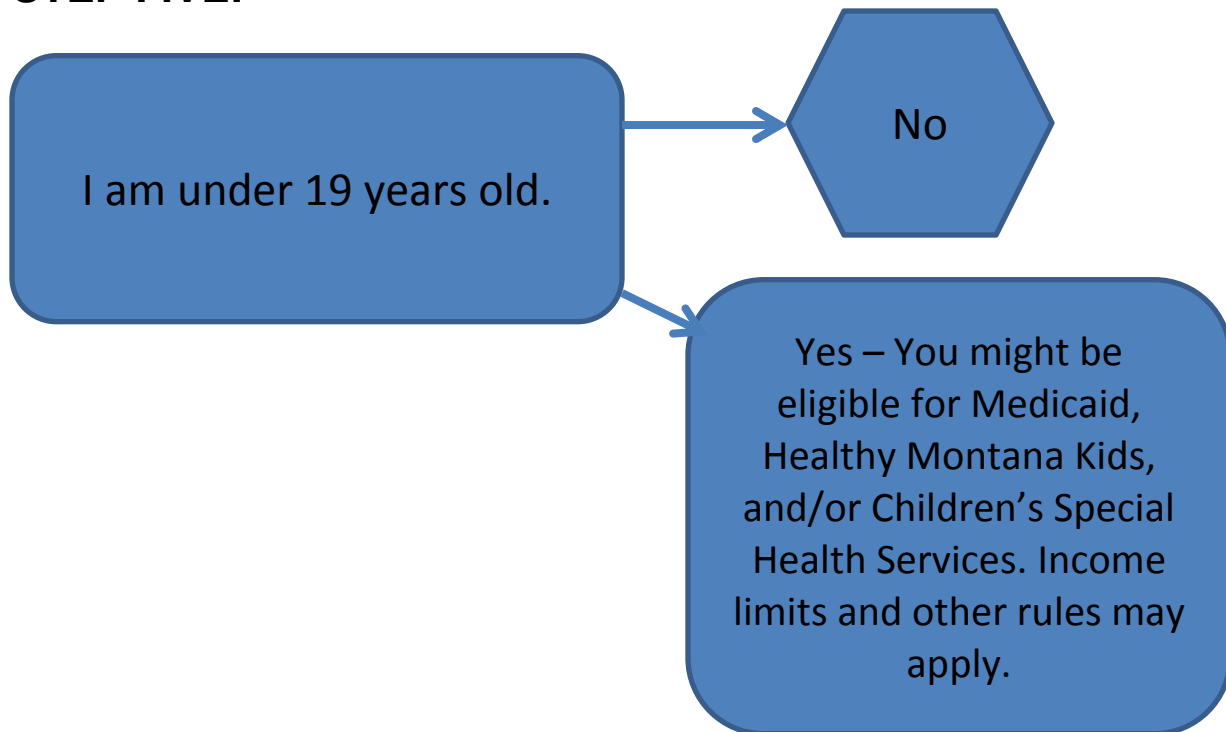
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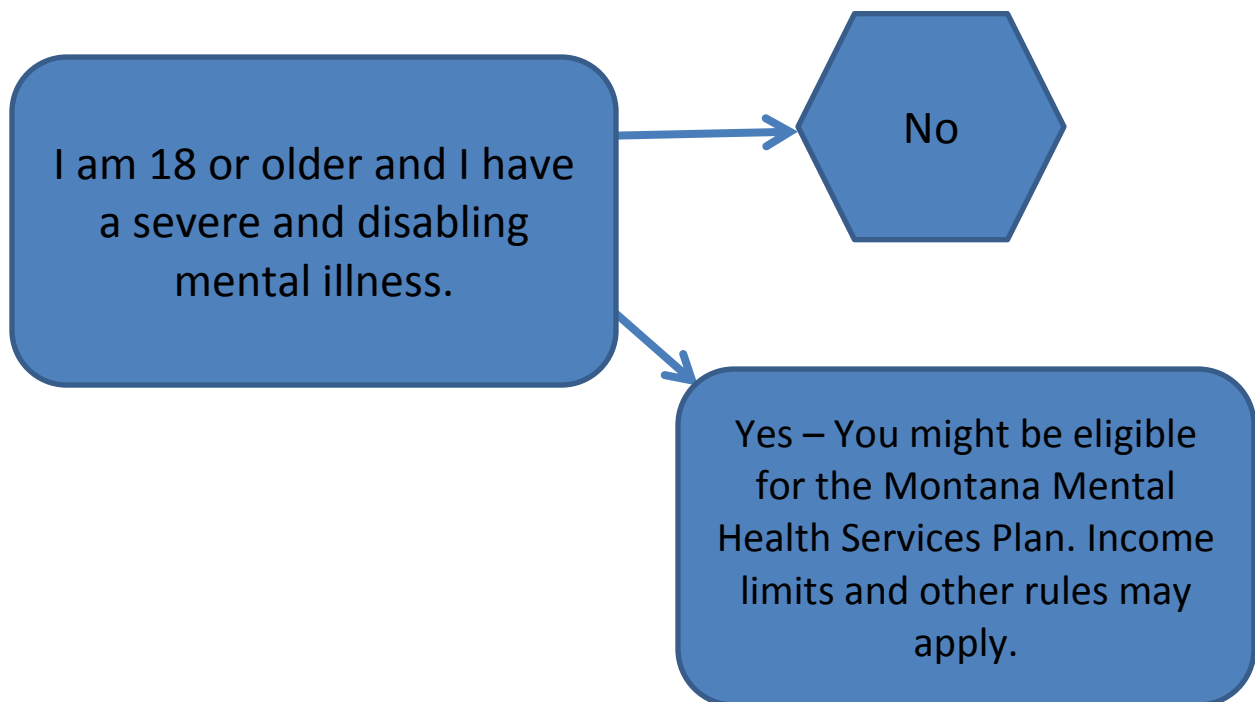
