



# The Alabama Pediatrician

Second Quarter 2016

## From the President

### These are the Days of Our Lives



Cathy Wood, MD, FAAP  
Chapter President

Growing up in rural Autauga County, my summers were farm girl summers – a lot of gardening, gathering, prepping and canning. There was no down time until late in the day, except for 30 minutes to watch the soaps with my grandmother while we shelled, peeled,

and diced something. Her favorite was “Days of Our Lives.” Others were “Search for Tomorrow,” “As the World Turns,” and “The Young and the Restless” – all titles that are pretty descriptive of our Medicaid funding crisis that is never-ending.

In May, I attended a Medicaid hearing where Commissioner Stephanie Azar made an excellent presentation to a group of legislators, who made an effort to attend even while not in session, in an attempt to relay the significance of cuts to the Medicaid budget. I think she had some impact. After attending her presentation, it is evident to me that cuts threaten providers more than any other entity because of statutory protection. Eighteen percent of Alabama physicians provide care to 75 percent of Medicaid recipients – most of those providers are pediatricians. We are likely to be the first target of cuts if/when they happen. At this moment, we are in a state of suspension with delays for RCO implementation established, questions about special sessions, and lots of hand-wringing/head-scratching by providers.

Now what??? Take a deep breath, exhale, count your pulse, and continue to work to educate our lawmakers and educate/involve our patients who are the bottom line in this funding crisis. The “face of Medicaid” will ultimately be the motivator for change, and we are the voice. I know the process is maddening and exhausting, but we must stay at the

continued on page 2

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

Make sure your calendars are marked for September 30-October 2, 2016 for the Alabama Chapter-AAP's 2016 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 health literacy, blood disorders and anemia, and GERD, 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, patient confidentiality, payors and coding, patient-centered medical home and more! The workshop will be followed by a two-hour Loss Prevention seminar, sponsored and presented by ProAssurance Indemnity.

**Earn 20 MOC Part II Points and/or gain CME on adolescent medicine.**

This year, we will once again conduct a special 20-point Maintenance of Certification Part II group activity, 2014 and 2016 Adolescent Medicine Self-Assessment, facilitated by Morissa Ladinsky, MD, FAAP, on Sunday, October 2. Attendees will come away with both CME and 20 points of MOC Part II. This year's session will also be approved for CME locally, so attendees who are not enrolled in MOC Part 2 will be able to attend as well.

Look for registration details in your mailboxes soon and on the Chapter web site at [www.alaap.org](http://www.alaap.org)!

continued on page 2

## Legislative Session 2016

### Medicaid funding battle a constant uphill climb in legislative session

As most members know, the 2016 Regular Session of the Alabama Legislature ended in early May with an \$85 million hole in the budget for Alabama Medicaid, leaving child and healthcare advocates tired and hanging in limbo. The entire session was spent in earnest as advocates clocked countless hours getting the word out to the public and legislators on the importance of full funding.

On March 22, the Alabama Chapter-AAP partnered with VOICES for Alabama's



continued on page 3

### Chapter Office and Staff Alabama Chapter – AAP

- Linda P. Lee, APR  
Executive Director
- Linda M. Champion, MPA  
Project Coordinator
- Jill H. Powell  
Meeting and Membership  
Coordinator

19 S. Jackson St.  
Montgomery, AL 36104  
(334) 954-2543  
Toll-free (866) 293-4783  
Fax: (334) 269-5200  
llee@alaap.org  
www.alaap.org

### 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.

### Annual Meeting continued from page 1

## Are you due for your MOC Part II? Or want to take a “deep dive” in adolescent medicine?

- 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 as “highly interactive and clinically useful”

### Join us on October 2 at the 2016 Annual Meeting for our Part II MOC Session Offering\*:

2014 and 2016 Adolescent Medicine Self-Assessment (20 Points total MOC Part II)  
Morissa Ladinsky, MD, FAAP  
October 2, 2016 – 9 am – 12:00 pm

These self-assessments together contain approximately 30 items that address a broad range of topics in adolescent medicine.

\*This year, Chapter members who are not enrolled in MOC WILL be able to attend and receive CME locally.

## News from Medicaid

### Budget shortfall prompts Agency to seek delay for RCO start date

Citing the current lack of funding for the 2017 fiscal year, the Alabama Medicaid Agency announced May 9 that it is seeking to delay the October 1, 2016 start date for Regional Care Organizations. A revised start date has not been determined, according to Medicaid Commissioner Stephanie Azar. With the delay, contract deadlines have also been indefinitely extended. Stay tuned for more information via our e-newsletter, Alabama Pediatrician Briefing.

### RCO Contracts: What you need to know

In late April, Medicaid providers were sent communications from several of the RCOs with a tight deadline to return contracts. Since then, the RCOs have been delayed, allowing everyone more time to address contracts. Bear in mind that there are many similarities and standard language in the contracts across RCO organizations, but pediatricians are strongly encouraged to have an attorney review all contracts prior to signing. The Medical Association of the State of Alabama offers this guidance for Alabama Medicaid physicians: <http://tinyurl.com/hyh8quw>.

