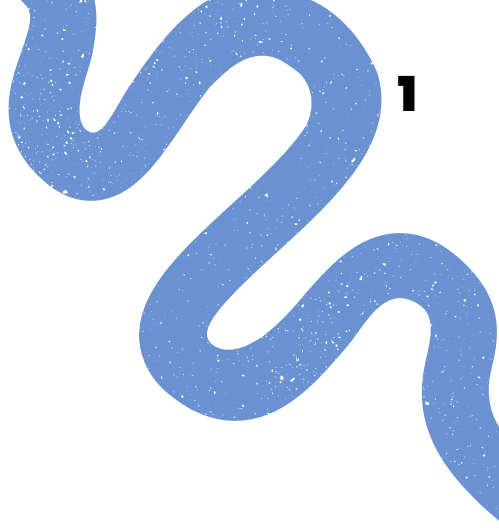
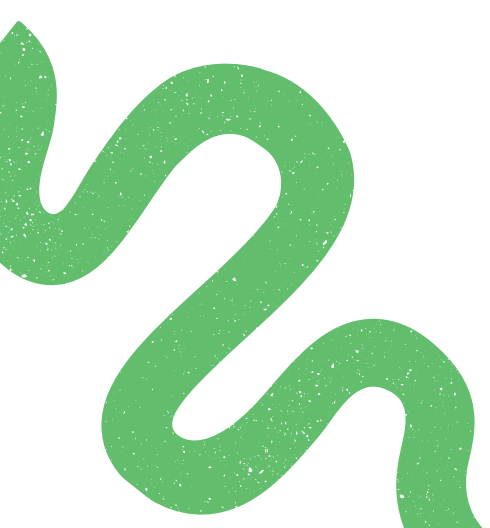




MY HEALTH PASSPORT

**A roadmap for
transitioning from
pediatric to adult care**



CHARLOTTE
COMMUNITY
HEALTH
CLINIC

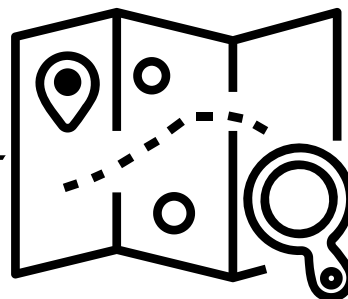


HOW TO & PURPOSE

2

THE CHALLENGE:

When you go to a new doctor, it can sometimes be hard to remember all of your questions and medical history.



THE SOLUTION:

How can we make this transition easier? We created this passport to organize your medical information and help you work towards your health goals.

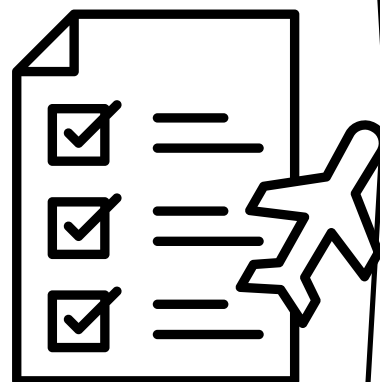


HOW SHOULD YOU USE THIS PASSPORT?

This book can be a helpful way to manage your health. It is a good idea to bring this passport to every appointment and record your health journey!

You can use it to:

- Prepare questions before doctor's visits
- Look back at your medical history while you are at your provider's office
- To show to your nurse or doctor so they can help you update your records
- Improve communication between you and your doctor or provider team
- Help you keep track of your medications
- Help you set and achieve health goals



A **special thank you** to the Innovative Approaches steering committee— Ana A., Ayonna M., Amarei P., Alanis R., Fernando V.M., Jessica A., Cherine B., Liddy P., Jade T., and Tamara Z.— whose ideas, feedback, and creativity made this health passport possible.

See back cover for disclaimer.

