

HEALTHY PEOPLE 2020

CRITICAL INDICATORS FOR ADOLESCENTS AND YOUNG ADULTS



Percent of adolescents and young adults who had a well-visit in the past 12 months

Overview

Adolescents and young adults must receive preventive health services for Oregon to move toward its Triple Aim of better care for everyone, lower costs and a healthy population.

Prevention and wellness, nurtured by regular preventive health visits or “well-visits,” are major building blocks to national and state health care transformation. Youth who can easily access developmentally appropriate, evidence-based preventive health services are more likely to be healthy and able to reach milestones such as high school graduation and entry into the work force, higher education or military service.¹

The American Academy of Pediatrics Bright Futures provides the most comprehensive and widely adopted service guidelines for the supervision of infants’, children’s and adolescents’ health.

Linking clinical and community prevention:

The health assessment and prevention topics covered in a well-visit support the Oregon Public Health Division’s priorities designed to make Oregon one of the healthiest states.



Bright Futures recommends annual preventive health visits for adolescents and young adults aged 11 to 21 years.

During a visit, the provider conducts a risk and strength assessment, listens to parent and youth concerns, conducts necessary screening and provides guidance on key health promotion priorities such as family support, healthy weight, nutrition and physical activity, mental health, healthy sexuality development, safety and injury prevention, and oral health. However, research shows that most adolescents and young adults have not had an annual well-visit in the past year. One study using national medical expenditure data found that, between 2001 and 2004, only 38 percent of adolescents 12 to 17 years of age had a well-visit in the past year.²

Adolescent well-visits in Oregon

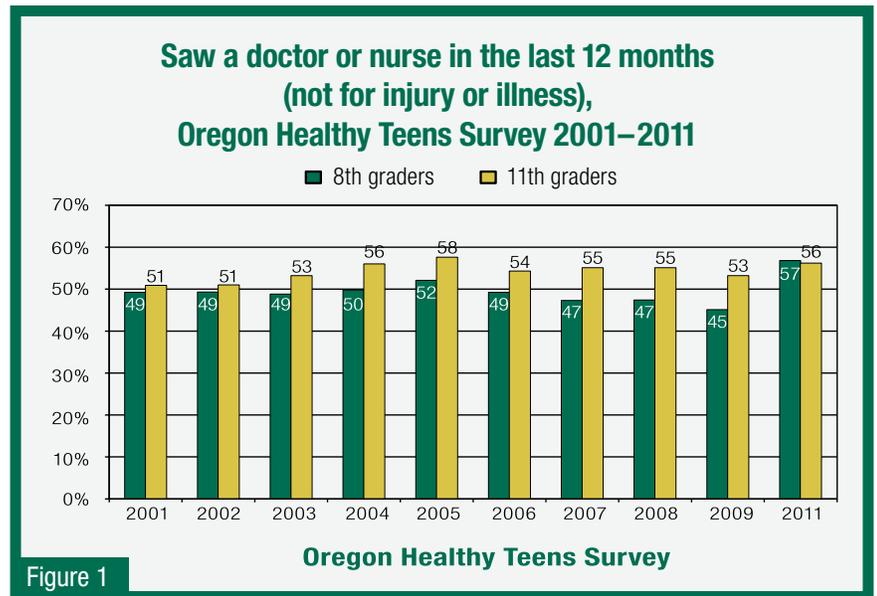
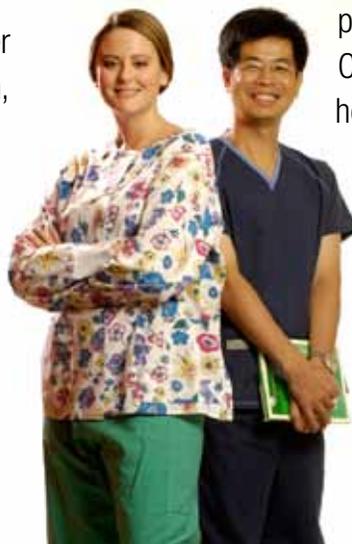
In 2011, just over half of Oregon's eighth and 11th graders had a well-visit in the past year (see Figure 1). Both male and female youth who had a well-visit in the past year reported excellent or very good physical and emotional health more often than youth who had not had a well-visit in that time.³

Why are young people not receiving recommended preventive health services?

