



The Alabama Pediatrician

Fall 2014

From the President

Still in the game for
child health in Alabama



Michael J. Ramsey, MD, FAAP
Chapter President

It is hard to believe, but we are halfway through my term as president of the Alabama Chapter-AAP. Since it is football season, I guess I should say that it is halftime-time to look back on our first year together, and make plans for the year ahead.

Last year, our major program emphasis was on social media through the *Choose to Have a Healthy Family, Alabama* campaign. At the end of the project, we had almost 30 pediatricians contribute more than 90 videos on various health topics. The most exciting thing was that we reached *thousands* of different people with these messages (we checked the Facebook statistics!). It would take the average pediatrician saying the same thing to every patient they saw more than two years to have that kind of reach on just one topic! I am so pleased that this program went so well. We are going to recycle some of the videos and articles this year and keep the site going. Please check out the Facebook page here: tinyurl.com/nvplcdt. Also, if you really want to be inspired, check out the year-end compilation video (see QR code on page 5). Many thanks go to Adam Muhlendorf, Salina Taylor and Megan Brennard, MD, for all their help.

After the Annual Meeting, I had a physician ask me why we spent so much time on the topic of poverty. When we look at the changing morbidity of children (obesity, ADHD, school failure, asthma, anxiety, etc.), the common denominator in all of these conditions is poverty. If we fail to effectively address poverty in our patients, we will continue to fight a frustrating battle that we currently seem

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2014 Annual Meeting brings top-notch education, highlights accomplishments

Pediatricians from across the state came together for yet another successful Annual Meeting and Fall Pediatric Update at the Hyatt Regency Birmingham-The Wynfrey Hotel in late September, which featured a Friday practice management workshop, sponsored by the AL-AAP Practice Management Association, a Chapter business meeting on Saturday and the annual awards dinner in association with Children's of Alabama.

With addressing poverty as one of the



MITCH COHEN, MD, FAAP, the new Chair of the Department of Pediatrics at UAB, shares his vision for the Department during his keynote address.

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Make sure your calendars are marked: 2015 Spring Meeting, April 30-May 3

Conference will feature second annual Grand Pediatric Pentathlon Benefiting Reach Out and Read

April 30 – May 3, 2015 • Sandestin Golf & Beach Resort

The Chapter executive office and CME Chair David Gremse, MD, FAAP, are looking forward to our 2015 Spring Meeting, to be held at the Sandestin Golf & Beach Resort, April 30 – May 3, 2015.

The educational line-up for the conference is shaping up nicely: the meeting will feature respected national and in-state faculty, who will address obesity, Type II diabetes, motivational interviewing, transitions to adult care, AAP policy statement on school start times, appropriate use of antibiotics and the risks of overprescribing antibiotics, emerging infections, nephrology and more! New AAP President Sandra Hassink, MD, FAAP, will join us.

In addition to a Saturday evening “dinner on the green,” networking opportunities include our second annual Grand Pediatric Pentathlon benefitting Reach Out and Read, which was a huge hit last year among participants. Once again, the event will afford attendees, family members and exhibitors the opportunity to participate in five events at their own pace—bicycling, swimming, kayaking, walking/running and reading—to become eligible for great prizes.

Pentathlon Dri-Fit™ T-shirts will be available to both participants and non-participants with a minimum donation of \$50 to Reach Out and Read; registration will be available as part of the general meeting registration, which will begin in January.

Make plans to attend now—we'll see you in Sandestin!



**The Grand
PEDIATRIC
PENTATHLON**
Benefiting Reach Out and Read

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Alabama Chapter – AAP**Mission:**

The mission of the Alabama Chapter of the American Academy of Pediatrics is to obtain optimal health and well-being for all children in Alabama, and to provide educational and practice support for its membership so the highest quality of medical care can be achieved.

Values:

Children must be highly valued by society.

Each child must develop to his/her highest potential.

Children must have strong advocates for they have no voice of their own.

Pediatricians are essential to achieving optimal child health. The work of pediatricians, and the profession of pediatrics, must endure and grow even stronger.

Vision:

Children in Alabama are happy and healthy; Alabama pediatricians are professionally fulfilled and financially secure.

ACHIA body of work develops to assist pediatricians in measuring and improving quality

Obesity QI project kicks off with 10 practices participating

By E. Cason Benton, MD, FAAP, Medical Director, Alabama Child Health Improvement Alliance

The Alabama Child Health Improvement Alliance's (ACHIA) most recent quality improvement (QI) collaborative is underway with more than 50 physicians from ten practices across the state working together to implement best practices for obesity prevention and treatment.



The Healthy Active Living (HAL) collaborative got off to an energetic start at the Bradley Lecture Center at Children's of Alabama in August with a Jazzercise session led by Jasmine Pagan, MD, a UAB Adolescent Fellow and one of the HAL participants. HAL faculty include Stephanie Wallace, MD, FAAP, Children's Weight Management Clinic, Bonnie Spear, PhD, an original member of the American Academy of Pediatrics' Obesity Expert Committee, Daniel Preud'homme, MD, FAAP, USA Healthy Life Center and Cason Benton, MD, FAAP, ACHIA Medical Director.

HAL participants pediatricians and their staffs at 10 practices across the state—are tracking data to be sure well-child visits include counseling for nutrition and physical activity, as well as include correct weight (BMI) and blood pressure classification. Over the course of the year-long collaborative, doctors are learning additional ways to engage families in change behaviors and make links to community resources. The HAL collaborative is made possible by grants from the Caring Foundation and ALL Kids.

ACHIA is also wrapping up the Help Me Grow collaborative funded by the Community Foundation of Greater Birmingham. Seven practices from the Birmingham area improved developmental delay and autism screening. Most practices went from using no screeners to implementing all of the recommended screening tools at more than 90 percent of health supervision visits.

