

The Alabama Pediatrician

Second Quarter 2015

From the President

Medicaid Funding: déjà vu



Michael J. Ramsey, MD, FAAP Chapter President

It's déjà vu all over again.

I find it hard to believe that we are in the situation again of fighting for the continued survival of Alabama Medicaid, and subsequently, pediatric healthcare as we know it in our state. Just a few years ago, the people of Alabama

overwhelmingly approved legislation to supplement the General Fund budget with money borrowed from the Rainy Day Fund. Unfortunately, during those three years, our legislators have done nothing to address what would happen when these funds ran out, and here we are with another looming budget implosion.

Fortunately, the AL-AAP learned many valuable lessons from our last battle, and has been swift to act in this crisis. Pediatricians and patients have been calling legislators and the governor to let them know how vital Medicaid is to the children in our state. Unfortunately, the message needs to be repeated again and again and again. EVERYONE needs to do his or her part by contacting their elected officials. We need to continue to build coalitions with people and organizations that can understand and advocate with us. Since all politics is local, pediatricians need to do it in their hometowns — the Chapter Executive Board cannot be successful alone.

Moving forward, we will do our part to keep you informed and let you know how to help (see the article on page 3.) Please consider joining in and speak for those who cannot speak for themselves.

Spring Meeting a huge success as attendees network and gain valuable education

The Chapter's 2015 Spring Meeting & Pediatric Update, held April 30 – May 3 at Sandestin Golf & Beach Resort, proved to be a fantastic weekend of education and fun, paralleling last year's successful event at the Grand Hotel Marriott Resort in Point Clear.

National and state speakers provided excellent presentations on topics addressing obesity, Type 2 diabetes, emerging infections in children, health risks of fructose, childhood hypertension, transition and a fantastic talk on sleep deprivation in adolescents and teen provided by UAB faculty Mary Halsey Maddox, MD, FAAP. Chapter members were also able to hear from Don Williamson, MD, Medicaid Transition Director, and Robert Moon, MD, Medical Director with the Alabama Medicaid Agency, who



The Chapter was honored to have AAP President Sandra Hassink, MD, FAAP, as a speaker, shown here with Marsha Raulerson, MD, FAAP (center) and Patience White, MD, FAAP, another speaker from Got Transition.

updated pediatricians on the Regional Care Organizations, Health Homes and the 2016 Medicaid budget currently under consideration by the Alabama Legislature. In addition, AAP President Sandra Hassink, MD, FAAP, was on hand providing several talks.



Attendees loved the camaraderie of the Grand Pediatric Pentathlon activities, shown here at the outset of the one-mile Fun Walk/Run on Friday.

the alabama pediatrician

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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.



Karen Landers, MD, FAAP, (right) updates attendees at the 12th Annual Pediatric Legislative Day on April 8, led by Chapter President Michael Ramsey, MD, FAAP (left) and Chapter Legislative Chair Jeff Tamburin, MD, FAAP (center).

Legislative Update

By Graham Champion, Public Strategies, LLC, Chapter Lobbyist

As of the writing of this article on June 1, 2015, there are four days left in the 2015 Regular Session of the Alabama Legislature. The focus of legislators throughout this Session has been the looming crisis with the General Fund Budget and the shortfall in revenue to fund adequately the programs that operate state government. The Members of our Chapter have been working tirelessly to try to educate their respective legislators on the impact of not fully funding Medicaid. The officers and staff of the Chapter have worked closely with Don Williamson, MD, Medicaid Transition Director, to develop a message that will ring true with legislators. Personal stories and examples of what will happen if there is the 5 percent cut to Medicaid that currently exists in the General Fund Budget as passed by the House and is now (6/1/15) pending in the Senate have made an impression on the members of the Legislature. It is currently expected that the Senate will not pass the budget, forcing a Special Session, or possibly several Special Sessions, to consider additional revenue and a budget. Among the possible alternatives the Legislature will be considering are:

- Additional tax revenue either through increasing the rate of existing taxes or instituting new taxes;
- Legislation proposing a Constitutional Amendment that would create a statewide lottery and allow Class III gaming (Las Vegas style gaming). This would require a 3/5 vote of both the House and Senate and then a vote of the people;
- A combination of new taxes, as proposed earlier in the Session by House leadership, and a donation of \$250 million from the Porch Creek Indians (PCI) in exchange for a compact granting the PCI exclusive rights to Class III gaming in the state; or
- A combination of the above.

The Special Session(s) is expected to be held some time in August 2015.

In other legislative action regarding budgets, the Education Trust Fund Budget (ETF) passed both houses and is on the Governor's desk awaiting his signature. It is expected that he will sign the ETF, which includes an increase of \$10 million for the First-Class Pre-K program that the Chapter has supported for the past several years. This focus on early childhood education will pay dividends for years to come.