### From the President continued from page 1

table and in the game.

As a parting thought, it is summer. Enjoy your children and the absence of RSV, flu, etc. Take a great vacation, finish some long overdue project, read a good book, and catch up with old friends. Say your “Serenity Prayer” and press on; these are the “Days of Our Lives.”

## Legislative Session continued from page 1

Children for its annual Legislative Day, which proved to be a huge success as we advocated together for additional Pre-K funding (see sidebar story) and adequate funding for Medicaid.

In April, the Chapter conducted a survey of members to ask them what would happen to their practices if severe cuts occurred, and then contracted with a public relations consultant to conduct a media blitz showcasing that feedback, including a hosted media conference call with four state pediatricians, Bhagwan Bang, MD, FAAP, of Opp; Meg Moore, MD, FAAP, of Fairhope; Tracy Tindle, MD, FAAP, of Birmingham; Eric Tyler, MD, FAAP, of Alex City; and Chapter President Cathy Wood, MD, FAAP, of Montgomery. The effort resulted in more than 60 stories in the media.

But the biggest applause goes to the pediatricians in the trenches, who spent many hours using both traditional and social media to spread the message. The two pervasive campaigns, #CanYouHearUsNowAL and #IamMedicaid,



resulted in hundreds of tweets and Facebook posts from pediatricians and other advocates from across the state, whose outcry was heard by legislators and the public.

The Chapter leadership offers its heartfelt thanks to all members who took the time to participate.

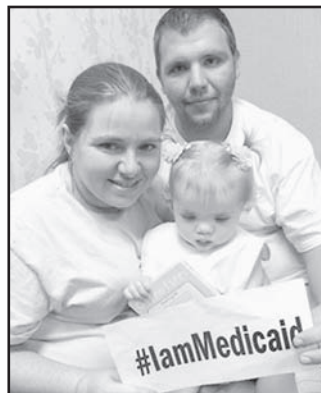
### **What now? Keep up the fight**

The fight isn't over! Although we are hearing that legislators are working hard to come up with a solution to minimize cuts, we should continue the drumbeat.

Here are two things the Chapter asks you to do:

1. Continue to use the #IamMedicaid hashtag on Facebook and Twitter, using the faces of your Medicaid patients (with the appropriation permissions, of course!) to humanize Medicaid so that the public understands who is covered by Medicaid—they might be surprised!
2. Take a little time and make personal contact with your legislators over the summer, while they are at home in their districts, to explain why this issue is so important to you and to the children you serve. It is especially important to reach out to your Senator.

Look for our e-news alerts for steps on how to help in both of these areas, and remember, keep your chin up!



## All is not lost: Pre-K funding is bright spot for children

In May, Governor Robert Bentley announced 155 new First Class Pre-K grants for the upcoming school year, bringing the total number of high-quality, voluntary First Class pre-kindergarten classrooms to more than 800 statewide. Approximately 25 percent of the state's four-year-olds will have access to a classroom in their community next school year.

That announcement was possible thanks to the Alabama Legislature appropriating an additional \$16 million in funding for the 2016-2017 school year, bringing the total funding to \$64.5 million for the year. The good news is a next step in the Alabama School Readiness Alliance (ASRA)'s a multi-year advocacy campaign to encourage full funding of the First Class Pre-K program by the 2022-2023 school year. ASRA estimates that a level of funding of \$144 million is needed for the First Class Pre-K program to serve every family in Alabama that wants to enroll their child.

"We are grateful that state leaders once again prioritized some of the growth in the Education Trust Fund budget to expand Alabama's high-quality, voluntary First Class Pre-K program," said pre-k advocate Allison Muhlendorf, ASRA executive director.

For ten years in a row, Alabama's First Class Pre-K program, which is managed by the Alabama Department of Early Childhood Education, has been ranked the number one state-funded pre-kindergarten program in the country for quality by the National Institute for Early Childhood Education.



## How to Contact Your Chapter Leaders

### President

Cathy Wood, MD, FAAP  
Ph: (334) 272-1799  
[cdocwood@aol.com](mailto:cdocwood@aol.com)

### Vice President/President-elect

Wes Stubblefield, MD, FAAP  
Ph: (256) 764-9522  
[stubblefield.wes@gmail.com](mailto:stubblefield.wes@gmail.com)

### Secretary/Treasurer

Katrina Skinner  
Ph: (251) 928-5568  
[katski@bellsouth.net](mailto:katski@bellsouth.net)

### Immediate Past President

Michael Ramsey, MD, FAAP  
Ph: (334) 793-1881  
[mj\\_ramsey@msn.com](mailto:mj_ramsey@msn.com)

### Area 1 Rep. (Huntsville)

Kevin Ellis, MD, FAAP  
Ph: (256) 265-2464  
[kellis@huntsvillepediatrics.com](mailto:kellis@huntsvillepediatrics.com)