ABOUT ME

MY PERSONAL INFORMATION



LEGAL NAME:

PREFERRED NAME:

MY BIRTHDAY:

PHONE NUMBER:

HOME ADDRESS:

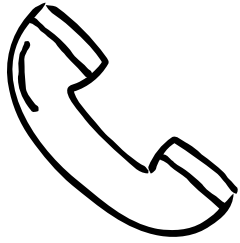
ALLERGIES (& TYPE OF REACTION)

- ☐
- ☐
- ☐
- ☐
- ☐



MY LIKES:

MY DISLIKES:



ABOUT ME

MY EMERGENCY CONTACTS

EMERGENCY CONTACT #1

NAME:

THEY ARE MY:

PHONE NUMBER:

OTHER PHONE NUMBER:

EMERGENCY CONTACT #2

NAME:

THEY ARE MY:

PHONE NUMBER:

OTHER PHONE NUMBER:

ABOUT ME

MY HEALTH HISTORY

MEDICAL CONDITION OR SURGERY:

DATE:

NOTES:

MEDICAL CONDITION OR SURGERY:

DATE:

NOTES:

MEDICAL CONDITION OR SURGERY:

DATE:

NOTES:

WHAT IF I HAVE MORE MEDICAL CONDITIONS OR SURGERIES?

This is a great opportunity to learn how to use your online portal or MyChart! Many doctor's offices have an "electronic health record" where you can store even more health data. You can put your most important or recent conditions in your health passport. Then add these and anything else to your online chart!



MY DOCTORS

NAME:

PHONE NUMBER:

ADDRESS:

NOTES & REMINDERS:



An example reminder could be to remember to ask for their emotional support dog. Another reminder might be to arrive early to find parking.

RATING:



MY DOCTORS

NAME:

PHONE NUMBER:

ADDRESS:

NOTES:

HELPFUL HINTS:

HOW DO I PICK A DOCTOR?

Your insurance company will tell you which providers are “in-network” and not in network. To get the most affordable care, it’s usually best to find an in-network provider. You can do this by looking at your insurance’s website.

As a child, you’ll likely see a pediatrician. But, as you get older, you can pick your primary care provider (or PCP). Some people choose an OBGYN or internal or family medicine.

In addition to have a primary care doctor, you might have specialists who focus on just one part of the body. This includes eye doctors, dentists, nutritionists, and more.

RATING:



MY DOCTORS

8

NAME:

PHONE NUMBER:

ADDRESS:

NOTES & REMINDERS:

RATING:



NAME:

PHONE NUMBER:

ADDRESS:

NOTES & REMINDERS:

RATING:



NAME:

PHONE NUMBER:

ADDRESS:

NOTES & REMINDERS:

RATING:



NAME:

PHONE NUMBER:

ADDRESS:

NOTES & REMINDERS:

RATING:



MEDICATIONS CHECKLIST

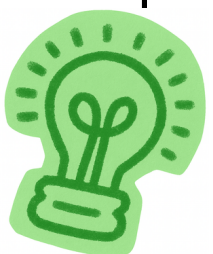
Medication Name	Dose (strength)	Times per Day	Reason for use	I still take this. (yes/no)

HELPFUL HINTS: MEDICINE SAFETY

Be sure to take your medications exactly as your doctor tells you to! If you have a side effect from a medication, be sure to let your doctor know as soon as possible. That way, your doctor can adjust your medication instead of stopping it on your own.

HELPFUL HINTS: USE YOUR HEALTH APP

Most smartphones have a medication section of your health app. You can use this to keep track of what medications you take. You can also set special alarms on your phone to remind you to take your medications.



MY INSURANCE

10

You might have a medical, dental, vision or pharmacy insurance card. Carry a copy of your insurance cards and write in your important details.

LAST UPDATED ON:

HELPFUL HINTS: UPDATING YOUR INSURANCE CARD

Some insurance companies will send you a new card every year. It is a good idea to log in to your website in January and see if any of your information has changed.

WHAT DO I DO IF I DON'T HAVE HEALTH INSURANCE?

Not all families have insurance coverage. Some community health clinics offer a sliding scale or self-pay discount. You can search for free or low-cost health care in your area. These clinics may also have trained "navigators" to help you or your family get insurance.

MY INSURANCE

11

You should know where to find these important details on your insurance card:

Member name and member ID number: This might only show the subscriber's name (your parent). Some cards might also have the covered dependent's name (your name). You might need to confirm the subscriber's name and birthday!

This is "coverage verification data" that your doctor's office will ask for. It might also have the date that the plan became effective.