"I was worried that getting the ASQ and MCHAT completed at busy well-child visits would be hard. But it has been really easy to do and we will have no problems continuing to use these screens when the project ends," stated Lee Ann Beisher, MD, FAAP, of JCDH West End Health Center. Referrals to Early Intervention more than doubled compared to baseline data. The next developmental delay and autism screening collaborative begins in early summer 2015.

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to be losing. The board has agreed to have poverty be our emphasis for the coming year. Rian Anglin, MD, FAAP, is heading up the WE CARE project that enables practices to assess and address unmet social needs in our patients in an efficient and time-effective manner. We had 19 practices sign up to participate, and there is still time to join in. Please contact us if you wish to be a part.

So, at halftime, I look back and see that we have begun a good game, and I hope that you will be inspired to continue to work with the Alabama Chapter-AAP to finish well. It is certainly an honor to be your coach....oops...president.

ACHIA continued from page 2



HAL participants were energized by the Jazzercise session at the learning session in August.

In September, ACHIA staff attended the Fall meeting of the National Improvement Partnership Network (NIPN), an organization of more than 20 Improvement Partnerships from around the nation. Incorporating models from other NIPN member states, ACHIA is redesigning future collaboratives to streamline data collection and make the online educational component more prominent as well as easier to navigate.

“With these design updates, it will be even easier for practices to improve care through ACHIA’s quality improvement collaboratives while still earning Maintenance of Certification and Continuing Medical Education as well as satisfying QI requirements for practices interested in obtaining Medical Home designation,” said ACHIA’s Director, Dr. Benton.

ACHIA continues to receive substantial in-kind and direct financial support from AL-AAP, UAB, Children’s of Alabama, ALL Kids and USA’s Center for Strategic Health Innovation. In addition, Alabama Medicaid has recently made a three-year commitment for \$59,000 in salary support for ACHIA’s program staff.

On the policy front, Dr. Benton and Lee Scott, MD, FAAP, of Dothan Pediatric Clinic, are the AL-AAP appointees to Medicaid’s Regional Care Organizations (RCOs) Quality Assurance committee. The measures selected by the QA committee for RCOs to report back to Medicaid reflect a mix of preventive care items, such as assuring well-child visits and immunizations as well as disease-specific metrics, such as care for asthma and ADHD. Dr. Benton is also a member of the national Association of Maternal & Child Health Programs (AMCHP) collaborative, which is working to implement standards of care for Children and Youth with Special Health Care Needs in states with transitioning Medicaid programs. The Alabama team is led by Melinda Davis from Children’s Rehabilitation Services and includes participants from Alabama Medicaid, Family Voices and CHIP (Children’s Health Insurance Program).

For more information about ACHIA, go to www.ACHIA.org or call 205-638-6776.

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What is the Vaccines for Children Program?

The Vaccines for Children (VFC) program provides vaccines to eligible children without vaccine cost to the provider. All routine childhood vaccines recommended by the Advisory Committee on Immunization Practices (ACIP) are available through this program. The program saves parents and providers out-of-pocket expenses for vaccine purchases.

What are the benefits of the VFC program?

You can provide necessary vaccines to uninsured children and others who cannot get recommended vaccinations without financial assistance—and, you will not incur any additional costs. You can also...

- Reduce referrals of eligible children to the public clinics for vaccination, thus allowing them to stay in their medical homes and ensuring the continuity of care.
- Save money on your vaccine purchase because you will receive public-purchased vaccines under the program.
- Receive technical assistance to help improve your vaccination rates, such as record-keeping, vaccine handling, and vaccination opportunities.

How can I enroll as a provider in the VFC program?

Enrolling in the VFC program is easy! Call the Alabama Department of Public Health's Immunization Program. Then...

1. Request a provider enrollment package.
2. Complete and return the enrollment form.
3. Return the Provider Profile form, as required, to ensure you receive the amount of vaccine needed for your office.

Your strength is the ability to provide.



Alabama Department of Public Health
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Announcing the AL-AAP's new oral health online CME module:

Take a 1st Look: A Healthy Smile = A Healthy Child!

As you know, dental caries is a common and chronic disease process with significant consequences. With only 1.5 percent of infants having dental visits, pediatricians have a golden opportunity to prevent, intervene, and, in collaboration with dental colleagues, manage this disease. There is mounting evidence to prove that the incidence of caries can be reduced by having children 6 months to 36 months assessed by their pediatric provider and a fluoride varnish applied during routine pediatric visits. Yet, there are still well over half of our state's pediatricians who have not undergone the oral health risk assessment training required to become a 1st Look Provider.

Through collaboration with the Alabama Department of Public Health and the Alabama Academy of Pediatric Dentistry, the Alabama Chapter-AAP is delighted to launch our first online CME module, *Take a 1st Look: A Healthy Smile = A Healthy Child*, which is our 1.25-hour oral health risk assessment training that is now available in this video format. Previously provided only at live conferences and local meetings, this CME-approved training is now on demand on the Chapter website and qualifies as the required training to become a 1st Look Provider through the Alabama Medicaid Agency and the ALL Kids program. 1st Look Providers are Medicaid/ALL Kids primary care physicians who can bill for the dental codes for oral health risk assessment and fluoride varnish application services performed in the medical home. This training is required for both the PMPs and any ancillary staff who perform these services.