Oregon has greatly reduced the number of uninsured children through the Healthy Kids program. However, insurance coverage disparities based on age, race/ethnicity and income still exist.⁴

Other barriers persist for providers and youth, with or without health insurance. Youth, especially those with high-risk behavior, are very concerned about confidentiality.⁵ Other common barriers for youth include lack of transportation or access to a convenient source of care; finding the health care system hard to navigate; lack of culturally, linguistically and youth-friendly providers; and inadequate coordination between providers and referral services.⁶

Providers cite lack of patient interest and lack of time during the visit as the biggest barriers to preventive service delivery, especially counseling-based interventions.⁷ Other barriers are inadequate compensation, absence of clear practice guidelines, and an overwhelming number of recommended services. Providers are also concerned about providing confidential care, responding to youth with risky behavior, and dealing with cultural barriers.⁸



Promoting adolescent preventive health services

Increased focus on preventive health care is a cornerstone of both federal and state health care transformation. The Patient Protection and Affordable Care Act of 2010 extends Medicaid coverage to thousands of young people and allows them to stay on their parents' or guardians' insurance until age 26. The act requires insurance companies cover preventive services without cost sharing and increases payments to primary care physicians.⁹ Oregon Coordinated Care Organizations (CCOs) integrate and deliver physical, mental, dental and preventive health services to Medicaid and Medicare clients. CCOs work to lower costs, strengthen health outcomes and health equity, and improve patient experiences. Patient-centered Primary Care Homes (PCPH) are key to Oregon's health care transformation. In order to focus on prevention and wellness, recognized primary care homes have more funding and support than non-recognized providers have; PCPHs must collect specific outcome data on their population and attest to certain quality standards.

What can policymakers do?

Policymakers can encourage local providers that serve youth to become recognized Patient-centered Primary Care Homes. They can also support quality assurance measures that align with best practice recommendations, and health systems change such as the development of alternative payment structures based on health outcomes rather than patient volume. New payment methods could reduce provider barriers to providing preventive care due to lack of funding and time.

Policymakers can support school-based health centers and school health services, like school nurses. School-based health services help youth stay in school and out of more costly care settings. Investing in these and other youth services will pay dividends in both health and education outcomes.^{10, 11}

What can providers do?

Providers can familiarize all office staff with the consent and confidentiality laws pertaining to minors' rights to access services and health care information. Offices can also create confidential appointment-making, confirmation and billing systems; they can also ensure private time with providers. Posters and handouts showing the office's confidentiality policies and expectations may help patients, parents and providers transition to care that is more confidential. Find sample posters at the Society for Adolescent Health and Medicine's website, www.adolescenthealth.org.



What can parents and youth do?

Open and honest communication among parents/guardians and youth is a vital support to preventive care providers. Because parents are youths' most significant source of health information, they should talk often about topics like relationships, friends, alcohol and drug use, and how things are going in school. Parents and guardians can also ensure youth have an annual well-visit with a trusted provider, and understand the need for private time between the youth and provider.



Resources for providers, parents and youth

PCPCH Program: Find information on certification and standards. www.primarycarehome.oregon.gov/oha/ohpr/Pages/healthreform/pcpch/index.aspx

Bright Futures: Find preventive care guidelines, screening recommendations, a comprehensive risk and strength assessment, tools, and encounters forms for review and download. www.brightfutures.aap.org

Minor Rights in Oregon: This guide provides an overview of federal and Oregon rules regarding minor consent and confidentiality. <http://public.health.oregon.gov/HealthyPeopleFamilies/Youth/Documents/MinorConsent.pdf>

Oregon Public Health Division: Find more information on the Public Health Priorities. <http://public.health.oregon.gov/About/Pages/Goals.aspx>

Children Now: Find information for parents on how to talk with youth about sexuality, drugs, alcohol and other topics. www.talkingwithkids.org

Planned Parenthood Teens: Find important information for youth, including specific information for LGBTQ youth on topics related to reproductive health. www.teenwire.com

Coordinated Care Organizations. Find out about Oregon's CCOs and health transformation efforts. www.cco.health.oregon.gov.

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