Confidentiality Protections for Adolescents and Young Adults in the Health Care Billing and Insurance Claims Process

**Background:** The Affordable Care Act (ACA) has expanded health coverage for many, including young adults who can remain on their parents’ insurance until 26 years of age. Under the ACA, the Department of Health and Human Services requires new health plans to cover specific preventive services, including improved screening and counseling for cervical cancer and sexually transmitted infections and full range of Food and Drug Administration-approved contraceptive methods and reproductive counseling.

Confidential services are important. Protecting confidentiality for minors and young adults is critical to encouraging those individuals to access health care needed to prevent negative health outcomes. Organizations that support the importance of confidentiality includes American Academy of Pediatrics, American Academy of Child and Adolescent Psychiatry, Society for Adolescent Health and Medicine, American College of Obstetricians and Gynecologists, and the American Medical Association.

Wisconsin legislature recognizes the importance of confidential health care, for both minors and adults. Wisconsin state laws allow people under the age of 18 years to consent to contraception (Carey v. Pop. Srvcs., 431 US 678 (1977)), pregnancy testing and obstetrical care (Wis. Stats. §48.981(2m)(b)2, §146.82(1), §146.81(5)), sexually transmitted disease testing and treatment (Wis. Stats. §252.11(1m), §146.82(1), §146.81(5)), HIV testing (Wis. Stats. §252.15(3m)(c)), alcohol and other drug abuse evaluation and treatment (Wis. Stats. §51.47(1), §51.30(4)(b)20, Wis. Admin. Code HFS 92.06(2), 77 Op. Att’y Gen. 187, 189-191 (1988)), and sexual assault evaluation and treatment (Wis. Stats. §146.82(1), §146.81(5)).

In addition to state laws, federal laws provide confidentiality protection. HIPAA privacy regulations contain significant privacy protections for adolescents and adults seeking confidential health care. HIPAA regulations require consent of patients greater than 18 years of age before confidential health information is disclosed to others (including family members). However, an exception in HIPAA allows for, but does not require, the disclosure of protected health information without an individual’s authorization when such disclosure is necessary for payment.

Insurance claims information, including explanation of benefits (EOBs), are intended to protect policyholders and insurers, but can have unanticipated and unintended negative consequences. EOBs, which are sent to the policyholder, may include health services rendered, name of the provider, and specific laboratory tests. The release of this information to someone other than the person receiving these services can break confidentiality. The possibility of breach in confidentiality may contribute to delays in
seeking health care, specifically regarding confidential services. Delays in seeking health care may lead to negative outcomes, including unintended pregnancies, sexually transmitted infections, and severe consequences of alcohol and other drug use.

Several states have adopted provisions to address confidentiality in healthcare billing and insurance claims process. Approaches include identifying situations where EOBs to not need to be sent (for example, when no balance is due from the policyholder) and sending EOBs for sensitive series directly to the patient by a method determined by the patient (including alternate address and/or electronic delivery).

**Position:** The Wisconsin Chapter of the American Academy of Pediatrics (WIAAP) supports the following recommendations:

1. Health care providers should be able to deliver confidential health services to consenting adolescents and young adults covered as dependents under a family’s health insurance plans.
2. Policies and procedures should be established to ensure the health care billing and insurance claims processes do not impede the confidential provision of health care services to adolescents and young adults.
3. Sending of explanation of benefits or other similar notices should not be required when individuals insured as dependents obtain sensitive services.
4. Health insurance plans and health care providers should collaborate to develop simplified mechanisms that allow individuals insured as dependents to receive confidential care.
5. Health insurers and government agencies should provide information to adolescent and young adult patients and health care providers about ways in which the billing process can result in inadvertent disclosure of otherwise confidential information, as well as ways to avoid unintentional disclosures of confidential information.

**Resources**

Joint statement by the American Academy of Pediatrics and the Society of Adolescent Health and Medicine
http://www.jahonline.org/article/S1054-139X(15)00723-5/fulltext