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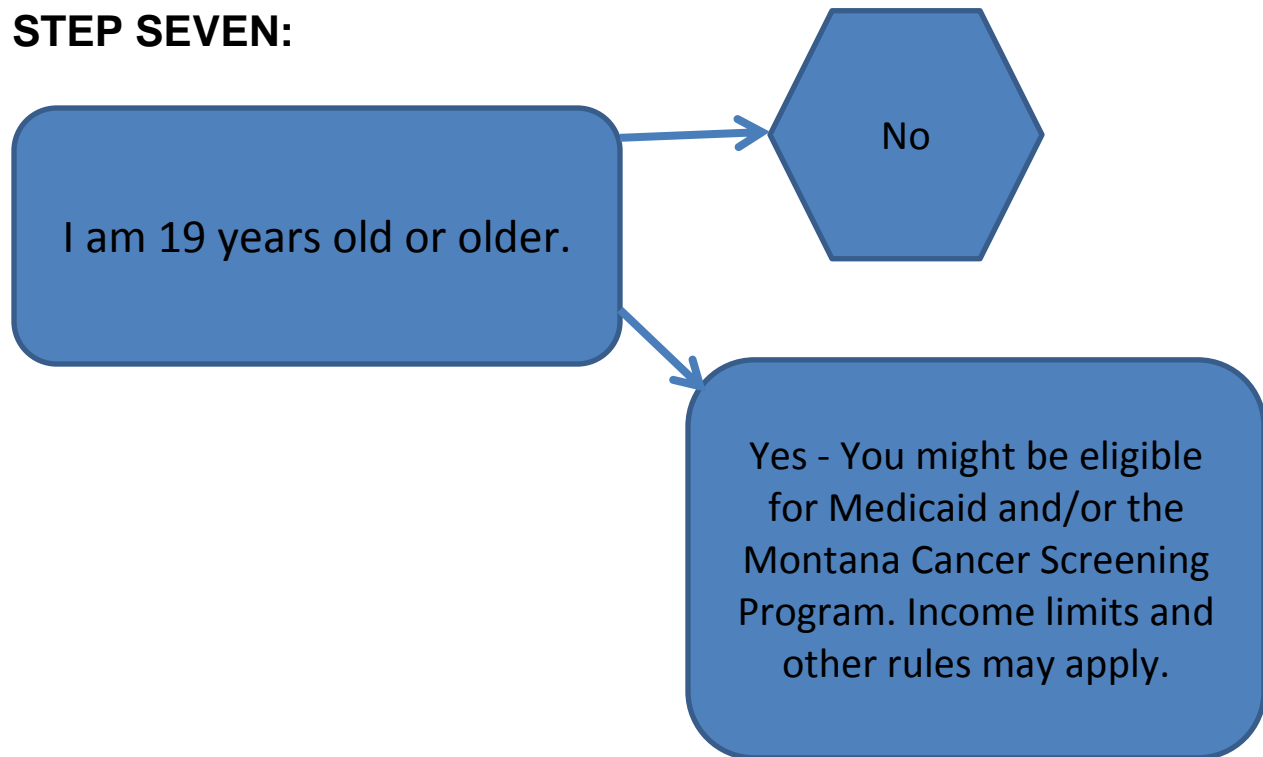
STEP FIVE:



STEP SIX:



STEP SEVEN:



In the next section of our workbook, we will explore options for young people who do not have any kind of health insurance coverage.

Options for People with No Health Care Coverage



Urban Indian Health Program Logo

Options for People with No Health Care Coverage

What happens if you do not have any health insurance, private or public? You may be responsible to pay the full price for every doctor's appointment, every prescription, and every medical treatment you receive. If you are hospitalized, you could face very large bills. Fortunately, there are a few options for people with no health care coverage.

Community Health Centers

Federally Qualified Health Centers (also known as community health centers) provide medical care to people without health insurance. Generally you are required to pay what you can afford based on your income. (This is called a "sliding scale fee.") Services that community health centers typically provide include:

- Checkups
- Treatments
- Pregnancy care
- Immunizations for children
- Dental care
- Prescription drugs
- Mental health and substance abuse care

To find the health center closest to you, type in your address and click the "Find Health Centers" button on this website:

http://findahealthcenter.hrsa.gov/Search_HCC.aspx.

Family Planning Clinics

Montana's family planning clinics serve both men and women. They offer a sliding scale fee for people with low incomes and those without health insurance. (The clinics also accept Medicaid and other kinds of health insurance.) Some of the services that family planning clinics provide include:

- Birth control counseling
- Physical exams
- Pregnancy testing and counseling
- Breast, cervical and testicular cancer screenings
- Diagnosis and treatment of sexually transmitted infections
- Health education

To find the Montana family planning clinic closest to you, visit this website:
<http://www.dphhs.mt.gov/publichealth/wmh/familyplanningtitlexclinics.shtml>.

Urban Indian Clinics

Montana has five Urban Indian Clinics to make health services more accessible to Native Americans residing in urban areas. Some clinics will also treat non-Native Americans for a small co-payment. Services provided at the clinics may include:

- Information, outreach and referral
- Dental care
- Primary medical care
- Substance abuse treatment
- Immunizations
- Health promotion and disease prevention
- Transportation to the nearest Indian Health Service (IHS) facility

To locate the nearest Montana Urban Indian Clinic, visit this website:
<http://tribalnations.mt.gov/urbanindian.asp>.

NeedyMeds

NeedyMeds is a national non-profit that provides information about prescription assistance programs for people with low incomes. The data is free and updated regularly on the organization's website:
<http://www.NeedyMeds.org>.

NORD's Patient Assistance Programs

NORD administers Patient Assistance Programs to help people obtain medication they could not otherwise afford. NORD also offers financial assistance with insurance premiums, co-payments, certain diagnostic testing expenses and more. To learn more about eligibility requirements or to apply for assistance, visit the NORD website at
<http://www.rarediseases.org/patients-and-families/patient-assistance>.

PPARxMT

PPARxMT, the Partnership for Prescription Assistance, helps uninsured Montanans with low incomes access patient assistance programs where they may qualify for free or discounted prescription drugs. To learn more, visit the PPARxMT website at <http://www.pparxmt.org/>.

As you have learned, there are many different private and public health insurance options, and there are even programs and services available to help people who do not have health insurance. In the next section of this workbook, we will introduce you to other resources you might find useful as you transition from children's health care to adult medical services and coverage.



Resources



Courtesy of Stuart Miles, FreeDigitalPhoto.net

Resources

We have listed a number of resources below that you might find helpful as you navigate your health care transition. The resources are divided into categories to make it faster for you to find the information you want and need. After the list of resources, you will find a Note Page where you can write down websites you read about that you want to visit.

Affordable Care Act (“Obamacare”)

The AARP Health Law Answers (<http://healthlawanswers.aarp.org/>) website asks you a series of questions. Based on your answers, it describes how the Affordable Care Act works for you.

<http://www.healthcare.gov> is the U.S. Department of Health and Human Services’ official Affordable Care Act website.