### Area 2 Rep. (Tuscaloosa)

Bruce Petitt, MD, FAAP  
Ph: (205) 752-7337  
[bpetitt@westalabamaped.com](mailto:bpetitt@westalabamaped.com)

### Area 3 Rep. (Birmingham)

Kenneth Elmer, MD, FAAP  
Ph: (205) 206-8480  
[kelmer@swclinic.org](mailto:kelmer@swclinic.org)

### Area 4 Rep. (Anniston)

Naresh Purohit, MD, FAAP  
Ph: (256) 721-9799  
[narpur@aol.com](mailto:narpur@aol.com)

### Area 5 Rep. (Troy)

Elizabeth Dawson, MD, FAAP  
Ph: (334) 566-7600  
[nelso71@hotmail.com](mailto:nelso71@hotmail.com)

### Area 6 Rep. (Mobile)

Norma Mobley, MD, FAAP  
Ph: (251) 344-7044  
[drmobley@mobilepeds.com](mailto:drmobley@mobilepeds.com)

### CME Chair

David Gremse, MD, FAAP  
Ph: (251) 434-3919  
[dgremse@health.southalabama.edu](mailto:dgremse@health.southalabama.edu)

### UAB Pediatric Residency

Program Rep.  
Cason Benton, MD, FAAP  
Ph: (205) 638-9585  
[cbenton@peds.uab.edu](mailto:cbenton@peds.uab.edu)

### USA Pediatric Residency

Program Rep.  
LaDonna Crews, MD, FAAP  
Ph: (251) 434-3917  
[lmcrews1@aol.com](mailto:lmcrews1@aol.com)

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

The Chapter's 2016 Spring Meeting & Pediatric Update, held April 28 – May 1 at Grand Hotel Marriott Resort, was once again a weekend of top-notch education and networking, following a stressful winter and spring for Alabama pediatricians.

National and state speakers provided superb presentations on topics addressing sedation, child abuse, breastfeeding, adolescent medicine, ADHD, mental health, and substance abuse and cannabis. Chapter members were also able to hear from Medicaid RCO representatives, who engaged attendees with a very informative panel discussion on what to expect with the future Regional Care Organizations, led by Immediate Past President Michael Ramsey, MD, FAAP.

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



Exhibitors help support our meeting, and this year, the exhibit hall was once again a festive mix of networking, information and door prizes!



Nola Ernest, MD, FAAP, of Troy, and her boys enjoy some family fun, which was an integral part of the Pentathlon activities.

pleased to have the participation again of five medical students from UAB, USA and the Alabama College of Osteopathic Medicine in Dothan, whose attendance was made possible through scholarships provided by practices from across the state.

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 \$8,000 for Reach Out and Read (see article in the "Reach Out and Read All About It!" section on page 8)! Many thanks go to Michael Ramsey, MD, FAAP, Immediate Past President, for chairing the event this year.

Make plans now to attend next year's Spring Meeting, set for May 4 - 7, 2017 at the Sandestin Golf & Beach Resort!



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

Keeping the **game fair...**



...so you're not **fair game.**

As an Alabama physician, your profession  
is getting hit from all angles.

You need to stay focused and on point—  
confident in your coverage.

Get help protecting your practice,  
with resources that make important  
decisions easier.



**PROASSURANCE.**  
Treated Fairly



**Healthcare Liability Insurance & Risk Resource Services**

ProAssurance Group is rated **A+ (Superior)** by A.M. Best.

Want to reduce risk? >> [ProAssurance.com/Seminars](http://ProAssurance.com/Seminars)



800.282.6242 • [ProAssurance.com](http://ProAssurance.com)

## Chapter produces medical home posters to educate parents about getting care in the medical home

In the last issue of *The Alabama Pediatrician*, the Alabama Chapter-AAP promoted use of its poster, "Don't take shortcuts with your children's health!" for member pediatricians to remind parents about the importance of getting care in their pediatric medical home rather than by using urgent care clinics or national telephone care companies.

As a reminder, if your practice needs more posters, please contact the Chapter office at [llee@alaap.org](mailto:llee@alaap.org) or 334-954-2543.

The talking points are printed on the right.

## Don't take shortcuts with your children's health! Put a "Medical Home" Roof Over their Heads!

As you may know, some parents are opting to use urgent care, national telephone care companies and in-store clinics for their children's healthcare. As your child's pediatrician, I ask you to consider these facts:

- Children deserve a medical home—a place where their care is accessible, family-centered, continuous, comprehensive, coordinated, compassionate and culturally effective.
- Getting care for your child from multiple healthcare professionals—who do not know your child's total picture—hampers our ability to coordinate the best care for your child. This "fragmenting" of care often results in patient safety and quality problems such as misdiagnosis, too many medicine prescriptions, etc. and compromises the important relationship that we have developed with you in our team approach to your child. Remember, a medical home is a home; "quick care" options are hotel rooms!
- Pediatricians are specially educated and trained in diagnosing and treating your child's care—giving your child a medical home "roof" over his head from birth through high school. We are not just about shots and growth charts, but are concerned with preventing disease and illness across your child's entire spectrum of development—physical, mental, social and emotional. Plus, having an established relationship with his/her doctor teaches your child about how to manage his/her care later as an adult.
- It's "after hours;" when can it wait and when should you call me? As your pediatrician, I'll educate you on getting the best care when you need it.
- Do you really want to walk into a strip mall storefront to find someone to say your child is fit to participate in a particular sport, or get a diagnosis over the phone for your child, when no one in the place or on the other end of the line knows anything about your child?