The module includes the following components and information:

- Faculty bios (Richard Simpson, DMD, and Grant Allen, MD, FAAP)
- Approved credit statement
- Educational objectives
- Bibliography
- Oral health resources for 1st Look Providers
- Enduring materials information
- Link to the video training
- Link to the post-test (75% pass rate required to become a 1st Look provider and for CME)
- Link to the evaluation (required for CME)



The training is geared for all Medicaid Patient 1st providers, ALL Kids primary care providers and their staffs.

Consider taking advantage of this important opportunity to positively affect oral health outcomes for our youngest in Alabama!

To get started, scan the QR code, or go to www.alaap.org.

Choose to Have a Healthy Family celebrates one-year anniversary

October 1 marked the conclusion of the year-long "Choose to Have a Healthy Family, Alabama!" social media campaign, conducted by the Alabama Chapter-AAP in conjunction with child health and advocacy partners. The campaign featured a series of 12 monthly child health topics and related posts from pediatricians across the state, serving as credible spokespeople for health messages to parents, emphasizing the importance of making healthy choices to positively impact child health among families in their own communities as well as the state audience. The campaign delivered dozens of anticipatory guidance messages via practice social media pages and the Chapter's "Choose" Facebook page, including 97 videos contributed by Chapter members.

The Chapter celebrated the campaign's success—the page garnered close to 700 "likes" and reached thousands of individuals—in late September at the AL-AAP's Annual Meeting, where a compilation video was shown, highlighted a variety of the many videos that were contributed by pediatricians throughout the year.

"The video, created by the campaign's PR consultant, was wonderful; it was so inspiring to see the many faces of our pediatricians who contributed and hear their messages all in one place," said Michael Ramsey, MD, FAAP, Chapter President, who developed the campaign. "I was so proud of all of our members and their efforts to educate parents at large."

In addition to showing the video, the top contributors were awarded year-end prizes: Nola Ernest, MD, FAAP, of Troy, came in first place, winning an iPad, and Cathy Wood, MD, FAAP, of Montgomery, took second place and received an iPad Mini. Congratulations to both of them!

The decision has been made to keep the "Choose" page alive and recycle content and introduce new posts as grant funding becomes available.

To view the five-minute "Year in Review" video, scan the QR code.



Stafford named Master Pediatrician, Barron honored with Wallace Clyde award

Recognizing outstanding accomplishments and dedication to the practice of general pediatrics, the Children's of Alabama Master Pediatrician has been awarded since 1991. Many Chapter members have earned this distinction, and this year, Chapter member Anne Stafford, MD, FAAP, a long-time pediatrician from Midtown Pediatrics in Birmingham, has joined her colleagues on the list.

A graduate of Auburn University, Dr. Stafford received her medical degree from the University of Alabama at Birmingham (UAB) and completed her residency at UAB and Children's. After residency, she moved to Dothan, where she practiced at Dothan Pediatric Clinic for 10 years. She returned to Birmingham in 1992 and has been a part of the Division of General Pediatrics until her recent retirement. She spent the first few years focused on the pediatric residents' primary care clinic before shifting her focus to the development of Faculty Pediatrics, which later became Midtown Pediatrics.

The Wallace Alexander Clyde, M.D. Distinguished Service Award was established in 1984 by the UAB Department of Pediatrics and Children's as a means of recognizing outstanding physicians who have devoted a lifetime of service to children and their families; recipients are chosen by a select committee of leaders in the field of pediatrics. This year, William Barron, MD, FAAP, of Dothan Pediatric Clinic, has earned this distinction. After completing his pediatric residency at Children's, Dr. Barron joined Dothan Pediatrics, where he has practiced for more than three decades. When he joined the practice, there were

Annual Meeting continued from page 1

Chapter's strategic priorities, one of the highlights was a session on addressing social needs, presented by Rian Anglin, MD, FAAP, which kicked off the WE CARE program (see related article on page 9).

Another highlight of the meeting was a school supply drive, which resulted in many boxes of supplies collected for an inner-city school, Tuggle Elementary.

At the Saturday lunch, Chapter President Michael Ramsey, MD, FAAP, made a special presentation of the Marsha Raulerson Advocacy Award, which was bestowed to Kathy Monroe, MD, FAAP, for her continued efforts to advocate for child/teen safety.

In addition, eight practices were recognized for their completion of the CQN2 asthma quality improvement collaborative, and Percy Sullivan, MD, FAAP, was honored for five decades of participation at Chapter meetings.

At the Children's of Alabama/UAB/Chapter Awards Dinner, Dr. Ramsey recognized several individuals for their outstanding work, including:

- Megan Brennard, MD, Salina Taylor, Reach Out and Read-Alabama Development Coordinator, and Adam Muhlendorf, in recognition of their efforts to promote healthy families through "Choose to Have a Healthy Family, Alabama!";
- Cason Benton, MD, FAAP, and Linda Champion, MPA, Chapter Project Coordinator, in recognition of their dedication in developing the Alabama Child Health Improvement Alliance and promoting quality healthcare for all children in Alabama;
- Michele Nichols, MD, FAAP, who received a District X award for her efforts to engage pediatric residents with the Chapter;
- Alabama Representative Ron Johnson, AL-AAP 2014 Legislative Hero, in recognition of his leadership to improve child health and safety by sponsoring the Safe at Schools Act and 2014 Tanning Bed Legislation; and
- Alabama Senator J. T. "Jabo" Waggoner, AL-AAP 2014 Legislative Hero, in recognition of his leadership and dedication to improve child health in Alabama by sponsoring the Safe at Schools Act.



Master Pediatricians from throughout the years gather: (Front row) Marsha Raulerson, MD, FAAP, Linda Anz, MD, FAAP, Anne Stafford, MD, FAAP, Cathy Wood, MD, FAAP; (Back row) Derrol Dawkins, MD, FAAP, Eric Tyler, MD, FAAP, Bill Barron, MD, FAAP, Michael Ramsey, MD, FAAP.