Sample National ID Card

BlueCross BlueShield		Product Name	
Member Name JOHN DOE		OFFICE VISIT \$20	
Member ID Number IDC3HZN12345678		SPECIALIST \$30	
GROUP NUMBER 75999-0000		EMERGENCY ROOM \$125	
TYPE FAMILY		INPATIENT HOSP COPAY \$500	
BC/BS PLAN CODES 280/780		EMERGENCY ROOM \$50	
		INPATIENT HOSP COPAY \$500	
		RXBIN 016499	
		RXPCN HZRX ISSUER (80840)	
		RXGRP 075990000	

This is the name of your plan.

The **copay** is how much you will pay each time you are seen by a different doctor. Notice how the cost changes based on where you receive care.

Horizon

www.horizonblue.com/nationalaccounts

For Member Use Only

Member Services	1-800-355-2583
Behavioral Health Services	1-800-626-2212
Provider Locator	1-800-810-2583
24/7 Nurse Line	1-888-624-3096
Dental Customer Line	1-888-624-6825

For Provider Use

Utilization Management	1-800-664-2283
Provider Services	1-800-624-1110
Pharmacists	1-877-686-6875

MEMBER CLAIM FILING:
HORIZON BCBSNJ
PO BOX 1219
NEWARK, N.J. 07105-1219
*Medicare members submit claims to Medicare first.

AN INDEPENDENT COMPANY ADMINISTERING PHARMACY BENEFITS.

7 Hospitals or Providers: File Claims with local Blue Cross and/or Blue Shield Plan.

8 PRIME THERAPEUTICS

9 Members: See your Benefit Booklet for covered services. Possession of this card does not guarantee eligibility for benefits.

10 Horizon Blue Cross Blue Shield of New Jersey is an independent licensee of the Blue Cross and Blue Shield Association. Insured by Horizon BCBSNJ.

11 A network administrator outside of the Horizon service area.

Most of the information on the back of the card is only for doctor use. However, it can be helpful to know where you find your plan website and important phone numbers.

WHO CAN HELP ME UNDERSTAND MY INSURANCE?

If you have insurance questions, you can ask your parents or call your insurance company. Another option is to reach out to a health insurance navigator. Navigators are federally-licensed experts who provide free services. They can answer your questions, find a plan that works best for you, and help you sign up for health insurance.

HOW DO MOST YOUNG PEOPLE GET HEALTH INSURANCE?

Most teens are on their family insurance plan. This could be from their parent's job, from CHIP/Medicaid, or from a Marketplace plan. Becoming in charge of your own health insurance is one of the last steps of the health care transition.

HOW LONG CAN I STAY ON MY PARENT'S INSURANCE PLAN?

Most young adults can stay on their parents' insurance until they are 26 years old.

There are some common exceptions:

- Some Medicaid and CHIP plans for children may end at age 19. This is known as "aging out."
 - If you lose CHIP coverage, you have 60 days to enroll in a new plan through the Marketplace.
- If you turn 18 and start a job that provides insurance, moving to your own plan may cost less.
- If you move out of state for college or a job, your insurance policy from your home state might not cover you.

APPOINTMENT TIMELINE

12

WHAT SHOULD I BRING?

- ☐ **AN AGENDA WITH:**
 - Your concerns, questions, and goals (for example: your foot has been hurting, you need a medication refill, and you want your flu shot)
 - It's good to keep these in a short list on your phone or a sheet of paper
- ☐ **YOUR COMMUNICATION TOOLS**
 - Anything that helps you communicate with your doctor! (eyeglasses, hearing aids, pen and paper, your health passport, etc.)
- ☐ **YOUR MEDICAL HISTORY**
 - This includes your **recent medical changes and your medications to review**
 - Medications: all the prescription drugs, over-the-counter medications, vitamins, and herbal supplements you take. It is important to include the doses of each medication.
 - If you have a preferred pharmacy, make sure you have the address written down.
 - If you have a chronic condition, it might be helpful to bring a symptom journal. This journal can include your symptoms, how often they occur, and their intensity.
- ☐ **IDENTIFICATION & INSURANCE:**
 - You will need a **valid photo ID (driver's license/passport) and your current insurance card**. This will be either yours or your parents'.

DID I CONFIRM THE:

APPT DATE:

APPT TIME:

ADDRESS:

DID I FILL OUT ANY ONLINE FORMS AHEAD OF TIME?

- These might be in your patient portal. You can always call and ask the doctor's office if they need anything from you before your visit!