**Remember, don't take shortcuts with your child's health!**

- Free regional sessions
- Local, hands-on training & unlimited local support
- All payments come direct to you
- Free tools to ease the burden of industry regulations

More MediSYS eligible providers attested to Stage 2 Meaningful Use using our EHR, MedConnect v2.3, than any other vendor.\*

\*Based on data from CMS as of Jan. 2016 for 'complete' certification product classification, for Alabama eligible providers in an ambulatory setting.

**MEDISYS**  
medisysinc.com

**2016 is the *LAST* year to begin Medicaid Meaningful Use.**

**2016 is the last year to start participating in the Medicaid EHR Incentive Program. Eligible Providers can earn a first-year payment of \$21,250 for 2016.**

**BIRMINGHAM**

**205.631.5969**

**MONTGOMERY**

**334.277.6201**

MedConnect EHR v2.3 - This Complete EHR certification is 2014 Edition compliant and has been certified by an ONC-ACB in accordance with the applicable certification criteria adopted by the Secretary of the U.S. Department of Health and Human Services. This certification does not represent an endorsement by the U.S. Department of Health and Human Services or guarantee the receipt of incentive payments. Drummond Group is accredited by ANSI and approved by ONC for the ONC HIT Certification Program to certify: Complete EHR, EHR Module (all), and Certification of other types of HIT for which the Secretary has adopted certification criteria under Subpart C of 45 CFR. Modules Tested: 170.314(a)(1-10); 170.314(b)(1-5, 7); 170.314(c)(1-3); 170.314(d)(1-6); 170.314(e)(1-3); 170.314(f)(1-3); 170.314(g)(2-4) Clinical Quality Measures Tested: CMS502v2; CMS502v2; CMS506v2; CMS509v2; CMS117v2; CMS122v2; CMS123v2; CMS124v2; CMS125v2; CMS126v2; CMS127v2; CMS130v2; CMS131v2; CMS132v2; CMS146v2; CMS147v2; CMS148v2; CMS153v2; CMS154v2; CMS155v2; CMS156v2; CMS163v2; CMS165v2; CMS166v2. Additional software used: Data Motion. MedConnect EHR v2.3 is a 2014 ONC Certified (Complete EHR) solution. This certified product version may require ongoing monthly costs to support online patient education, secure messaging, and drug database access.



**Visit our online calendar to see upcoming deadlines and more!**

Cloud-Based, Affordable Solutions for Your Practice

2014 Certified for Meaningful Use

Connecting Providers through Interoperability

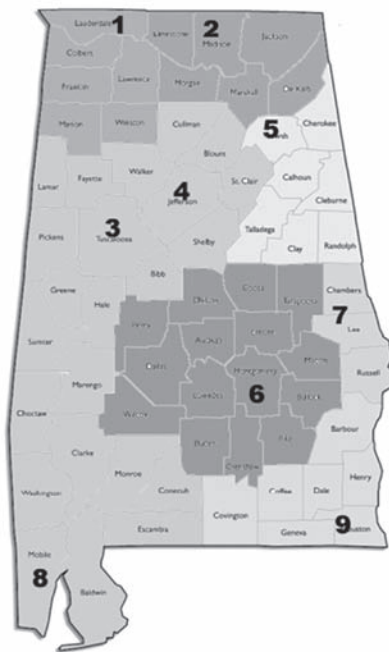


## Get your patients connected to services through Help Me Grow

For several years, the Alabama Chapter-AAP and Reach Out and Read-Alabama has partnered with other early childhood organizations on Help Me Grow (HMG) Alabama, which is a proven model supporting children's optimal development by linking both families and providers to community-based programs and services. HMG Alabama provides the critical service of identifying concerns early, when interventions are less costly and more effective.

The Chapter, most recently through the Alabama Child Health Improvement Alliance, has partnered with HMG to provide follow-up and care coordination support for pediatricians who participated in our developmental screening quality improvement collaboratives in Birmingham and Tuscaloosa. Concurrently, Reach Out and Read was promoted and supported through this effort with the participating practices in those counties.

"This year, the HMG team has been very busy expanding services statewide. Now, every family in Alabama can dial 2-1-1, speak with a HMG care coordinator who can answer questions, connect them to services, follow up to ensure a connection is made and enroll them in developmental surveillance if interested," said Katie Naman, HMG Alabama Director, saying that new funding has allowed the program to expand to nine



2-1-1 regions serving all 67 counties.