Led by the Chapter, the efforts of a number of coalition partners this year should result in the passage of an enhanced Graduated Driver License (GDL). HB 226 is poised to pass the Senate the week of June 1 and be sent to the Governor for his signature. HB 556, another version of the GDL that places criminal penalties on the parents of a teen who violates the provisions of the law, is

Legislative Update continued from page 2

pending committee action in the Senate. HB 556 also contains the language found in HB 226, so we should be in good shape regardless of which legislation passes.

Another bill that deals with parental rights with respect to care of those ages 14 through 18 is expected to pass the House this week. This legislation allows the parents of a child 14 years old or older to override the refusal of their child to have treatment for a mental illness, provided a mental health professional concurs that treatment of some form is necessary. The Chapter worked closely with the Department of Mental Health to come to this agreement.

Working with Voices for Alabama's Children, the Chapter was a partner in the effort to pass the Healthy Food Financing Act. This legislation sets up the framework to provide grants and low-interest loans to businesses that develop food retail spaces in food deserts. Once in place it is hoped that fresh fruits and vegetables will be more readily available in underserved areas of our state.

The Chapter also worked with the MASA legislative team on legislation dealing with chemical endangerment of a newborn child. We offered several amendments that the Sponsor accepted that would have significantly protected pediatricians against potential criminal penalties. Ultimately, this legislation ran out of time and is dead for this Session.

Other than the General Fund Budget, this has been a good Session for the Chapter. Look for a Session end recap in our next newsletter.

Spring Meeting Wrap-up continued from page 1

Attendees enjoyed a strong sense of camaraderie at networking events, such as the opening reception and the mixer and dinner on Saturday night, which was generously sponsored again this year by USA Children's and Women's Hospital. This year, the Chapter was pleased to have the participation of five medical students from UAB and USA, whose attendance was made possible through scholarships provided by practices from across the state.



The exhibit hall was once again the site of a festive mix of networking, information and door prizes!

The highlight of the weekend was the time pediatricians shared with one another as they tackled the five events of the second annual Grand Pediatric Pentathlon to raise a net of approximately \$12,000 for Reach Out and Read (see article in the "Reach Out and Read All About It!" section on page 9)! Many thanks go to Grant Allen, MD, FAAP, Immediate Past President, for chairing the event again this year.

Make plans now to attend next year's Spring Meeting, set for April 28 – May 1, 2016 at the Grand Hotel Marriott Resort!



Medical students have been a part of our Spring Meeting for the past five years and enjoy time with representatives from the practices who sponsor their attendance!

How to Contact Your Chapter Leaders

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ATTENTION PHYSICIANS! GET READY

Alabama requires all students in grades 6-11 not previously receiving Tdap at age 11 years or older to have a Tdap vaccination.

In addition, ACIP recommends HPV and Meningococcal for this age group.



For questions, please contact the Immunization Division at 1-800-469-4599.





Annual Meeting & Fall Pediatric Update to feature MOC Part II group activity on ADHD

Make sure your calendars are marked for September 25-27, 2015 for the Alabama Chapter-AAP's 2015 Annual Meeting and Fall Pediatric Update at the Hyatt Regency Birmingham-The Wynfrey Hotel in Birmingham! This year's conference will offer a strong line-up of faculty, who will address topics on oral health, HPV, and multi-disciplinary approaches to aerodigestive problems, among others.

In addition, on Friday afternoon, a separate practice management workshop, co-sponsored by the Chapter's Practice Management Association, will feature sessions on Meaningful Use Part 2, Front Desk and Business Office Working Together, RCOs, Medical Update, and more! The workshop will be followed by a two-hour

Loss Prevention seminar, sponsored and presented by ProAssurance Indemnity.

Can You Really Earn 20 MOC Part II Points at the Alabama Chapter-AAP's Annual Meeting? YES!!

The best news of all? This year, we will feature a **separate 20-point Maintenance of Certification Part II group activity, ADHD Diagnosis and Management Self-Assessment**, facilitated by J. Wiley, MD, FAAP, on Sunday, September 27. Attendees will come away with both CME and 20 points of MOC Part II.

Look for registration details in your mailboxes soon and on the web at www.alaap.org!



Are you due for your MOC Part II?

- Earn 20 points Part II MOC Points on Sunday!
- Expert facilitator will give practical applications of research
- Get answers to your questions in real-time
- Network with other physicians interested in the same topic
- Past sessions described by attendees in other AAP Chapters as "highly interactive and clinically useful"

Why does Maintenance of Certification matter?

According to the American Board of Pediatrics, in a 2003 Gallup Poll, when asked – "if you knew your doctor's board certification had expired, would you change doctors?" – 54 percent of respondents replied that they would be "very likely to change."