TYPICAL APPOINTMENT FLOW

1. **Arrive** 10-15 minutes early and **check in** with the front desk
2. Fill out any necessary **paperwork**
3. **Wait** to be taken back to your exam room
4. Do an initial **intake** with the medical assistant or nurse
 - a. They'll walk you to your room and check your vitals (height, weight, blood pressure, & more). They will also ask about the reason for your visit. This is your opportunity to start to bring up some concerns!
5. **Wait** for the doctor
6. Have **your visit** with your doctor
 - a. Your visit could include a review of your health history, a physical exam, and time to talk about your concerns
 - b. Through your healthcare transition, the doctor might ask your parent or guardian to leave the room for part of your visit
7. Stop at the **check out** on the way out to pay or schedule your next appointment
8. Be on the lookout for any **emails** or **notifications** from your doctor with lab or test results, and more

HELPFUL HINTS: PRIVACY QUESTIONS

As you get older, your doctor might start to ask your parent or guardian to leave the room for part of the visit. The doctor might talk to you on your own and ask you about some sensitive topics. These could include drug, vape, or alcohol use, sexual activity, and eating behaviors. They could ask you about mental health and if you feel depressed or have suicidal thoughts. They may also ask if you feel safe at home, school, in romantic relationships, and with friends.

Everything you say to a health care provider will stay private unless it relates to your safety or the safety of someone else.

APPOINTMENT CHECKLIST

DO I HAVE MY:

- ☐ Identification and insurance
- ☐ Relevant health history & medication list
- ☐ Questions and concerns
- ☐ Space to take notes
- ☐ -----

DOCTOR'S ADDRESS:**APPT DATE:****APPT TIME:****VIBE**

○ ○ ○ ○ ○

MY QUESTIONS☐☐☐☐☐**DOCTOR RESPONSES**☐☐☐☐☐**NOTES:**

APPOINTMENT CHECKLIST

DO I HAVE MY:

- ☐ Identification and insurance
- ☐ Relevant health history & medication list
- ☐ Questions and concerns
- ☐ Space to take notes
- ☐ -----

DOCTOR'S ADDRESS:**APPT DATE:****APPT TIME:****VIBE**

○ ○ ○ ○ ○

MY QUESTIONS

- ☐
- ☐
- ☐
- ☐
- ☐

DOCTOR RESPONSES

- ☐
- ☐
- ☐
- ☐
- ☐

NOTES:

APPOINTMENT CHECKLIST

DO I HAVE MY:

- ☐ Identification and insurance
- ☐ Relevant health history & medication list
- ☐ Questions and concerns
- ☐ Space to take notes
- ☐ -----

DOCTOR'S ADDRESS:**APPT DATE:****APPT TIME:****VIBE**

○ ○ ○ ○ ○

MY QUESTIONS☐☐☐☐☐**DOCTOR RESPONSES**☐☐☐☐☐**NOTES:**

ABOUT ME

MY HEALTH HISTORY

TEST OR LAB:

DATE:

RESULTS:

TEST OR LAB:

DATE:

RESULTS:

TEST OR LAB:

DATE:

RESULTS:

TEST OR LAB:

DATE:

RESULTS:

ABOUT ME

17

MY HEALTH HISTORY

PULSE:

DATE & RESULT:

☐
☐
☐
☐☐
☐
☐
☐

WEIGHT:

DATE & RESULT:

☐
☐
☐
☐☐
☐
☐
☐

BLOOD PRESSURE:

DATE & RESULT:

☐
☐
☐
☐☐
☐
☐
☐

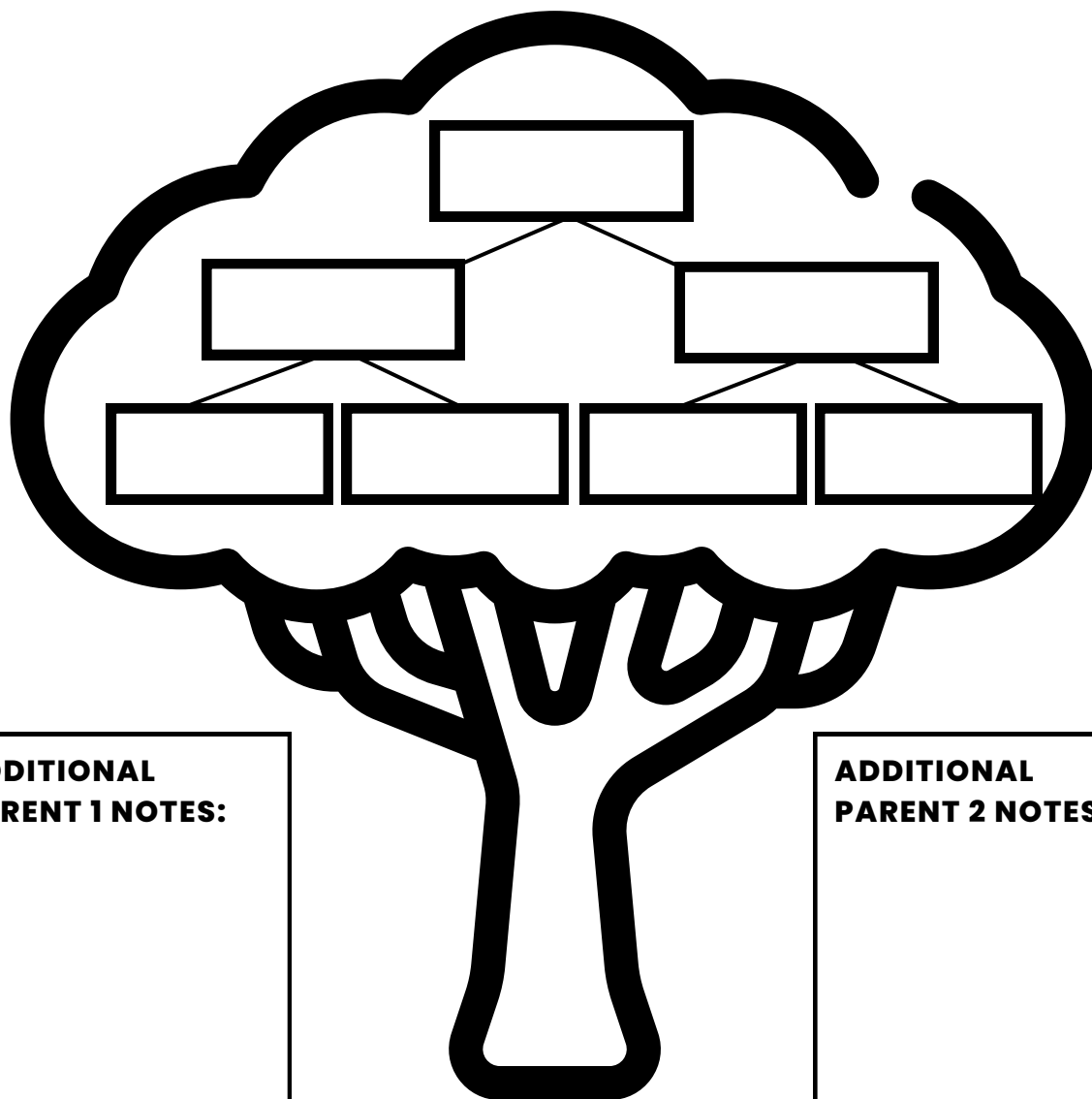
HELPFUL HINTS: USING YOUR PATIENT PORTAL

Many doctors use a patient portal, such as MyChart. This portal allows you to access your "electronic health records." These records include your test results and medication lists. Many will also let you message your doctor, schedule appointments, and ask questions. Making sure you have access to your own medical portal is a great step for taking charge of your healthcare.

MY FAMILY HEALTH HISTORY



It's ok if you don't know your whole family history! Use this as a reminder to ask your parents or relatives to make sure you have the whole picture.



**ADDITIONAL
PARENT 1 NOTES:**

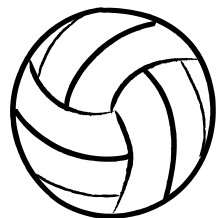
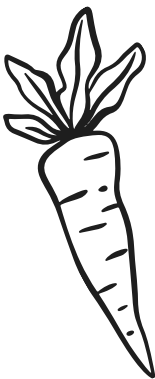
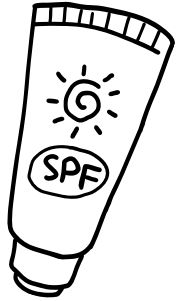
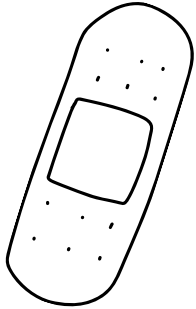
**ADDITIONAL
PARENT 2 NOTES:**

HELPFUL HINTS: WHAT SHOULD I INCLUDE?