The evening's award winners with Chapter President Michael Ramsey, MD, FAAP: (Front row) Michele Nichols, MD, FAAP, Cason Benton, MD, FAAP; (Back row) Representative Ron Johnson, Senator Jabo Waggoner, Bill Barron, MD, FAAP, Anne Stafford, MD, FAAP, Dr. Ramsey.



Michael Ramsey, MD, FAAP, accepts a card of thanks from representatives from Tuggle Elementary for the Chapter's school supply drive.

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Michael Ramsey, MD, FAAP, Chapter President, honors Percy Sullivan, MD, FAAP, for five decades of involvement at Chapter meetings.

"We truly appreciate the generosity of each Board Member who contributed, as well as the many attendees that bid on the items," said Polly McClure, RPh, ROR Statewide Coordinator. "Next year, we will expand it to include more items."

Kudos to the Executive Board for their generosity!

Congratulations to all of these individuals for their commitment to child health! The festivities concluded with Children's awarding of its Master Pediatrician and Wallace Clyde awards (see sidebar story).

Silent auction garners \$2,700 for Reach Out and Read

At this year's Annual Meeting, the Alabama Chapter-AAP conducted its first silent auction benefitting Reach Out and Read-Alabama.

The auction was made possible through donations from the Chapter's Executive Board members, including Auburn/Alabama tickets, artwork, wine baskets, a personal meal for eight, and many others.



Kathy Monroe, MD, FAAP, left, accepts the Marsha Raulerson Advocacy Award from Dr. Raulerson.





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Nineteen practices engage in social needs/poverty project, WE CARE

Alabama has the seventh highest poverty rate in the nation with children being the poorest segment of the state's population. Across the life course, impoverished children experience worse health and multiple health disparities.

Thanks to the efforts of Rian Anglin, MD, FAAP, of Pediatric Associates of Auburn, we are diligently working to change this. Dr. Anglin spoke at the Alabama Chapter-AAP's Annual Meeting in September on addressing families' unmet social needs at well-child visits. During this presentation, she rolled out the WE CARE Alabama Project.

WE CARE is a practice- and evidence-based model for addressing key unmet social needs for patients and families—food security, employment, literacy, parental education, housing stability, utility services, and childcare by systematically screening for those needs and referring families to existing community-based services at pediatrician visits.

The program has three key components—provider training, a survey instrument, and a family resource book. Because of the simplicity of the program, provider training is brief and web-based. Once trained, participating pediatric providers will ask parents to complete a short questionnaire at the beginning of well-child visits. This questionnaire evaluates for limited literacy skills, unemployment, lack of quality childcare, housing instability, availability of basic utility services, and food insecurity. Families will be given the opportunity to privately discuss these needs and receive counseling. Every exam room at participating practices will have a resource book with one-page tear-out sheets that address each need screened for. These family resource books have been developed with input from local community agencies and physicians in order to assure that they address the needs of each individual community.

After the visits are complete, pediatricians will write the actions taken on the back of the survey forms. The questionnaires and action statements will then be collated and studied using descriptive statistics. No personal identifiers are included on the forms.

Specifically, the WE CARE program aims to:

- determine the availability of community resources in various geographical areas in Alabama for families with unmet basic needs;
- determine the prevalence of basic needs for families who receive care in pediatric practices in Alabama;
- determine the impact that WE CARE has on providers' referral rates to community agencies for families with unmet basic needs.

"WE CARE has significant implications for clinical practice and public health at large," Dr. Anglin said. "By achieving our study aims, we will provide an important step to potentially shifting current pediatric practice-based research and clinical practice paradigms."

WE CARE is just getting started. If your practice is interested in joining this exciting program, please contact Dr. Anglin at rian_anglin@att.net.



Event Calendar

January 14, 2015
Chapter/PMA Webinar:
New Practice Manager
Responsibilities Regarding
401K/Profit Sharing/Cash
Balance Retirement Plans
12:15 p.m.

March 11, 2015
Chapter/PMA Webinar:
Setting Pediatric Service Charge
Prices Fairly: A Review of the
RBRVS for Pediatricians
12:15 p.m.

April 18, 2015
"Healthy Active Living" Obesity
QI Collaborative
Learning Session 3
Bradley Lecture Center
Birmingham, AL

April 30 – May 3, 2015
2015 Spring Meeting & Pediatric
Update
Sandestin Golf & Beach Resort
Destin, FL

September 25-27, 2015
2015 Annual Meeting and Fall
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Chapter to spread Help Me Grow work to Tuscaloosa County as Project LAUNCH sub-grantee

The Alabama Chapter-AAP, through both the Alabama Child Health Improvement Alliance (ACHIA) and Reach Out and Read-Alabama, has been awarded as a subgrantee for a larger federal grant through the Alabama Department of Mental Health and the Alabama Partnership for Children, to spread its previous work with Help Me Grow to Tuscaloosa County through Project LAUNCH.

The goal of Project LAUNCH is to create a shared vision for the wellness of young children that drives the development of federal, state, territorial, tribal, and locally based networks for the coordination of key child-serving systems and the integration of behavioral and physical health services. The expected result is for children to be thriving in safe, supportive environments and entering school ready to learn and able to succeed.

Alabama's Project LAUNCH will build on the vision of the Early Childhood Comprehensive Systems plan (Blueprint for Zero to Five) and other successful collaborative efforts to integrate programs that provide a complete range of developmentally supportive services to families with young children, and to expand and enhance evidence-based programs related to children's healthy development. The local implementation area will be Tuscaloosa County.