Join us on September 27 at the 2015 Annual Meeting for our Part II MOC Session Offering:

ADHD Diagnosis and Management Self-Assessment (20 Points MOC Part II)
 J. Wiley, MD, FAAP, September 27, 2015 – 9 am – 12:00 pm

The ADHD: Diagnosis and Management Self-assessment contains approximately 50 items that address a broad range of topics in attention deficit hyperactivity disorder.

REMINDER: Chapter still has slots for Safe Sleep Physician Champions at birthing hospitals

As a major partner in the Alabama Collaborative on Safe Sleep workgroup and its goal of promoting consistent safe sleep practices and environments throughout the state, the Alabama Chapter-American Academy of Pediatrics is still looking for help from pediatricians in some areas of the state to reduce the number of preventable infant/child deaths.

In 2014, the Workgroup developed a Safe Sleep Position Statement, which outlines Alabama's endorsed recommendations for safe sleep position/environment, as well as a step-by-step blueprint for hospitals to measure their safe sleep policy against the Position Statement.

Pediatricians have stepped up to the plate for more than half of the birthing hospitals, but more are still needed to serve as Safe Sleep Pediatrician Champions. The role of the pediatrician champions is to partner with an identified Nurse Champion at each hospital to work through the blueprint over the next few months in order to assess the hospital's safe sleep policy and help to develop/promote a plan of action to bring it in line with Alabama's recommendations.

We have a great opportunity to make a significant difference in the safety of our Alabama babies. If you are interested in becoming part of this initiative, please contact your Area Representative (see list on page 3), or Linda Lee, APR, Chapter Executive Director, at llee@alaap.org.



Online Chapter educational modules provide easy-to-access, Alabama-based CME for members

By David Gremse, MD, FAAP, Chapter CME Chair

Last year, the Alabama Chapter-AAP launched two online CME modules, thanks to collaborative grants with the Alabama Department of Public Health. These modules are a great way to obtain internet enduring material CME after hours at your convenience, and they both address key strategic child health priorities for the Chapter: oral health and breastfeeding.

• "Take a 1st Look: A Healthy Smile = A Healthy Child," is the Chapter's training that is required for primary care providers and any ancillary staff who perform oral health risk assessment and fluoride varnish application in the medical home and wish to bill for those services under Alabama Medicaid and ALL Kids.

The 1.25-hour online CME module features the Chapter's Oral Health Liaison to the Alabama Academy of Pediatric Dentistry, Ric Simpson, DMD, who delivers an excellent presentation of the material, along with an easy to follow, step-by-step demonstration of fluoride varnish application courtesy of Grant Allen, MD, FAAP, the Chapter's Oral Health Advocate.

Stay tuned for updates as the Chapter is currently working on revamping its resource materials for pediatricians who take the training.

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













• "Maximizing Breastfeeding Outcomes in the Outpatient Setting," features local lactation expert Glenda Dickerson, MSN, RN, IBCLC, Lactation Services Manager at Brookwood Women's Medical Center in Birmingham. This internet enduring material offers 3.0 AMA PRA Category 1 Credits™ and assists pediatric healthcare providers in providing support for breastfeeding mothers.

This module supplies a wealth of information about informed choices, physiology of lactation, medical contraindications to breastfeeding, the risk of artificial feeding, the physician's role in supporting breastfeeding, and the AAP's recommendations for breastfeeding initiation and duration rates.

As an added bonus, Chapter members who watch the module, complete the evaluation and posttest required for CME will get a list of local International Board Certified Lactation Consultants

(IBCLCs) so that one-on-one assistance will be just a phone call away when help is needed with an individual infant and mother.

To access the module, follow this link: http://tinyurl.com/kcsp9nh or scan the QR code.

Note that both modules require a short online post-test in order to obtain CME credit.

We hope you consider taking advantage of these important opportunities to positively affect health outcomes for our children in Alabama!



Event Calendar

July 8, 2015 Chapter/PMA Webinar: Medicaid Updates: Health Home, RCO's, and PMP's 12:15 p.m.

September 9, 2015 Chapter/PMA Webinar: ICD-10 Update 12:15 p.m.

September 25 – 27, 2015 2015 Annual Meeting & Fall Pediatric Update Hyatt Regency Birmingham-The Wynfrey Hotel Birmingham, AL

October 24 – 27, 2015 AAP National Conference & Exhibition Washington, DC

April 28 – May 1, 2016 2016 Spring Meeting & Pediatric Update Grand Hotel Marriott Resort Point Clear, AL

Pediatric Quality Improvement Corner

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

As members know, the Alabama Chapter-AAP's quality improvement projects, designed to improve patient care and also help pediatricians satisfy Maintenance of Certification (MOC) Part 4 requirements, are now run through the Alabama Child Health Improvement Alliance

(ACHIA), which is guided by a multi-disciplinary Steering Committee comprised of healthcare leaders from the Chapter, children's hospitals, departments of pediatrics, payors and others.

