AAP Adolescent Telehealth Care ECHO

Leveraging Telehealth to Effectively Care for Adolescents During and After the COVID-19 Pandemic
ACKNOWLEDGEMENTS

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**Housekeeping**

- The lecture will be recorded for educational and quality improvement purposes.
- Please do not provide any protected health information (PHI) during any ECHO session.
- IT trouble? Chat to the AAP Admin.

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- **Introduce Yourself**
  - Please turn on your video!
  - Please enter your name and organization in the chat box.

- **Microphones**
  - Please mute your microphone when not speaking.

- **Agenda**
  - 5 min: Introduction
  - 25 min: Lecture
  - 5 min: QI Review
  - 20 min: Case/Discussion
  - 5 min: Close
Lecture

Maintaining Confidentiality when Caring for Adolescents in a Telehealth Setting

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February 17th, 2021
LEARNING OBJECTIVES

• Review key components of providing confidential care for adolescents (ages 11 – 21).
• Identify important considerations for maintaining confidentiality **before, during, and after** a telehealth visit with an adolescent.
CONFIDENTIALITY AND ADOLESCENT HEALTH CARE

- Adolescents are sometimes unaware of where they can receive confidential services (substance use, reproductive health, mental health services), and that their primary care provider/primary care medical home is an option.
- Adolescents younger than age 18 can consent to several services independently, but this varies by state.
  - For information about minor consent laws regarding reproductive health services by state, visit the Guttmacher Institute.
  - Be sure to review the minor consent laws for various services within your state.

CONFIDENTIALITY AND ADOLESCENT HEALTH CARE, CONTINUED

• Reassurance from the pediatric clinician that care is confidential increases the adolescent’s willingness to disclose sensitive health information.

• Adolescents and young adults may not share critical health information without confidentiality, which can result in foregone care.
  – One study showed that adolescents who reported health risk behaviors and psychological distress were more likely to indicate that concern about confidentiality is a reason to decline care.

• Only 39% of adolescents age 13-18 have discussed confidentiality with their pediatric clinician.


https://downloads.aap.org/AAP/PDF/Adolescent_Health_Investing_in_Adolescent_and_Young_Adult_Health_Booklet.pdf
One-on-One Time: A Review

- One-on-one time between the clinician and adolescent patient should be a part of every visit.
  - *Bright Futures Guidelines for Health Supervision of Infants, Children, and Adolescents* recommends starting the conversation about one-on-one time with patients and parents as early as 11 years old; amount of time alone will vary based on topics and issues addressed.
    - Info Brief for Parents about 1:1 Time
  - Almost half of all American adolescents have never had confidential, one-on-one time with their pediatric health care provider.
    - 32% of adolescents age 13-18, and 63% of young adults age 19-26

*Bright Futures Guidelines for Health Supervision of Infants, Children, and Adolescents, 4th Edition*  
https://downloads.aap.org/AAP/PDF/Adolescent_Health_Investing_in_Adolescent_and_Young_Adult_Health_Booklet.pdf
CONSIDERATIONS FOR CONFIDENTIALITY: BEFORE THE TELEHEALTH VISIT

• Prepare the adolescent (and family) that the adolescent will have time alone with the provider during the telehealth visit.
• Encourage the patient to find as quiet and private of a place to talk as possible
  – Encourage use of headphones, etc.
• Ensure that pre-visit communication is HIPAA-compliant.
  – Use the portal to communicate, when possible.
• Ensure that the telehealth platform is HIPAA-compliant.
Considerations for Confidentiality: During the Telehealth Visit

• Facilitate time alone with the patient during some component of the visit.
  – Have a strategy about how you will communicate this to families/caregivers.

• Discuss confidentiality with the adolescent patient.
  – The AAP has several video examples of what this can look like.
CONSIDERATIONS FOR PRIVACY DURING THE TELEHEALTH VISIT

For Providers

- Only use a HIPAA-compliant, encrypted platform for clinical encounters (exception during current public health emergency).
- In all settings – ensure audio privacy. Close doors and windows; consider headphones.
- Use audio-cancelling or white noise devices outside the rooms if in the non-clinical setting.

For Adolescents and Families

- Assure that family/caregiver and adolescent are aware that you will need 1-1 time (time alone) with the patient.
- Establish who else is present with the patient at the time of the visit.
- Ask the adolescent to use ear buds or headphones if possible, for added privacy.
CONSIDERATIONS FOR CONFIDENTIALITY: AFTER THE TELEHEALTH VISIT

• Billing/Coding
  – “…policies and procedures should be established so that health care billing and insurance claims processes do not impede the ability of providers to deliver essential health care services on a confidential basis to adolescents and young adults covered as dependents on a family’s health insurance plan.”

• Utilize the patient portal for communication with the patient and family after the visit.
  – Make sure that the patient knows about the portal and how to use it.

21ST CENTURY CURES ACT: CONSIDERATIONS FOR TELEHEALTH CARE FOR ADOLESCENTS

• Rules provide a framework to increase types of electronic health information (EHI) accessible to patients and families.
• New rules could enable and empower adolescents to start managing their own health needs through transition into adulthood by making more information.
• Keep in mind: Parents/caregivers could inappropriately gain access to protected adolescent health data, or adolescents could share their own data without fully understanding the implications.
• Pediatric healthcare providers should educate patients and families about how to keep their information secure – this applies to in-person care as well as telehealth care.

ADOLESCENT AND YOUNG ADULT PERSPECTIVES: CONFIDENTIALITY

“What do you want your pediatrician to know about confidentiality/privacy? What is important to you?”

• “A lot of us don’t know the measures that are taken to protect our information – explain more about this to patients.”

• “Explain to us if/how privacy and confidentiality change when we have a telehealth visit. Are different measures being used to keep our information confidential?

• “What are the limits to confidentiality?”

• “Explain how the patient can work to keep their own information private.”

• “We don’t necessarily fully understand all of our options for patient portal communications – what options do I have?”

Source: Young Adult Advisory Panel Meeting, 1/29/2021
SUMMARY

• Providing confidential care is a critically important component to adolescent health care.

• There are several steps that a provider can take before, during, and after the telehealth visit to ensure confidentiality.
**Resources**

- AAP Adolescent Health Care Toolkit
- AAP Interim Clinical Guidance on the Necessary Use of Telehealth during the COVID-19 Pandemic
- AAP Interim Clinical Guidance on Providing Pediatric Well-Care during COVID-19
- AAP Telehealth Support Compendium
- American Telemedicine Association – Operating Procedures for Pediatric Telehealth
- Adolescent Health Initiative at the University of Michigan
  - Many helpful resources, including:
    - Starter Guide: Providing Adolescent-Centered Virtual Care
- Bright Futures National Center
- Building Rapport with Youth via Telehealth
- Coding Fact Sheets (AAP)
  - Coding Fact Sheet (AAP) – Adolescent Health
  - Coding Fact Sheet (AAP) – Telemedicine Services
- Curriculum for a Family-Centered Telehealth Experience - Family Voices
- Guttmacher Institute – State Policies on Teens
- Leadership Education in Adolescent Health (LEAH) Programs
- National Consortium of Telehealth Resource Centers
- US States and Territories Modifying Requirements for Telehealth in Response to COVID-19
- Telehealth 101 – HealthyChildren.org Article
- AAP Telehealth Technical Assistance Email Address: DistantCare@aap.org