In partnership with ACHIA, the Chapter will support the project through the screening and assessment of young children via the Help Me Grow model (currently underway in the Jefferson County area) by training primary care providers on quality improvement principles and developmental screening (ASQ-3 and ASQ-SE) and improving referrals to appropriate services. In addition, Reach Out and Read-Alabama will receive funds to increase the number of practices/clinics with ROR sites in the Tuscaloosa area.

Look for more information soon as preparations begin for this five-year initiative.



Save CHIP for Alabama Children

“Save CHIP” member action toolkit launched

By Michael J. Ramsey, MD, FAAP, Chapter President

A few years ago, we asked for your help in averting a potential crisis in Alabama Medicaid. Although reforming the Medicaid system in our state is still in process, funding has since stabilized, reimbursement is up, and, most importantly, the most vulnerable of our state are still receiving health care. As many prominent health leaders in our state have said, a functioning Medicaid system is vital to our state and its collapse will adversely affect ALL Alabamians.

Now, in 2014, we are again facing another potential crisis. Alabama's Children's Health Insurance Program (CHIP - ALL Kids) is in danger of losing its federal funding starting in October 2015. As you may know, the CHIP program was enacted in 1997 with bipartisan support and functions to provide health insurance to families who fall between the private insurance system and Medicaid. ALL Kids is administered by the Alabama Department of Public Health, with benefits delivered through Blue Cross Blue Shield of Alabama.

In this era of fiscal responsibility, we are all concerned with costs. Most agree that placing at least a modicum of cost-sharing on families will help in reducing unnecessary costs in our system. ALL Kids, with its tiered co-pays and pharmacy program, is part of the solution. Because federal cost-sharing contributes significantly to the cost of the program (about 78 percent), a loss of that funding would mean that all of these families would be forced into underinsurance or the federal health insurance marketplace.

Therefore, the Executive Board is asking for all members, their patients' parents and colleagues to take action now and advocate to your Congressmen to fund CHIP through 2019. It's very important that you spread the word to your parents, civic clubs, and business leaders in your communities, churches, etc. Please scan the QR code, visit tinyurl.com/mmj9yju or go to the Chapter website at alaap.org to access our Member Action Toolkit to get started!



The Physicians' Alliance Health Plan Trust (PAHPT) Is Saving Members Thousands on Their Health Plans!

PAHPT:

- Is a non-profit, member owned benefits plan that provides stable, affordable, quality health coverage
- Has a full Certificate of Authority to offer coverage in Georgia and Alabama (with more states in process)
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Reach Out and Read All About It!

By Salina Taylor, Reach Out and Read-Alabama Development & Communications Coordinator

New AAP policy statement on early literacy affirms work of Reach Out and Read

Earlier this summer, the AAP released a new policy statement promoting early literacy—beginning with an infant’s very first days—as an “essential” component of primary care visits, representing the first time the AAP has adopted official policy on the issue. This policy statement validates the work of Reach Out and Read-Alabama, whose 300 medical providers at 67 program sites prescribed brand-new books to more than 75,000 children throughout the state last year while encouraging their families to read together daily.

“Providing books at pediatric primary care visits to families at economic and social risks, together with developmentally appropriate anticipatory guidance encouraging parents to read aloud with their children, has a powerful effect on the home environment of young children,” the policy statement authors cited. “It directly affects language development, a major factor in school readiness, during the critical period of early brain development.”

Since January 2006, Alabama’s pediatric healthcare providers have prescribed more than one million books to children from six months through five years of age at their well-child visits and encouraged their parents and caregivers to read together daily.

Following the policy’s release, Secretary Hillary Rodham Clinton announced the launch of the Academy’s updated early literacy toolkit for pediatricians and parents, Books Build Connections, at the AAP’s National Conference & Exhibition in San Diego. The toolkit incorporates new recommendations on early literacy issued by the AAP in June and provides updated, practical resources for pediatric professionals, as well as guidance for families on the importance of talking, reading, and singing with their children to promote early learning.

To get to the toolkit, visit <http://littoolkit.aap.org/> or scan the QR code.



Infants’ & Children’s Clinic chosen to take part in Brush, Book, Bed

Congratulations to Grant Allen, MD, FAAP, Chapter Oral Health Advocate, and his practice, Infants’ and Children’s Clinic in Florence, which was chosen as one of 10 pediatric practices in the nation to participate in a new pilot program, Brush, Book, Bed (BBB). BBB is a concept developed by the AAP Section on Oral Health and Reach Out and Read to help pediatricians communicate with families about the importance of nighttime routines that include tooth-brushing, reading, and regular bedtimes. Those participating in the pilot project received toddler books on oral health, toothbrushes and doses of fluoride varnish for 500 children.



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Local communities raise “Bucks for Books”

“Pirate” hats and Auburn helmets off to two Reach Out and Read-Alabama program sites for innovative fundraisers to ensure that children and families served by their program continue to receive brand-new, age-appropriate books at each well-child visit.

In October, Fairhope Pediatrics invited pirates and princesses of all ages to participate in an inaugural Pirate & Princess Fun Run for Reading at the Eastern Shore Centre in Spanish Fort. Local businesses sponsored the event, and vendors participated with fun giveaways at the event, raising more than \$5,000.

Pediatric Associates of Auburn’s Reach Out and Read-Alabama program will benefit from a portion of the proceeds of “Aull in for Books.” Tickets for the Auburn/Samford football game are available for purchase at www.roralabama.org for \$50 each. Tailgate activities will include light snacks, games for the kids and door prizes for donated books.



Fairhope Pediatrics’ Fun Run was truly a great time for all who participated.