We will soon be wrapping up our first obesity collaborative, and I look



Alabama Child Health Improvement Alliance

forward to sharing the final results. In addition, we are excited to share news of structural and broad-based changes that will improve our capacity to run QI collaboratives.

ACHIA QI Team Space Goes Live

With the rollout of the Help Me Grow-Alabama Developmental Screening QI Collaborative this summer, ACHIA is launching the ACHIA QI Team Space, powered by the Canvas online platform at the UAB Division of eLearning and Professional Studies and the RMEDE database from the Center for Strategic Health Innovation at University of South Alabama. The Team Space is an online QI MOC platform, which will, in one virtual location, provide webbased learning, data collection, data analysis and data reporting to help pediatricians track practice performance improvement progress. This platform makes the project an "all virtual" collaborative where participation is online: a step in the right direction of allowing much of this work to be done without pediatricians being taken away from their practices. The work continues to be supported by monthly calls attended by all participants.

Performance Improvement CME now offered

AND, for the first time, ACHIA has collaborated with the UAB Division of Continuing Medical Education to offer *performance improvement* CME for pediatric providers.

Performance improvement (PI) CME is a first for ACHIA, UAB and the state of Alabama! Since 2006, CME nationally has expanded to encompass much more than traditional lectures and grand rounds, including PI projects. Performance improvement activities are based on a learner's participation in a project in which a physician identifies an educational need through a measure of his/her performance in practice, engages in educational experiences to meet the need, integrates learning into patient care and then re-evaluates his/her performance.

ACHIA was successful in cross-walking the QI collaborative Action Periods to satisfy the three stages of PI CME. The Development Screening QI collaborative runs from May 2015 to January 2016. Over the course of the nine-month project, pediatricians and their nursing support staff will earn 20 points of CME for their efforts in abstracting and reviewing data, holding practice meetings to spread the QI effort, perform PI activities, and make sustainable changes. In addition, providers on the team are eligible for 25 points American Board of Pediatrics MOC Part 4.

Reach Out and Read All About It!

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

Second Annual Grand Pediatric Pentathlon successful FUNdraiser for Reach Out and Read-Alabama

More than 150 physicians and exhibitors from across the state attended the Alabama Chapter's Spring Meeting with more than half participating in our second annual Grand Pediatric Pentathlon, raising more than \$12,000 for Reach Out and Read-Alabama.



where great stories begin™

The Sandestin Golf and Beach Resort provided a perfect venue for all the events--a one-mile walk/run, 30 minutes of biking, 30 minutes of kayaking, one hour of swimming and an hour of reading for fun. Participants were seen all over the resort sporting the blue signature Pentathlon shirts as they tackled the activities with their colleagues. For each event they completed, participants were entered into drawings for prizes, including a Regions Bank green cruiser bicycle, a kayak, a dinner cruise, a FitBit and many others.

"We couldn't have imagined a more successful event. Everyone enjoyed the activities and prizes; it really made this the most social Chapter meeting ever!" said Grant Allen, MD, FAAP, Immediate Past President, who served as the event chair once again. "We are excited to have raised as much as we did for Reach Out and Read."

A special thank-you goes to our main event sponsor, Southeast United Dairy Industry Association, as well as our other sponsors, including MyCare Alabama, the Medical Association of the State of Alabama Medical Foundation, Sandestin Foundation for Kids, Another Broken Egg of America, Inc., the Business Council of Alabama and Jackson Thornton. In addition, many other organizations provided the great door prizes, allowing the program to keep most of the proceeds. For more photos from the event, visit our Facebook page at facebook.com/RORAlabama.



Captain Dave, a local Destin favorite, was on hand to provide balloons and entertainment for the kids at the walk/run.



Cathi DeVeer and Mary Martin Nordness of the Southeastern United Dairy Industry Association (SUDIA) encourage Pentathlon walkers/runners to "fuel up with milk" at the Friday Walk/Run. SUDIA was the main event sponsor of the Pentathlon this year.

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Anaphylaxis preparedness for Alabama's schools

By Melanie Sharpton, MSN, RN, ERSN, Benjamin Russell High School, msharpton I @charter.net

Sweeping changes have made a positive impact for school nurses across Alabama in responding to sudden anaphylactic emergencies. During the 2015 legislative session, ACT 2015-405 was signed into law, allowing Alabama schools to stock epinephrine auto-injectors (EAIs). Schools and school nurses are seeking information and guidance as they implement the new law. This is a welcome change and we are eager to establish this level of emergency preparedness and readiness.