Health Coverage under the Affordable Care Act is a flowchart of health care coverage options. It is available at <http://jama.jamanetwork.com/article.aspx?articleid=1487506>.

The Young Invincibles website (<http://younginvincibles.org/issues/health-care/>) provides information about health care options. It even includes a Health Care Finder mobile phone app you can download. The app helps you find free and paid health care, and features a “Healthcare FAQ” section to answer your questions about healthcare options, student health insurance, and more.

Assistive Technology

MonTECH is Montana’s resource center for Assistive Technology devices, information, training, evaluations, and other related supports. MonTECH’s website is <http://montech.ruralinstitute.umn.edu/>.

The myfamily app helps you identify your health priorities, download your health records to share with your doctor, create a monthly calendar, and keep track of medical check-ups. You can read more about the app at http://lyfechannel.com/healthfinder_app/ or download it from the iTunes Store at <https://itunes.apple.com/us/app/hf-myfamily/id633565902?ls=1&mt=8>.

Health

A *Health Handbook for Women with Disabilities* can be downloaded at <http://hesperian.org/books-and-resources/>. It covers many topics of interest to young women, including mental health, taking care of your body, health exams, sexual health and more.

Healthfinder.gov (www.healthfinder.gov) is an online encyclopedia of health-related information.

The KidsHealth website (<http://kidshealth.org/>) provides doctor-approved health information about children from birth through adolescence. The site has separate areas for kids, teens and parents.

Questions to Ask Your Doctor (www.ahrq.gov/questionsaretheanswer) guides you through questions to ask before, during and after your medical appointment.

Quality Mall (<http://www.qualitymall.org/main/>) offers free information about person-centered supports for people with intellectual/developmental disabilities. The Mall includes a section with Health and Safety resources.

The Wrightslaw Montana Yellow Pages for Kids with Disabilities (<http://www.yellowpagesforkids.com/help/mt.htm>) includes state-by-state listings for psychologists, attorneys, support and study groups, and others who provide services to parents and children.

Health Care Coverage

The Catalyst Center Publications webpage (<http://hdwg.org/catalyst/publications>) houses resources addressing topics such as health care reform, paying for care, children in foster care, and more.

The HealthWell Foundation helps eligible individuals pay for co-insurance, co-payments, health care premiums and deductibles for certain medications and therapies. To learn more about eligibility requirements, visit the organization's website at <http://www.healthwellfoundation.org/what-we-do>.

NORD administers Patient Assistance Programs to help people obtain medication they could not otherwise afford. NORD also offers financial assistance with insurance premiums, co-payments, certain diagnostic testing expenses and more. To learn more about eligibility requirements or to apply for assistance, visit the NORD website at <http://www.rarediseases.org/patients-and-families/patient-assistance>.

The Patient Access Network (PAN) Foundation helps people who have health insurance cover their co-payments for high-cost medications. To learn about eligibility requirements and how to apply, visit the foundation's website at <https://www.panfoundation.org/fundingapplication/whoqualify.php>.

The Patient Advocate Foundation Co-Pay Relief Program (CPR) helps eligible individuals with prescription drug co-payments. Visit <http://www.copays.org/> for eligibility and application requirements.

Patient Services, Inc. (PSI) is a non-profit, charitable organization that helps people living with specific chronic illnesses by:

- Locating health insurance
- Subsidizing the cost of health insurance premiums
- Providing pharmacy and treatment co-payment assistance
- Assisting with Medicare Part D co-insurance
- Helping with advocacy for Social Security Disability

For more information, visit the PSI website at <https://www.patientservicesinc.org/>. The site can also help you search for potential insurance options. Start your search here: <https://www.patientservicesinc.org/For-Patients/Patient-Resources/Insurance-navigation>.

Health Care Transition

Got Transition? Center for Health Care Transition Improvement (<http://www.gottransition.org/>) offers a wealth of resources for young people, parents and providers. The site houses checklists, guidance for medical professionals, tools for families, Action Plan templates, archived presentations and more.

Parents, Let's Unite for Kids (PLUK) is Montana's Parent Information Center and Family Voices State Affiliate Organization. The PLUK website (<http://www.pluk.org/pub.htm>) includes health care transition resources.