Write down what health conditions are common in your family. These can include heart disease, high blood pressure or high cholesterol. Other examples include mental health conditions, learning disabilities, or asthma. Check if your family has a history of diabetes or cancer. If you can, write down age at diagnosis, cause of death, and age at death. Include your parents, aunts, uncles, grandparents, cousins, and siblings.

NOTES

19





Here are some skills you can practice at different ages! Keep in mind that the health care transition looks different for everyone.

AGES 12–13

- Learn about your allergies, health conditions, and medicines
- Talk to your doctor about the health care transition and when you will have to move to an adult doctor
- Start asking your doctor questions about your health.

AGES 14–15

- Start talking to the doctor alone for part of the visit
- Learn more about your health history and your family health history
- Carry a copy of your insurance card
- Learn what to do if you have a health emergency!

AGES 16–17

- Practice skills like ordering prescription refills, seeing the doctor alone, and making appointments
- Talk to your doctor about changes in privacy rights at age 18
- Make a medical summary with the help of your doctor

AGES 18–21

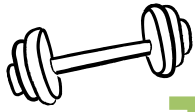
- When you turn 18 you are a legal adult and are legally in charge of your health care
- If your doctor doesn't see adults, work with them to find an adult doctor
- Call your new adult doctor and schedule your first appointment

AGES 22–25

- Keep seeing your adult doctor and taking care of your health
- Make sure to stay insured and explain any insurance changes to your doctor!

WHAT IS THE HEALTH CARE TRANSITION?

This the process of moving from a doctor for kids (pediatrician) to a doctor for adults! You will also gain more responsibility for your health during this process.



MY HEALTH CARE TRANSITION GOALS



21

Which skills on the previous page do you need more practice on?
Feel free to use this space to set any individual goals you want to work towards!

GOAL 1:		
START DATE:	TARGET DATE:	PROGRESS: ○ ○ ○ ○ ○
PEOPLE OR RESOURCES THAT CAN HELP ME:	STEPS TO TAKE: ☐ ☐ ☐ ☐ ☐	

GOAL 2:		
START DATE:	TARGET DATE:	PROGRESS: ○ ○ ○ ○ ○
PEOPLE OR RESOURCES THAT CAN HELP ME:	STEPS TO TAKE: ☐ ☐ ☐ ☐ ☐	

GOAL 3:		
START DATE:	TARGET DATE:	PROGRESS: ○ ○ ○ ○ ○
PEOPLE OR RESOURCES THAT CAN HELP ME:	STEPS TO TAKE: ☐ ☐ ☐ ☐ ☐	

RESOURCE LIST

Here is a list of resources that might be useful to have for yourself or a friend.

EMERGENCY SERVICES

- Call 911 for any immediate medical emergency or if you or someone else is in danger. You can also go to your nearest emergency room at any time.

SUICIDE AND CRISIS

988 Suicide & Crisis Lifeline

- Free, confidential support for people in distress. They have a dedicated Spanish line. There is also an online chat option that is available 24/7.
- Call or text 988 or visit 988lifeline.org

MENTAL HEALTH

National Alliance on Mental Illness

- This is not a crisis line. They offer information, guidance, support, and referrals for mental health conditions.
- Call 1-800-950-6264 (Mon–Fri, 10am–10pm ET)
- Text NAMI to 741741 or visit nami.org

Teen Line

- This is not a hotline for emergencies. However, it's a great place to talk with a trained teen volunteer about everyday problems.
- Call 1-800-852-8336 (6–10pm PT)
- Text TEEN to 839863 (6–9pm PT) or visit teenline.org

National Alliance for Eating Disorders helpline

- Support, information, and referrals for treatment.
- Call 1-866-662-1235 or visit allianceforeatingdisorders.com

HEALTH CARE TRANSITION RESOURCES:

Got Transition is a great hub for all things health care transition! Visit gottransition.org for podcasts, videos, and guides for teens and parents.



YOUR EXISTING RESOURCES:

You should tap into resources that are already around you! You can talk to your pediatrician, other healthcare specialists, school nurse, and school counselor. Your parents, caregivers, and other trusted adults can also be a resource! There might even be a teen support system at your school.