Regarding anaphylaxis, school nurses have two populations to consider. The first is those with a previously known diagnosis of anaphylaxis, usually with epinephrine already prescribed. The second population are those yet unknown. Anyone is at risk of developing a sudden onset of anaphylaxis. Approximately 35-50 percent of all cases of anaphylaxis in emergency settings are due to food allergies. In fact, according to NASN (2015), "20-25 percent of epinephrine administrations involve students or staff whose allergy was unknown at the time of the event." School nurses across our state have shared spine-tingling personal testimonies of sudden onset anaphylaxis occurring in their schools among students previously undiagnosed/unknown; they also shared how crippled they were in this situation without the drug readily available. We need to equip school nurses to respond quickly and as licensed professionals!

For the known cases of students with anaphylaxis, 16-18 percent of school-aged children who have food allergies had a reaction at school (NASN, 2015). Despite a previous diagnosis, many students do not have a current prescription for EAIs, they do not provide one at school, the drug expires and some students are not capable of self-management. School nurses provide case management to those students through identification, education, awareness, and the development of individualized health and emergency plans. Sound research reports 15 million people in the U.S. are diagnosed, one in 13 children, and two in every classroom (NASN, 2015). School nurses readily establish individualized health plans (IHPs) and emergency care plans (ECPs) that address chronic illnesses like anaphylaxis. The IHP addresses the allergens when known, signs and symptoms, locations of medication, how to assist students, administration of EAI, and medication safety. These health plans are communicated across all divisions within the school setting--cafeterias, classrooms, transportation services, bus drivers, field trips and administrators.

Epinephrine is the universal standard treatment. Sadly, we have seen loss of life among students from anaphylaxis onset at schools across the U.S. Epinephrine is safe, has no absolute contradictions, and delays morbidity and mortality (NASN, 2015). Without stock epinephrine auto-injectors, schools and especially school nurses are under-prepared to respond professionally to a sudden onset of anaphylaxis.

The Alexander City School System, with the help from Eric Tyler, MD, FAAP, of Pediatric Associates of Alex City, was the first system in Alabama to establish protocols to stock epinephrine auto-injectors, and we can help others to implement the same following steps:

- Obtain prescription
- Develop protocol
- Dosing between pediatric and adults
- Storage, packaging, and delivery of medications
- Initial and ongoing training of unlicensed staff
- Documentation of epinephrine administration in an emergency situation

On behalf of school nurses across our state, please consider supporting and sponsoring stock epinephrine auto-injectors in your areas and communities. Contact the school nurses in your areas and feel free to contact me for further guidance.

MEDICAID NEWS

Online programs offer updates on health homes, RCO-related topics

Since the beginning of the year, there has been a flurry of activity as Alabama Medicaid providers, mainly Patient 1st providers, have signed up for the new Health Home program and have begun the process of signing letters of intent with the 11 probationary Regional Care Organizations.

To keep members informed, the Chapter and the Alabama Academy of Family Physicians hosted a webinar with Medicaid in late January, the recording of which can be found on the Chapter website. In February, Alabama Medicaid itself began hosted an ongoing educational series, "Wednesday Webinars," to answer providers' questions about the new, statewide Health Home program as well as different aspects of the planned Regional Care Organizations.

The next webinar will be held on June 17 at noon and will feature State Health IT Coordinator Paul Brannan, who is also director of One Health Record®, the state's health information exchange. He will discuss how providers can augment their existing record systems with this free technology resource and plans for the future of this secure system. Login information will be available on the home page of the Agency's website the week of the program.

While each webinar is live, the slides presented and a recording are also available after each session on the Agency's website at http://tinyurl.com/oqofjvj.

Suggestions for upcoming sessions are welcomed and should be directed to Robin Rawls, communications director, at robin.rawls@medicaid.alabama.gov.

Alabama continues implementation of health information exchange

Every day in Alabama, health professionals and patients exchange information during patient visits and other interactions. With good information, patients' health care needs can be managed effectively. However, this is not always possible despite the proliferation of the Internet, smartphones, tablets and cloud technology.

All that is changing.

Today, One Health Record[®], Alabama's Health Information Exchange (HIE), is not only operational, but is emerging as an important tool as Alabama Medicaid and other organizations move toward value-based healthcare systems. The project is now under development as a pilot initiative in eight east Alabama counties where eight hospitals and 19 practices have

or are in the process of connecting to have data exchange capability. Between February and May 2015, more than 260 individual users sent and received approximately 1,128 secure messages while nearly 54,000 query transactions to pull data were recorded.

The move to implement health data exchanges nationally has been fueled by Medicare and private insurers as emphasis shifts to quality and outcomes over visits and volume. Medicaid's planned Regional Care Organizations hope to incorporate the HIE system as well.

State Health Information Technology Director Paul Brannan explains that the state's One Health Record system offers providers options ranging from secure messaging to query-based exchange. "Providers now can log on and see all of Medicaid's and ALL Kids' claims information or look at the Continuity of Care Documents (CCD)," he said.