Now, HMG Care Coordinators are partnering with Reach Out and Read and will begin reaching out to practices in each of the nine regions to visit and share how HMG services can benefit their practice through time-saving care coordination. The coordinators will work to link the families in your care to needed services, follow up to make sure the service is utilized, and periodically update you on the status of the patient referred.

If you are interested in learning more about Help Me Grow Alabama, please contact [knaman@smartstartalabama.org](mailto:knaman@smartstartalabama.org). Dial 2-1-1 to get connected to your regional care coordinator, or make contact via email using the list in the column on the right.

## Help Me Grow Alabama Coordinators

Region 1: Patricia Locker  
[helpmegrownwal@gmail.com](mailto:helpmegrownwal@gmail.com)

Region 2: Ashley Wagner  
[hmgnorthal@gmail.com](mailto:hmgnorthal@gmail.com)

Region 3: Arkeisha Thomas  
[helpmegrow@ches.ua.edu](mailto:helpmegrow@ches.ua.edu)

Region 4: Danna Perdue-Melton  
[helpmegrow@uwca.org](mailto:helpmegrow@uwca.org)

Region 5: Haley Roberts  
[helpmegrowec@uwoec.org](mailto:helpmegrowec@uwoec.org)

Region 6: Vonetta Zeigler  
[helpmegrow@handsonriverregion.org](mailto:helpmegrow@handsonriverregion.org)

Region 7: Chandler Barrett  
[helpmegrow@unitedwayoffleecounty.com](mailto:helpmegrow@unitedwayoffleecounty.com)

Region 8: Alicia Richardson  
[helpmegrow@lifelinesmobile.org](mailto:helpmegrow@lifelinesmobile.org)

Region 9: Will Francis  
[helpmegrow9@gmail.com](mailto:helpmegrow9@gmail.com)

## Event Calendar

July 13, 2016  
Chapter/PMA Webinar: Risk Management and Custody Issues  
12:15 p.m.

Sept. 30 – Oct. 2, 2016  
2016 Annual Meeting & Fall Pediatric Update  
Hyatt Regency Birmingham-The Wynfrey Hotel, Birmingham, AL

Oct. 22 – 25, 2016  
AAP National Conference & Exhibition, San Francisco, CA

May 4 - 7, 2017  
2017 Spring Meeting & Pediatric Update, Sandestin Golf & Beach Resort, Destin, FL

## Many thanks to our advertisers

ADPH Immunization Division

Belk & Associates

Children's of Alabama

Mesisys

Pediatric Nephrology of Alabama

ProAssurance Companies

**BA**  
BELK & ASSOCIATES  
PLACING YOU FIRST

Family Medicine • Internal Medicine  
Pediatrics • Urgent Care  
Emergency Medicine • General Medicine  
Occupational Medicine • Hospitalist

*Competitive remuneration, mileage, lodging  
and malpractice insurance provided*

**LOCUM TENENS AND PERMANENT JOBS FOR PHYSICIANS**

Karen M. Belk, President  
[KBelk@BelkStaffing.com](mailto:KBelk@BelkStaffing.com)  
[www.BelkStaffing.com](http://www.BelkStaffing.com) • 1.888.892.4DRS  
Send CV to Fax 256.389.9000

## Reach Out and Read All About It!

By Salina Taylor, Development and Communications Coordinator

Third Annual Grand Pediatric Pentathlon another great success

As Reach Out and Read-Alabama celebrates its 10-year anniversary in 2016, we hosted another successful event with our annual Grand Pediatric Pentathlon at the 2016 Spring Meeting, which raised a net of more than \$8,000, bringing the net total raised through this fun, family event over the last three years to almost \$30,000!

With 180 physicians and exhibitors from across the state attending the Alabama Chapter's Spring Meeting in April, close to half of those participated in this year's Grand Pediatric Pentathlon. The Grand Hotel provided a perfect venue for all of 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



where great stories begin™



Pentathlon event chair Michael Ramsey, MD, FAAP, makes it to the finish line with Spring Meeting Speaker Pam Gonzalez, MD, FAAP

including a Regions Bank green cruiser bicycle, a kayak, a FitBit, a YETI cooler, a Go Pro and many others.

"The Grand Pediatric Pentathlon has become a mainstay at our spring CME conference. It provides a perfect opportunity to involve the entire family in our meeting and sends a message about what we do as pediatricians to recommend reading and physical activity," said Michael Ramsey, MD, FAAP, past president and Grand Pediatric Pentathlon chair this year. "The money raised by this event enables those with Reach Out and Read programs to continue to prescribe books to those children who are served by their practices and clinics."

A special thank-you goes to our sponsors: ALL Kids, the Medical Association of the State of Alabama Medical Foundation, Focus MD, the Business Council of Alabama, Jackson Thornton, Hancock Bank and My Care Alabama. In addition, many other organizations provided 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](https://facebook.com/RORAlabama).

Reach Out and Read helps promote literacy through Read and Romp

Read and Romp, a free family literacy event held in Birmingham for the past three years, expanded its reach with the first event in Tuscaloosa last month, thanks to a collaboration of Reach Out and Read-Alabama and numerous other organizations.