Coding

O By Lynn Abernathy Brown, CPC

r A quick look at Level Four

n As I stated in a previous article, coding “from the bottom up” means that the provider determines the risk and medical decision-making based on the assessment/plan of care; HPI and Exam to support that level of care. A patient who has multiple diagnoses with chronic conditions, managed medications and tests ordered indicates Moderate complexity. Documentation of the HPI and Exam needs to support this.

e **r** **Do you code 99204 or 99205 New Patient? Were you aware that documenting ten (10) Review of Systems (ROS) is required in order to bill these codes?** If there are not ten ROS, you likely should code 99203, which only requires two ROS.

Below is the risk table for Medical Decision-Making of 99214 Established Patient and 99204 New Patient with the documentation of the Key Elements for HPI and Exam necessary to support these levels.

99214 Decision-Making (presenting problem)		99204 Decision-Making (presenting problem)	
<ul style="list-style-type: none"> • 1 Chronic illness with exacerbation • ≥ 2 Chronic stable illnesses • New problem of uncertain diagnosis • Acute illness with systemic symptoms • Acute complicated injury 		<ul style="list-style-type: none"> • 1 Chronic illness with exacerbation • ≥ 2 Chronic stable illnesses • New problem of uncertain diagnosis • Acute illness with systemic symptoms • Acute complicated injury 	
PLUS	OR	PLUS	AND
History HPI: 4 elements ROS: 2-9 systems PFSH: 1 of 3	Exam Comprehensive (general Multi-system or complete single organ system)	History HPI: 4 elements ROS: 10 systems PFSH: 3 of 3	Exam Comprehensive (general Multi-system or complete single organ system)

**Note the bolded items showing the difference for New Patient vs. the Established Patient.

[Information based on '95 coding guidelines]

Time for 99204 New Patient is documented as closest to 45 minutes of counseling/total visit time and will replace the need for the items in the above table. 99214 Establish Patient time is closest to 25 minutes. Time must be documented. It is recommended that you document the time spent counseling as well as the time of the total visit. For example, “Spent 15 minutes of a 25-minute visit discussing _____”.

DISCLAIMER: Children’s of Alabama does not accept responsibility or liability for any adverse outcome from the advice of Lynn A Brown, CPC, for any reason, including inaccuracy, opinion and analysis that might prove erroneous, or the misunderstanding or misapplication of extremely complex topics. Any statement made by Lynn A Brown, CPC does not imply payment guarantee by any payor discussed.

AL-AAP Practice Management Association Update

By Byron Clark, PMA Chair

Costs rising? Insurance remittances decreasing? Patient delinquencies increasing? Government regulations becoming overwhelming? Insurance guidelines becoming intrusive and cumbersome? Need more skilled staff on a shrinking budget? If any of these apply to your pediatric practice, then you are in good company.

Practices both large and small struggle mightily to keep up with industry changes and challenges. What’s an administrator to do? First of all, recognize that you are not alone. Secondly, reach out to others who are facing the same issues. Thirdly, use group educational resources so that you and your staff will not have to wade through the plethora of problems on your own. Instead, you can face those challenges with confidence by learning how to adapt to the changes. No one likes forced changes, but our chosen industry continually faces them from a variety of sources. Two options remain: Adapt or fail.

The Alabama Chapter-AAP’s Practice Management Association (PMA)) chooses the former and rejects the latter. To this end, 2014 and 2015 will be filled with opportunities for our members to gain practical and timely practice management information. The PMA has no greater purpose than to provide solutions to the current pediatric practice problems you are facing while helping forecast the ones on the horizon, but we must work together. Having motivation to learn, being accepting of change and having the ability to adapt will be the characteristics of those who prosper in the coming years.

The PMA can provide the help you need to succeed. Turn to the PMA when you have questions or need practice management information. We can be a valuable resource.

Visit our web page on the AL-AAP’s site (alaap.org) under Programs/Projects for more details!

CHAPTER BRIEFS

Allen appointed to AMA oral health representative position*Grant Allen MD, FAAP*

Congratulations to Grant Allen, MD, FAAP, Past President of the Alabama Chapter-AAP, who has been appointed by the American Medical Association (AMA) as its representative to the American

Dental Association (ADA) Council on Access, Prevention and Interprofessional Relations (CAPIR). CAPIR is dedicated to broadening the scope of oral health care within the health care system, promoting preventive dentistry as a cornerstone of oral health care, and advancing the delivery of oral health care to the public. CAPIR recommends policy, develops resources, and formulates programs in the areas of:

- Access to oral health services;
- Community health activities;
- Community water fluoridation and other preventive health activities; and
- Health care facilities and interprofessional affairs.

Dr. Allen was nominated by the AAP and supported by the Alabama Chapter-AAP and the Medical Association of the State of Alabama because of his strong commitment to oral health services in the primary care medical home over the last several years as our Chapter Oral Health Advocate.

Kudos to Dr. Allen!



This quarter, Chapter President Michael Ramsey, MD, FAAP, met with WIC director Amanda Martin and Area Health Officer Karen Landers, MD, FAAP, to discuss pediatricians' concerns over the recent changes to the WIC formula options. Specifically, he asked the Alabama Department of Public Health to re-look at coverage of "sensitive" formula options. Dr. Landers and the team provided a fair hearing and are giving thoughtful consideration to our request, with an eye toward what is best for mothers and babies, pediatricians that take care of them, and the WIC program as a whole.

Anz appointed Chair of the national Committee on Membership*Linda Anz, MD, FAAP*

Linda Anz, MD, FAAP, Past President of the Alabama Chapter-AAP and a current member of the American Academy of Pediatrics' (AAP) Committee on Membership (COM), has been appointed

as Chair of COM for a two-year term.