Health Care Transition Checklists and Workbooks

Being a Healthy Adult: How to Advocate for Your Health and Health Care (<http://rwjms.rutgers.edu/boggscenter/products/documents/TransitiontoAdultHealthcare-EN-complete.pdf>) is a 32-page guide from The Elizabeth M. Boggs Center on Developmental Disabilities. It includes a number of activities to steer you through the health care transition process.

The Transition Developmental Checklist lists key skills to support health and independence, along with suggested ages. It can be downloaded from the Kentucky Commission for Children with Special Health Care Needs website at <http://chfs.ky.gov/nr/rdonlyres/8c5eedbe-14fc-4488-8c85-1bac1ede0516/0/checklist.pdf>.

The *Transition Health Care Checklist*, developed by the Pennsylvania Department of Health, offers a number of checklists and flowcharts to help young adults with special health care needs successfully transition to the adult health care system. The guide may be downloaded from http://www.dsf.health.state.pa.us/health/lib/health/familyhealth/transition_hc_checklistrevised3-07.pdf.

The Transition Readiness Assessment Questionnaire (<http://www.hscj.ufl.edu/jaxhats/Forms.aspx>) assesses a variety of skills, including a young person's readiness to independently manage their own medical condition and health care needs.

Transition to Adult Health Care: A Training Guide in Two Parts was developed by the Waisman Center at the University of Wisconsin–Madison in 2005. Part one is geared toward parents of children with special needs and part two is aimed at young adults. Although the guide is older, it includes a number of checklists and forms that are still useful and relevant. It can be accessed at http://www.waisman.wisc.edu/hrtw/Adult_Teen.pdf.

When You're 18 You Are in Charge of Your Health is a 17-page health care transition guide for young adults from the Children's Medical Services

Network. It can be accessed at http://www.uab.edu/civitanisparks/images/When_Youre_18.pdf.

Mental Health

Developmental Disabilities and Mental Health: What Young Adults Want YOU to Know is a brochure developed to raise awareness of the mental health needs of youth with developmental disabilities and to suggest skills they think are important for mental health professionals to have when working with this population. It may be downloaded from <http://ruralinstitute.umt.edu/transition/2-24-11%20Brochure-Update.pdf>.

Mental Health America of Montana (<http://www.montanamentalehealth.org/>) offers information, access to training, and support.

Montana's Peer Network (<http://mtpeernetwork.org/>) is a statewide coalition of people who use mental health services. The network provides information, education and resources.

Moving On and Moving Up: Resources for Young Adults in Transition was created by the Montana Region II Youth Transition Committee. It covers the transition to adult mental health services. The guide may be downloaded from <http://montanayouthtransitions.org/UserFiles/File/Mental%20Health%20Resources%20Book%281%29.pdf>.

Miscellaneous

Benefit Finder (<http://www.benefits.gov/>) asks you a series of questions to create a list of government benefits you may be eligible to receive.

Montana Bridge to Benefits (<http://mt.bridgetobenefits.org/>) features an Eligibility Screening Tool (http://mt.bridgetobenefits.org/start_screening.html) that lets you see what assistance you might qualify to receive. Programs include:

- Medicaid
- Healthy Montana Kids Program (HMK)
- Best Beginnings Child Care Scholarships
- Energy Assistance Program (LIEAP, Weatherization)
- School Lunch Program (Free and Reduced School Lunch)

- Supplemental Nutrition Assistance Program (SNAP)
- Earned Income Tax Credit (EITC)

Social Security Online (www.ssa.gov/disability) features eligibility and application information for SSI (Supplemental Security Income) and SSDI (Social Security Disability Insurance) benefits.

Note Page

Use this page to write down websites you read about in the “Resources” section and that you want to visit.

[illegible]

You have almost finished the workbook, but there is still one very important section to go...



Celebration



Celebration

Congratulations! You have completed the *Planning Your Transition from Pediatric to Adult Health Care* workbook. We hope that by reading and talking about each section with your parents or guardians and your medical providers, you now understand:

- Why it is important to plan for your transition into adult health care
- How to choose an adult health care provider
- What kinds of information your health care professionals need to know about you
- Options for ways you can collect and organize your health care information
- Ways to help pay for your health care costs
- Where to access resources if you want more information

You are ready to assume more responsibility for your health care. Do not be afraid to ask for help along the way...after all, this is YOUR body and you want to take the best care of it you possibly can.

We wish you a successful journey to healthy adult living!



We welcome your feedback on this workbook. If you have any changes, corrections, or information you would like to see added, please contact:

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