SUBSTANCE ABUSE AND VIOLENCE

Substance Abuse and Mental Health Services Administration (SAMHSA)

National Helpline

- Free help for mental health and substance use concerns.
- Call 1-800-662-4357 or visit samhsa.gov

Childhelp National Child Abuse Hotline

- 24/7 help for abuse and neglect situations.
- Call 1-800-422-4453 or visit childhelp.org

National Domestic Violence Hotline

- Safe, confidential support for any kind of relationship abuse.
- Call 1-800-799-7233 or text START to 88788

RAINN Sexual Assault Hotline

- Private support from trained staff members.
- Call 1-800-656-4673 or visit rainn.org

HELPFUL HINTS

23

WHERE TO FIND RELIABLE ANSWERS TO YOUR HEALTH QUESTIONS

Do you know how to spot a trustworthy health website? Look for .gov, .edu, or major medical organizations (.org from recognized institutions). Check if the page shows who wrote it, when it was last updated, and cites sources. Be cautious of sites selling products or using extreme language. You can always reach out to your doctor's office when needed.

KNOW YOUR RIGHTS: PRIVACY AT YOUR APPOINTMENTS

In most states, teens can get private care for sensitive topics. These can include mental health, sexual health, and substance use. Each state has different laws, but you can ask your provider "What can we talk about that stays between us?" and "What information will you share with my parents or caregivers?"

HOW TO SET UP YOUR MEDICAL ID:

Medical ID lets first responders see your health information during an emergency. It can also be a way to track your medical information.

On iPhone

1. Open the Health app and tap the Summary tab.
2. Tap your profile picture in the upper corner.
3. Under your profile picture, tap Medical ID.
4. To make your Medical ID available from the Lock screen, turn on Show When Locked.
 - a. Turn on "Share During Emergency Call" if you want to share your Medical ID when you call 911.
5. Tap Edit or Add next to the field you want to update.
 - a. You can add medications, allergies, and any health conditions you have.
 - b. You can add your Emergency Contacts.
6. Tap Done.

On Android phones

Each phone is different, but general steps include:

1. Open Settings
2. Search and see if one of these options is available:
 - a. "Safety and emergency"
 - b. "Emergency information"
 - c. "Medical info"
3. Tap the matching option.
4. Add:
 - a. Medical conditions, Allergies, Medications, Blood type, Emergency contacts
5. Save your information.
6. If there is an option, make sure that "Show on Lock screen" button is turned on



START THE CONVERSATION



24

HEALTHCARE TRANSITION (HCT) ADVOCACY PLEDGE

I PLEDGE TO TAKE CHARGE OF MY HEALTHCARE FOR MY HEALTHCARE TRANSITION BY:

☐

Talking with a friend about how to prepare for the healthcare transition (HCT)

☐

Starting the conversation with my caregiver about the HCT and my family history

☐

Practicing a HCT skill: _____

SIGNED: _____

DISCLAIMER AND ACKNOWLEDGEMENT

This Health Passport is intended solely as a **personal health navigation and educational tool**. It may contain personal, medical, insurance, medication, appointment, or other health-related information voluntarily entered by the patient, parent/guardian, or healthcare provider. This document is not an official medical record and does not replace professional medical advice, diagnosis, or treatment.

By using this Health Passport, you acknowledge and agree that:

- You are solely responsible for the accuracy, maintenance, and security of the information contained in this document.
- Once this Health Passport is provided to you or placed in your possession, Charlotte Community Health Clinic and its employees, providers, affiliates, and representatives are not liable for any loss, theft, unauthorized access, disclosure, or misuse of the information contained within it.
- If this Health Passport is lost, misplaced, shared, stolen, or viewed by unauthorized individuals, any resulting disclosure of information shall not constitute a violation of HIPAA, patient confidentiality obligations, or patient privacy rights by Charlotte Community Health Clinic.
- Information collected or recorded in this passport is used only for health navigation and educational purposes.
- Participation and use of this Health Passport is **entirely voluntary**. You may leave any section blank without penalty, loss of services, or exclusion from available program benefits.

By accepting, retaining, or using this Health Passport, you confirm that you have read, understood, and agreed to the terms of this disclaimer.



CHARLOTTE COMMUNITY HEALTH CLINIC