At a minimum, providers can see a claims-based patient history to include visits to the hospital or emergency room along with information on drug, lab and outpatient encounters. Providers may also securely email other providers in the system and exchange information on patients that both are serving. Providers who connect to the interoperable or query-based exchange also have the opportunity to obtain information on a real-time basis. That not only includes claims, but information from other providers connected in the system. And, if providers are interested in connecting their own electronic medical record systems, Brannan and his staff are available to work with the provider's EMR vendor to make the necessary connections.

One of the most important things to know about One Health Record is that security and protecting patient health data are a top priority. To do that, Alabama's HIE has taken steps to meet or exceed all industry standards for data protection and security while still making data sharable, according to Brannan.

"We understand that security of health information is critical to success," Brannan emphasized, noting that an external group conducts a security assessment every six months. In addition to system security, the system is set up for providers to flag patient records with substance abuse and mental health diagnoses so they will not be shared. Providers are also required to provide patients with an opportunity to "opt-out" of the system.

Future plans call for adding system capability to offer ADT (Admission, Discharge, Transfer) alerting so physicians know of these important transitions proactively instead of

CHAPTER BRIEFS

Simpson honored with award, Oral Health Coalition Chairmanship



Richard Simpson

Richard Simpson, DMD, a pediatric dentist from Tuscaloosa, the Alabama Chapter-AAP's long-time liaison to the Alabama Academy of Pediatric Dentistry, and co-chair of the Chapter's oral

health committee, has been honored with two distinguished positions this month: he has been elected to serve as the new chair of the Oral Health Coalition of Alabama (OHCA), and he has been selected to receive the American Academy of Pediatrics' 2015 Oral Health Service Award!

The Oral Health Coalition of Alabama, which meets quarterly, was founded in 2001 to represent a group of stakeholders committed to promoting improved oral health, which impacts the overall health and well-being of Alabama residents, through collaborative partnerships, education, advocacy and technology. Its vision is "All Alabamians will have access to oral health care that results in optimal oral health."

The AAP Section on Oral Health's **Oral Health Service Award** is an annual honor presented each year at the National Conference & Exhibition to recognize a section member who has made a major contribution to promoting children's oral health and medical/dental collaboration. Dr. Simpson will be presented with the award at the NCE in Washington, DC on Saturday, October 24, 2015.

In addition to his long history of oral health work for the chapter, Dr. Simpson serves on the Alabama Medicaid Dental Task Force, the Alabama Dental Association (ALDA) Medicaid Advisory Committee, and the Council on Dental Health of the State Committee of Public Health. He is also the President-Elect of the Sixth District Dental Society. Dr Simpson is a Fellow in the American College of Dentists, a recipient of the ALDA Most Excellent Fellow award, and was recognized by the American Academy of Pediatrics for Excellence in Advocacy.

Congratulations, Dr. Simpson, on both of these achievements!



Monroe appointed to national injury prevention committee

Kathy Monroe, MD, FAAP, a faculty member in the UAB Department of Pediatrics Division of Emergency Medicine and Chair of the Chapter's Injury Prevention Committee, has been elected to serve as a member on the American Academy of Pediatrics' Executive Committee of the Council on Injury, Violence, and Poison Prevention for a three-year term.

The Council's mission is to reduce the number of injuries, whether intentional or unintentional, to infants, children, adolescents, and young adults.

"We are confident that your past experiences will help us educate more pediatricians, develop solid policies, and spread this message to a younger group," Council leaders said recently in a communication to her, saying that she will be asked to help within one of four areas: membership, policy, education, and advocacy.

Congratulations, Dr. Monroe!

Lee honored for 10 years of service

Chapter Executive Director Linda P. Lee, APR, was honored by the Executive Board past and present at the 2015 Spring Meeting for her 10 years of service to the Alabama Chapter-AAP. Chapter President Michael Ramsey, MD, FAAP, surprised Linda with a presentation of a gift as well as notes written by former and current Chapter leaders.

"I was completely overwhelmed by the attention," Linda said. "As I said at the meeting, I am honored to work with pediatricians over the last 10 years, and look forward to many more. In the words of my predecessor Karin Scott, 'this is a sweet gig' of a job!"

At the national Chapter Executive Directors Conference in March, Linda was honored by the American Academy of Pediatrics for her 10 years on the job as well as two years of service as Chair of the Executive Directors Steering Committee.



Linda Lee is honored for her service by AAP Executive Directors Steering Committee Past Chair Nancy Adams.

Mark your calendars: new Practice Management Association webinars scheduled

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

• July 8: Medicaid Updates: Health Home, RCO's, and PMP's

• September 9: Important ICD 10 information update

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.



Chapter Area 5 Representative and Troy pediatrician Elizabeth Dawson, MD, FAAP, discusses life in rural pediatrics at the Chapter's recent career day, "Life After Pediatric Residency," held each year for second-year pediatric residents at the University of South Alabama.