The COM serves as an advisory committee to the AAP Board of Directors on membership matters, considering economic, practice, and societal trends that will exert influence on the various categories of AAP membership and making recommendations to the Board for benefits, policy and/or bylaw revisions.

For the past five years, she has served as a member of the committee representing District X, lending her expertise through a pivotal time as the AAP redefines and strengthens its relevance for the 62,000+ members across the country and abroad.

Congratulations, Dr. Anz!

Mark your calendars: New Practice Management Association webinars scheduled

After several very successful webinars on ICD-10, vaccines as a business line, and others, all of which are available on-demand on the Alabama Chapter-AAP website (alaap.org), the AL-AAP Practice Management Association continue its webinar series in 2015 with the following installments:

- January 14: *New Practice Manager Responsibilities Regarding 401K/Profit Sharing/Cash Balance Retirement Plans*
- March 11: *Setting Pediatric Service Charge Prices Fairly: A Review of the RBRVS for Pediatricians*

Each webinar is 45 minutes in length and begins at 12:15 p.m. Look for registration emails approximately two weeks prior to each session. You can also click on the Events tab on the Chapter website at alaap.org for more information.

To access previous webinars on demand, visit tinyurl.com/p9lyzgo.

The Pediatrician and Mental Wellness, Part 2

By Madeleine S. Blancher, MD, FAAP, Chapter Mental Health Committee Chair

A baby's brain is developing rapidly after birth. All pediatricians know this, but most new parents think newborns just "eat, sleep, poop and cry." The beauty of our profession is that we get to guide their realization of how awesome this development can be and how they can actually be an active participant in that development—for good or bad. We know about toxic stress and how it affects young children, even affecting medical conditions in adulthood. Most parents do not understand this, but most parents really do want to do what is best for their child. It is our job as pediatricians to help them. Easy and simple interactions during anticipatory guidance can be used for this purpose. And remember, the goal is to foster secure attachments between the child and his parent or guardian.

The "dance" between a parent and a newborn really begins with the parent's perception of the child. This perception is colored by expectations the mother has for her child. If she was anticipating a nice calm baby, but got a crier instead, the "dance" is altered. If the mother is depressed, she cannot be emotionally available for the child. So, at the one-month visit, pediatricians can assess the mother's mood and expectations for the child. Maternal depression can be screened with a validated instrument, but can also be assessed with a few questions: "How are you doing?" "Are you getting enough sleep?" "How much does his crying bother you?" "Are you able to get time for yourself? Your partner?" "Are you having a good time with your baby?" A depressed mother can be referred back to her OB for treatment. You can often easily correct misinterpretations of the baby's actions ("He doesn't like me." Or "She is up all night just to keep me from sleeping!"). This can actually be done at the first office visit after birth and it takes less than 60 seconds.

The two-month check-up is much easier, because the babies are generally more fun to be around. They tend to "give back" to their parents, by smiling and cooing, and the interaction does not feel so one-sided. Pediatricians are usually concerned with immunization questions, but we can assess the perception of the parent toward the child and help to keep these perceptions positive. A simple question, "What's your baby's personality like?" (I know, babies do not really have personalities—they do not develop until later. But parents understand that much more readily than the term "temperament.") Adjectives used to describe the baby can give an insight as to the parent's perception of the child. Words with negative connotations, like "nosy," "greedy" or "demanding" can be reframed to positive descriptions (curious, hungry, knows what he wants) so that we help the parents think of the baby in more positive terms—and as a result, change their perception of the child.

Remember, most parents really want to be good parents, but they do not know how. Parents carry baggage of their own upbringing—for good or bad. Parents do not realize how much these little brains are soaking up everything that goes on in their environment because they do not understand how rapidly these brains are developing. And they are not aware of the environmental impact on the rapidly developing brain.

By simple interventions, pediatricians can often change the trajectory of the baby's development.

Get your clinic or practice in shape: Scale Back Alabama

Scale Back Alabama (SBA) is a free statewide weight-loss program designed to encourage Alabamians to get healthy and have fun while doing it. Since the first competition in 2007, Alabamians have lost more than one million pounds! The next program kicks off on January 6, 2015 and runs through April 24.

Whether you want to get your staff involved, or spread this further to your parents as well, your practice or clinic is encouraged to participate. Your office can sign up to be a weigh-in site.

"Although we don't allow children to participate, our thinking is that if we get their parents engaged, that will help set the example," said Rosemary Blackmon, COO of the Alabama Hospital Association, which sponsors SBA. "We're planning to have a special family focus during the contest this year, with special messages for children."

For more information, visit www.scalebackalabama.com.

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NEWS FROM PUBLIC HEALTH

Stay up-to-date on Ebola, Enterovirus

The news and updates regarding both the Ebola and Enterovirus outbreaks keep coming “fast and furiously.” It is important as healthcare providers to keep up with the latest intelligence. The best way to do that is to check the Alabama Department of Public Health (ADPH) and AAP websites regularly for up-to-the-minute guidance, and if desired, sign up to receive CDC alerts. There have been numerous guidance releases and webcasts and all of these are archived on either the AAP site (<http://tinyurl.com/mdhpn4z>) or the ADPH site (<http://tinyurl.com/ntuohztz> or adph.org/ebola).

In addition, Karen Landers, MD, FAAP, Assistant State Health Officer with ADPH, is seeking feedback on the information the Department has provided thus far. Please email her at karen.landiers@adph.state.al.us with your comments.

Message to your parents: Test your home, test your child, and learn how to prevent lead poisoning

Nearly a half of a million children in the United States have blood lead levels high enough to cause significant damage to their health, estimates the Centers for Disease Control and Prevention (CDC), based on data from national surveys conducted in 2007-2008 and 2009-2010.