On Saturday, May 21, more than 900 children participated in the event's fun, learning-based activity stations themed around favorite children's books. For example, children touched buttons at the Tuscaloosa Public Library station and created a monster craft to take home, based on the book, *Don't Push the Button*. At the Bama Bounders station, participants enjoyed a bounce house based on the book, *5 Little Monkeys*. Face-painting, character visits, and a petting zoo were also part of the event, from which children left with goodies they created from an activity at each station, along with a stamped passport and a bag full of free, brand-new books.

By associating fun-filled activities with reading, parents learned ways to engage with their children on the lifelong journey of learning at an early age, which will help increase their children's success in school.

"Having 14 participating organizations and more than 900 children attend far exceeded our expectations for a first-time event. That level of success shows what can happen when a community is dedicated to ensuring that ALL their children have books in their home and are prepared to enter school and succeed," said Polly McClure, RPh, Reach Out and Read-Alabama Statewide Coordinator.

While focused on books, each station was staffed by child-focused organizations and businesses in Tuscaloosa, which provided families an opportunity to learn about ways to enhance the development and education of their young children.

The Tuscaloosa event was a collaboration of Reach Out and Read-Alabama, Alabama Project LAUNCH, the Tuscaloosa Public Library, United Way's Success by 6, Alabama Public Television and Macaroni Kid Tuscaloosa. Because of the Chapter's participation in Alabama Project LAUNCH, Reach Out and Read-Alabama has expanded from one to four program sites in Tuscaloosa County, serving more than 3,300 children and their families in that area.





## Alabama doctors preventing HPV-related cancers

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

More than 80 percent of cervical cancers could be prevented by HPV vaccination. Yet only 39.6 percent of Alabama's girls are receiving all three doses of the HPV vaccine. To reach the Healthy People 2020 goal of 80 percent vaccine coverage for boys and girls, Alabama practices are turning to quality improvement.



### National Immunization Partnership with the APA

Seven Alabama practices that annually see 6,632 vaccine-eligible patients recently wrapped up a five-state, nine-month, learning collaborative led by the National Immunization Partnership with the APA (NIPA) to complete the HPV vaccine series for boys and girls by 13 years of age. Final results are pending, but initial statements indicate that Alabama practices had the best outcomes!

Congratulations to the NIPA practices: USA Midtown Pediatrics, USA Adolescent Medicine, Adolescent Health Center, Physicians to Children, Pell City Pediatrics, Pediatrics Plus, and Greenvale Pediatrics-Hoover.

### Prevent HPV Cancers! An ACHIA HPV Continuous Quality Improvement Collaborative

This spring, 11 practices with more than 15,035 of vaccine-eligible patients (11 to 18 years of age) kicked off a six-month learning collaborative to increase HPV vaccination rates by delivering a strong provider message and by administering the vaccine at all patient clinic visits. Some practices are implementing standing orders and reminder/recall systems as well. This Alabama collaborative is led by Wes Stubblefield, MD, FAAP, and Ashley Butts-Wilkerson, MD, FAAP, and is very much benefiting from the skills and expertise of our new QI coach, LaCrecia Thomas, RN, CPNP-AC/PC.

Two components new to ACHIA collaboratives will help practices continuously improve long after the collaborative is over. First, practices may track HPV vaccine delivery in the QI database for an additional two years. This data access allows practices to continue to use QI tools such as Plan-Do-Study-Act cycles to improve care as well as to satisfy requirements for other systems, such as Patient-Centered Medical Home recertification.

Secondly, practices are closely working with the Alabama Department of Public Health staff utilizing the Center for Disease Control & Prevention's (CDC) AFIX (Assessment, Feedback, Incentives, and eXchange) quality improvement program and the state's immunization registry, ImmPRINT, to ensure that their systems are aligned with Meaningful Use criteria. "Prevent HPV Cancers!" is funded by the American Academy of Pediatrics and the CDC.

Physicians from both collaboratives are eligible for 25 points of Part IV Maintenance of Certification credit.

*If you are not participating in a collaborative, what can you do to begin this work in your own practice?*

Each year in the US, 27,000 people are diagnosed with cancer caused by HPV. According to the CDC, Alabama's HPV vaccine distribution numbers have not increased dramatically compared to previous years. See the latest on Alabama's distribution trends here: <http://contentedits.com/img.asp?id=34989>.

## What you can do to decrease your patient's risk of HPV cancers:

1. Learn more about HPV cancers as well as tips for talking with parents about the HPV vaccine at the CDC website <http://www.cdc.gov/hpv/hcp/index.html>
2. Make a strong provider recommendation for boys and girls. Consider using this tracking form, being used by practices in our collaborative, to help you put this into practice: <http://contentedits.com/img.asp?id=34988>
3. Never miss an opportunity to complete the vaccine series by 13 years of age. Use standing protocols and reminder/recall systems.