Upcoming program at Children's of Alabama to highlight "The Future of Children"

Children's of Alabama has been selected by Princeton University and The Brookings Institution to unveil a portion of their Spring 2015 *The Future of Children* publication. Experts from Princeton, Rutgers and the University of Kentucky Center for Poverty Research, as well as five "best practice" programs from throughout Alabama and the country, will present their work on nutrition and child health.

During Grand Rounds, Nancy Reichman, PhD, a professor of pediatrics at Rutgers University's

Robert Wood Johnson Medical School, will present the publication's findings on nutrition and child health to our pediatricians and UAB Department of Pediatrics representatives.

Following Grand Rounds, from 1:30 p.m. to 4:30 p.m., the program will feature a recap of the Grand Rounds lecture by Jim Zilliak from the University of Kentucky, followed by a panel discussion of state and national leaders in the nutrition and child health movement (3 - 4:30 p.m.).

Registration is free and available online at http://www.childrensal.org/promotingchildhealth.

Medicaid News continued

after the fact. It would enable the documentation of care coordination between the hospital, ER and primary medical provider, which is expected to be required under Meaningful Use 3, Brannan said.

"I encourage providers to reach out to us because we want to hear from you about any functions and capabilities that are not there. It is our goal to be open and responsive to the needs of providers, because we share your interest in providing better care."

If the state is successful in gaining federal approval of its 1115 request now before the Centers for Medicare and Medicaid services, Brannan hopes to have funds to support provider connectivity on a statewide basis.

However, connectivity is just the beginning, he says. "We hope that by connecting, providers will have greater opportunities for professional collaboration, that there will be enhanced communication between providers and patients and ultimately, better care based on timely and complete information."

More information is available at www.onehealthrecord.alabama.gov.

NEWS FROM PUBLIC HEALTH

Congratulations to Vaccines for Children providers with outstanding vaccination coverage rates

The Immunization Division of the Alabama Department of Public Health (ADPH) staff performs VFC-AFIX quality improvement visits to Vaccines for Children (VFC) provider clinics annually. These visits allow ADPH staff to assist VFC providers in determining vaccination coverage levels of the clinic, if VFC guidelines are being followed, and to offer education and CEU credits for clinic staff. The Immunization Division has listed the results of the 2014 VFC site visits for those clinics that achieved vaccine coverage levels of 100 percent, over 90 percent, and over 80 percent. The ADPH Immunization Division congratulates these VFC providers for extraordinary accomplishment in 2014. The Alabama VFC Program appreciates the knowledge, skill, and experience they exhibit in their daily preventive healthcare practice. To access the list, see the full story at the top of the "Immunization Resources" page under the Resources tab on the Chapter website (www.alaap.org).

Chapter addresses protection of the medical home related to school-based clinics

As most pediatricians in Alabama are aware, there has been an increase in school-based immunization clinics across Alabama. The chief concerns voiced among pediatricians have been coordination of health information — knowing when a child has been vaccinated outside of the medical home — and protection of the medical home in general.

In 2013, the Chapter leadership explored this issue with the Alabama Department of Public Health (ADPH), who does not coordinate these independent initiatives, to explore possible solutions.

More recently, Karen Landers, MD, FAAP, medical director over the Immunization Division at ADPH, as well as the division staff, have been meeting with "mass immunizers" to discuss the importance of inputting vaccine administration into the immunization registry, IMMPrint, on the day of service, so pediatricians and other primary care providers are aware when a vaccine has been administered to their patients. Inputting data at time of service, according to Dr. Landers, will be required for all Vaccines for Children providers by federal law beginning in 2017.

"At this time, the focus of mass immunizers has been on influenza," Dr. Landers said. "However, we expect that mass immunizers will consider broadening their scope to include other vaccines in the future."

Likewise, the Chapter Executive Board has met with Don Williamson, MD, State Health Officer, to express concerns over this issue and brainstorm ways to protect the medical home. In mid-June, Chapter leaders will meet with Immunization Division representatives and develop plans to meet with the largest mass immunizer in Alabama to discuss how they can promote visits to the medical home as part of their interaction with schools during these

Look for more information soon as we continue to do everything we can to protect children from vaccine-preventable disease while at the same time promote care in the medical home.

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By Lynn Abernathy Brown, CPC

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ICD-10: Getting Ready with Double Coding

For practices using electronic health records, double coding in the progress note is one way to begin the transition to ICD-10. This means that on the progress note, each diagnosis is listed with the ICD-9 and the ICD-10 code together. This allows providers and staff to begin becoming familiar with ICD-10.

For example, double coding might look like the example below in the progress note and on the superbill. Only the ICD-9 codes would bill on the claim until 10/1/2015 when ICD-10 will become effective.

