## TRANSITIONS FROM PEDIATRIC EPILEPSY TO ADULT EPILEPSY CARE

Adolescent with significant developmental disability (independence unlikely)

Age	12-13 yrs old*	14-15 yrs old*	16-17 yrs old*	≥ 18 yrs old*
Overall	Discuss transition plan and practical plans for adult life (e.g., living situation, employment)	Discuss transition plan and practical plans for adult life (e.g. living, employment).	Review transition plan. Identify an adult neurologist. Create transition summary/note.	Implement adult model of care. Review transition plan and update Accepting neurologist. Update transition summary/note
Medical Management	Verify epilepsy diagnosis, continued need for treatment. Determine seizure classification and etiology. Clarify prognosis.	Consider medication taper/change for reproductive considerations.	Identify a primary care physician.  If patient has specialized needs (e.g., ketogenic diet management, significant behavioral problems), we recommend early planning on whether an adult provider is available. Location dependent.	Consider joint visit with child + adult neurologists. Patients with severe disability may require delayed transition (based on family/ neurologist comfort and insurance coverage).
Testing	Assess need for repeat EEG, MRI, frequency of monitoring labs, frequency of follow up visits.  Consider surgical workup/epilepsy surgical center referral.	Same	Same	Same
Childbearing	Educate patient caregivers about folate	Discuss contraception (may need	Same	Same
Considerations	and initiate supplementation.	antiseizure medication adjustment).		
Billing/Coding (physician specific)**	Transition specific billing and coding 99424, 99425 (principal care management for single high-risk disease); 99437 (add on code for added care time to 99491, care management services) ICD-10 diagnosis cod Z71.87 (encounter for pediatric-to-adult transition counseling)		Same For joint telehealth transition visits consider CPT 99215-95 (pediatrician) and 99205-95 (adult physician).	
Independence	Discuss plan with caregivers to developing responsibility and independence as able.  - Know medications, doses, time, seizure trackers  - Discuss SUDEP (SUDEP - Child Neurology Foundation)  - Safety (sports, camps, baths) for developmental level  - Encourage good health practices: exercise/mobility, weight bearing as able, PM&R or therapy referrals if needed, sleep, alcohol, drugs, sexuality  - Monitor co-morbidities - ADHD, learning difficulties, behavioral and sleep disorders  - Educate about vitamin D		Discuss or review plans were caregivers and patient as able.  - Medication administration, maintain calendar, how to report need for prescriptions  - Discuss SUDEP (SUDEP - Child Neurology Foundation  - Discuss plan for establishing with adult PCP  - Bullying, physical, or sexual abuse  - Encourage good health practices: exercise/mobility, sleep, alcohol, drugs, sexuality, pregnancy  - Living situation: group home, family, independent with support  - Consider guardianship or medical power of attorney  - Insurance coverage, applying for SSI	
Quality of life	Encourage appropriate teen activities as developmentally appropriate (with family, school, community, Epilepsy Foundation support).		Advise as able on employment and/or vocational rehab. Encourage engagement with community, family, Epilepsy Foundation).	
Education	Develop school educational plan/support. Review IEP results. Consider need of further testing (neuropsychological evaluation and/or school-based test		Develop school educational plan/support, review IEP, consider further testing.  Discuss post-secondary education, vocational training.	
Emergency plan	Develop emergency care plan for community when caregivers not present (update seizur action plan, rescue medications, consider medical alert bracelets, phone apps, seizure detection devices).		Same Consider community training in epilepsy management (available through Epilepsy Foundation).	
Participation	Encourage participation in interview and exam, as able.	Same	Same	Same

<sup>\*</sup>Age of task may vary with maturity. \*\*2023 Transition Coding and Payment Tip Sheet (gottransition.org). Adapted from PMID 21708806, 23476118. Resources for Providers - Child Neurology Foundation.