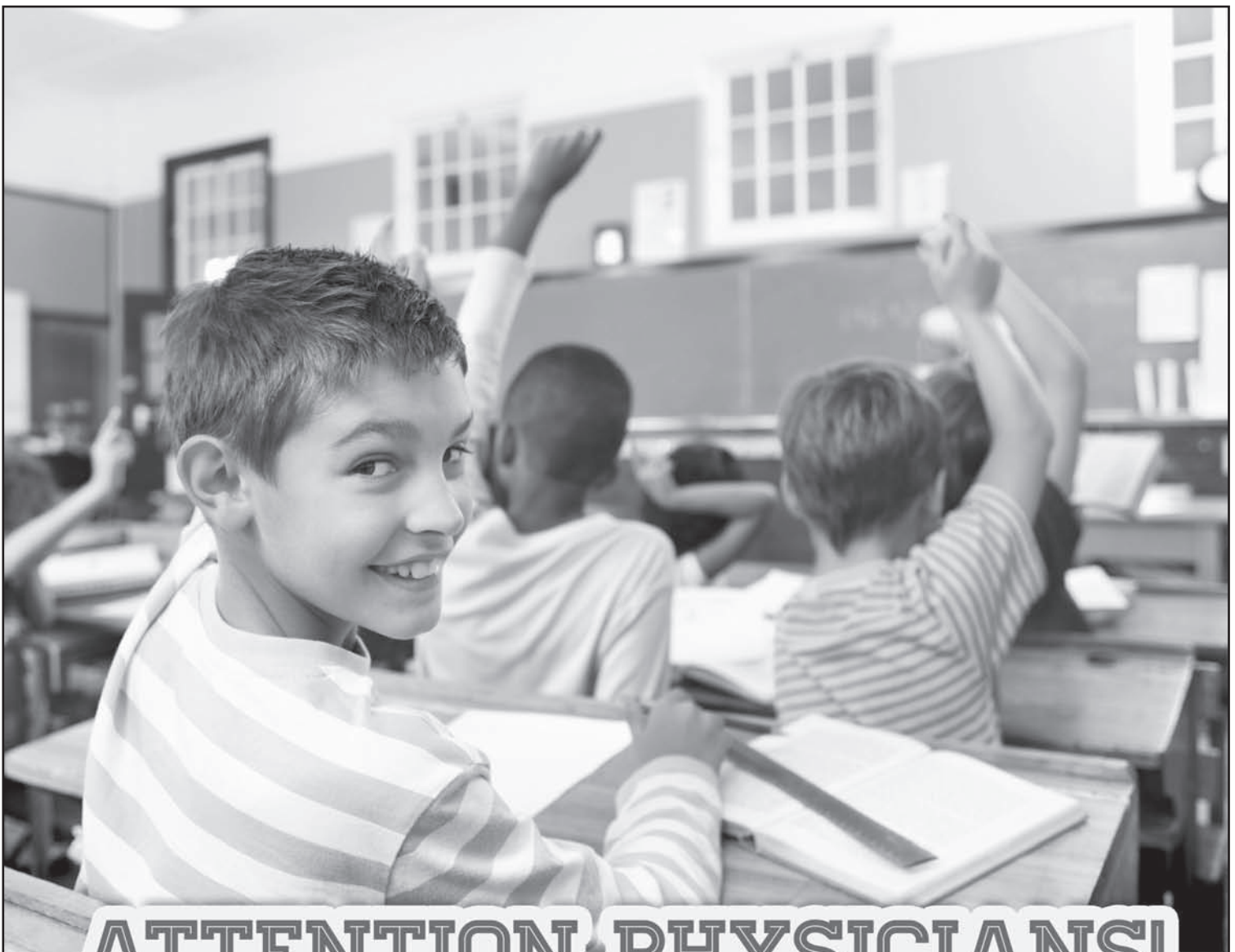
To find out your clinic's vaccine coverage rates as well as more ideas to increase vaccine delivery, and to request an AFIX visit, contact Cindy Lesinger at [immunization@adph.state.al.us](mailto:immunization@adph.state.al.us) or 1-800-469-4599.

## What are the most important topics for primary care pediatricians to address in the next five years?

That is the question participants at ACHIA's upcoming Alabama Q-Sort will answer under the guidance of Matt Fifolt, PhD, Beth John, OTR/L MPHs, and Julie Preskiitt, MSOT, MPH, PhD, from the University of Alabama School of Public Health (SOPH). ACHIA partners, including providers, families, payers, public health experts, hospitals, mental health experts, pediatric and family physician professional societies and federally qualified health centers, will gather in July to prioritize child health measures. The SOPH analysis of the results will guide ACHIA's selection of learning collaborative quality improvement topics for the coming years in order to develop collaboratives where there is high consensus regarding importance and feasibility.

Additionally, this proactive Q-Sort allows ACHIA to more fully integrate community supports for practices and patients into future collaboratives and gives practices a longer timeline to select collaboratives in which they want to participate.





# ATTENTION-PHYSICIANS!

# GET READY

Alabama requires all students in grades 6-12 to have a Tdap vaccine.