Example Progress Note:

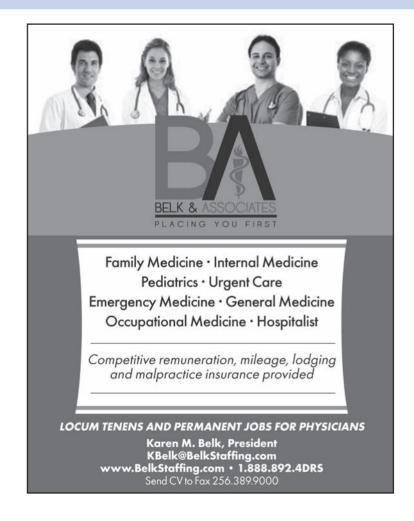
Assessment

• Allergic Rhinitis 477.9/[30.9] 493.92/J45.901 • Asthma with exacerbation 786.2/R05 Cough Upper Respiratory Infection, Acute 465.9/J06.9

This type of documentation serves multiple purposes. The provider will begin including the new coding system in the progress notes, the nurses will have both code sets in the medical record as they obtain prior authorization or precertification closer to October for services that will be provided after 10/1/15, and the billing staff will begin recognizing the relationship of the codes numerically.

The coding for laterality, anatomical site, combination codes, and accident encounter types will be more specific and require more understanding closer to October, but for now this is a start.

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NEWS FROM THE AAP

Pediatricians applaud passage of Medicare Access and CHIP Reauthorization Act

Bipartisan, congressional action will extend programs critical to children's lifelong health

In mid-April, in a bipartisan vote of 92-8, the U.S. Senate passed the Medicare Access and CHIP Reauthorization Act of 2015, which will extend funding for the Children's Health Insurance Program (CHIP), renew the Maternal, Infant and Early Childhood Home Visiting Program (MIECHV), and permanently repeal the Sustainable Growth Rate (SGR) formula to avoid annual cuts to Medicare payments. The Senate's action follows a recent vote of 392-37 in the U.S. House of Representatives, sending the bill to President Obama for his signature.

"Every child needs sound nutrition, nurturing relationships and safe environments. Home visiting programs and CHIP help meet these needs by ensuring access to critical services in and outside the home for every child," said AAP President Sandra G. Hassink, MD, FAAP. "Pediatricians have been speaking up in support of these programs on Capitol Hill and in state governors' offices, and the bipartisan action we've seen from our federal leaders demonstrates that our voices have been heard."

CHIP was last reauthorized in 2009 and extended in 2010. Funding for the program was set to expire in September absent Congressional action.

The Home Visiting Program works to improve the health of children and families through voluntary home visiting services designed to help parents develop skills to care for their children. MIECHV was previously authorized until the end of March, and will now be extended two more years.

"Now families can have peace of mind and state legislatures can plan ahead knowing that the fate of CHIP and home visiting programs is certain," said Dr. Hassink. "The American Academy of Pediatrics thanks the champions for children in Congress, who have ensured that CHIP and MIECHV will continue to fund services for children and allow them to thrive."

"And the advocacy efforts of pediatricians across the country are what made passage of this legislation possible," she added. "Thank you for your tireless commitment to putting children first, and congratulations on this landmark achievement for children's health!"

Dr. Karen Remley named Executive Director/CEO of the American Academy of Pediatrics

The AAP has named Karen Remley, MD, MBA, MPH, FAAP, to take the lead as the Executive Director/CEO, following the July 2015 retirement of Errol R. Alden, MD, FAAP, who has held the post for 11 years.

"After an extensive national search, Dr. Remley's unique qualities and management experience were the right combination to build on the success of



Karen Remley, MD, FAAP

the Academy and lead us forward," said AAP President Sandra G. Hassink, MD, FAAP. "Dr. Remley is a pediatrician with a broad background and experience in many aspects of the health care system. We are delighted to welcome her as our CEO."

"It is an incredible honor to be selected as the next CEO of the American Academy of Pediatrics," said Dr. Remley. "As a pediatrician, I have always been proud to be a part of this organization. This is such an important time for children and for the Academy. I am excited to bring the diverse perspectives of my professional experience to this new role."

Dr. Remley earned her medical degree at the University of Missouri in Kansas City and completed her pediatrics residency at St. Louis Children's Hospital-Washington University School of Medicine in St. Louis. She began her career in a small pediatric practice and worked for 15 years as an attending physician in the emergency department at Children's Hospital of the King's Daughters in Norfolk, Va.

Dr. Remley currently is the chief medical director of Anthem Blue Cross and Blue Shield of Virginia. From 2008 to 2012, she served as commissioner of health for the Commonwealth of Virginia, during which the state saw significant improvements in key public health indicators including teen pregnancy, infant mortality and cardiovascular disease.

Her career includes senior leadership positions for several healthcare organizations, including Operation Smile Inc., Physicians for Peace, and Sentara Healthcare. Dr. Remley earned an MBA from the Fuqua School of Business at Duke University.

Dr. Remley will be the first female CEO of the AAP.

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