Despite the continued presence of lead in the environment, lead poisoning is entirely preventable. If high blood lead levels are not detected early, children with such high levels of lead in their bodies can suffer from damage to the brain and nervous system. They can also develop behavior and learning problems (such as hyperactivity), slowed growth, hearing problems, and aggressive behavior patterns.

“The recommendation to shift the focus of primary prevention of lead exposure by

lowering the reference value from 10 to 5 micrograms per deciliter will contribute to reducing and eliminating dangerous lead sources in children’s environment before they are exposed,” said Tom Miller, MD, Chief Medical Officer with the Alabama Department of Public Health. “This is a vital step in preventing children from coming into contact with lead and treating children who have been poisoned by lead.”

To increase awareness of childhood lead poisoning prevention, the Alabama Childhood Lead Poisoning Prevention Program, along with the CDC and other national agencies, participated in National Lead Poisoning Prevention Week, October 19-25. This year’s theme, “Lead-Free Kids for a Healthy Future,” underscores the importance for parents to test their homes and their children and learn how to prevent the serious health effects of lead poisoning.

According to Jacqueline Harris, program director, all children should be tested for lead poisoning at 12 and 24 months of age as recommended by the Centers for Disease Control and Prevention and the American Academy of Pediatrics.

Parents can reduce their children’s exposure to lead in many ways. Here are some simple things to tell parents in your practice:

- Get your home tested. Before you buy an older home, ask for a lead inspection.
- Get your child tested. Even if your young children seem healthy, ask your doctor to test them for lead.
- Get the facts! Your local health department can provide you with helpful information about preventing childhood lead poisoning.

For more information, contact Jacqueline Harris, MSN, at (334) 206-2966 or (800) 545-1098.

News from the AAP

AAP unveils web-based platform to guide practices to Medical Home recognition

Is your practice aiming for Medical Home recognition under the 2011 NCQA Standards before the March 31, 2015 deadline? Are you unsure whether you want to become formally recognized, but interested in beginning the journey toward becoming a Patient-Centered Medical Home (PCMH)?

Either way, the AAP Digital Navigator can provide a framework for any practice that seeks guidance as they transform to a PCMH. The Digital Navigator is a web-based software tool that provides more than 400 resources to aid practices as they go through the Medical Home implementation process. These resources include sample policies and policy templates, interactive reports, forms, journal articles, and other samples from Level III-recognized NCQA practices, all aligned with the 2011 NCQA Standards.

The Digital Navigator is self-paced and team-based, where both practicing physicians and office staff work together to achieve the practice’s desired goals. Once a team is established, a designated administrator will perform a baseline practice assessment that will help define the practice’s needs and show exactly where it stands in the Medical Home transformation process. Following the assessment, the administrator will take the work to be completed and delegate the tasks appropriately among team members. The Navigator will take this information, build a detailed plan for the practice, and then the practice is on its way.

Available as both a single-site and multi-site license, the Digital Navigator can help practices of all sizes become high-performing practices under the Medical Home model of care.

For more information, visit <http://digitalnavigator.aap.org> or set up a demonstration of the Digital Navigator by contacting DNSales@aap.org or 847-434-7010.

MEDICAID NEWS

Twelve applications submitted for RCO probationary certification

Alabama's plan for a new system of risk-based healthcare organizations to serve the state's Medicaid recipients achieved its second major milestone with the submission of 12 applications for probationary certification by the September 30 deadline.

Three applications for probationary certification as a Regional Care Organization were filed in Region A (North Alabama) and Region C (West Alabama) while two applications each were filed in Region B (Central/East Alabama), Region D (Central/Southeast Alabama) and in Region E (South/Southwest Alabama).

Between now and the end of the year, the organizations must finalize their applications and obtain official approval from Alabama Medicaid. Once they receive probationary certification, the applicants will be required to demonstrate that they have an adequate provider network and that they can meet solvency and other financial requirements before receiving final certification.

The Alabama Chapter-AAP submitted and is continuing to submit pediatricians' names to serve in the primary care physician slots on the governing boards of these RCOs. In addition, the Chapter is forming an advisory group of pediatricians to serve as a sounding board for pediatrics for those physicians who do serve on the boards. If you are interested, please email Linda Lee, APR, Executive Director, at 334-954-2543.

2014 Alabama Meaningful Use Incentive Payment Attestations Update

Alabama's State Level Registry is open for Program Year 2014 Attestations for the EHR Incentive Program. In addition, the Meaningful Use website has been restored and updated at www.onehealthrecord.alabama.gov/mu.

Providers may be in one of several situations that may affect whether or not they can attest to either AIU or Meaningful Use for 2014 and the CEHRT (Certified Electronic Health Technology) that may be available to do so. CMS has passed regulations and made other administrative changes to increase flexibility to providers. Listed below are alternatives available to providers and information about those alternatives.

- If you are attesting for 2014 and have a fully implemented 2014 Edition CEHRT, refer to the first link on the web page for the Guidance document.
- If you are attesting to Meaningful Use for 2014 and **do not** have a fully implemented 2014 Edition CEHRT due to delays in availability, refer to the *CEHRT Flexibility Rule Update* link for information about your options under the CEHRT Flexibility Rule for 2014.

If you have questions about Meaningful Use, call (334) 353-4500 or refer to the web page.

Stafford named Master Pediatrician, Barron honored with Wallace Clyde award, continued

four physicians and one office. Today, Dr. Barron is a shareholder and medical director of Dothan Pediatric Healthcare Network with 14 physicians, five nurse practitioners, one psychologist and four licensed professional counselors practicing in four locations. He is active in the medical community locally and has served on the AL-AAP executive board.

Congratulations, Drs. Stafford and Barron!

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