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

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



**ADPH.ORG**

IMM.AE04.20.16

ALABAMA  
PUBLIC  
HEALTH

## Let's hear it from our Departments of Pediatrics!

### Developing a policy for management of unvaccinated patients

*By Mitch Cohen, MD, FAAP, Chair, Department of Pediatrics, University of Alabama at Birmingham*



Mitch Cohen, MD, FAAP

I have asked David Kimberlin, MD, FAAP, who is the co-director of our Division of Infectious Diseases and editor of the Red Book, to develop a departmental policy for the

management of unvaccinated patients. Our goal is to partner with primary care physicians to improve the health of the children of Alabama while not creating risks for our medically compromised patients or putting up barriers to care. We also wanted a department policy that was uniform from division to division. We welcome your feedback and offer our assistance with this new policy.

### Unvaccinated Patients

*By David Kimberlin, MD, UAB Pediatrics*

The UAB Department of Pediatrics has created a policy for the management of unvaccinated pediatric patients being cared for by departmental faculty at Children's of Alabama. This policy strongly supports the American Academy of Pediatrics in its advocacy of promoting vaccines as life-saving medicines. The Department's position is that all children should be fully immunized utilizing the current vaccine schedule. This position recognizes that the "on time" delivery of vaccines is the only effective way to prevent what have in the past been severe and often fatal childhood illnesses, and that delaying any of the recommended vaccines greatly increases the period of time that a child remains susceptible to these diseases. Equally important, delays in immunizing children who do not have medical reasons to defer vaccination puts the immunocompromised or medically fragile patients that we care for at Children's

of Alabama at risk of these life-threatening diseases (the "waiting room effect"). In developing this policy, a number of physician leaders from around the Birmingham region and the state of Alabama were consulted to ensure that access to Departmental subspecialty services is not impeded.

The Department's Policy on Vaccination is summarized as follows:

- All children should be immunized according to the current vaccine schedule, unless there is a valid medical reason to not do so (a "medical exemption").
- For parents who are known to not follow the current vaccine schedule for their child/children, materials on the Department of Pediatrics web site can be provided to the parent during the healthcare encounter. This will occur even if the encounter is for a medical reason other than a vaccine-preventable illness.
- If a child who is unimmunized and without medical exemption is referred to a subspecialist within the UAB Department of Pediatrics, it is requested that physicians from the Pediatric Infectious Diseases division see the patient initially in the Infectious Diseases Clinic to discuss with the parent(s) the positive impact afforded by vaccines both to individual children and to society as a whole. This is designed to be a mechanism to collaborate with the referring primary care physician to advocate for vaccination. While we request such a visit, we will not require it, and it is up to the primary care physician to determine who might benefit from such a referral. Appointments may be made by calling 205-934-2441. We will work to coordinate this visit with the other subspecialty referral appointment to minimize inconvenience for the family.
- Immunization schedules for 2016, the UAB Department of Pediatrics policy for management of unvaccinated pediatric patients, and materials to encourage parents to vaccinate can be found at [www.uab.edu/medicine/peds/infectious](http://www.uab.edu/medicine/peds/infectious).

### USA Pediatrics: Focus on Global Health

*By David Gremse, MD, FAAP, Chair, Department of Pediatrics, University of South Alabama*



David Gremse, MD, FAAP

While global health has historically been viewed as international health (often thought of as pertaining to issues outside of our borders), there is an increasing appreciation of the borderless nature

of health in our globalized society. Kopan et al define global health as "an area for study, research, and practice that places a priority on improving health and achieving equity in health for all people worldwide."

For the pediatric trainee or practicing pediatrician, a globally relevant skillset is crucial in providing care to the increasingly diverse population that exists everywhere in the country, particularly in a port city such as Mobile.

Providing global health experiences during residency training has been challenging due to federal regulations regarding reimbursement of resident salaries by the Centers for Medicare and Medicaid Services based on duty hours within the teaching hospital. This year, Franklin Trimm, MD, FAAP, Pediatric Residency Program Director at the University of South Alabama (USA), arranged for funding to offer global health experiences within the residency program.

Dan Blatt, MD, a second-year resident, traveled with 12 USA medical students and five USA faculty to Kibogora Hospital in Rwanda. Delivering patient care relying on history and physical examination rather than technology accelerates development of critical thinking skills and clinical judgment. The experience was summed up by one of our medical students who said: "It stretches your abilities and allows you to grow professionally."



## Public Health News

### ADPH responds to new measles cases

In light of 11 cases of measles associated with an Arizona Immigration and Customs Enforcement detention center in May, the Alabama Department of Public Health (ADPH) located four people who came to Alabama after possible exposure to measles. As of the end of May, the ADPH determined that these four people did not have signs of measles, but they would be vaccinated and monitored for 42 days for any illness.

"It is important for everyone to understand that communities with groups of unvaccinated people are vulnerable to measles outbreaks. At least 95 percent of people in a community need to be immunized for measles to achieve herd immunity," said Karen Landers, MD, FAAP, pediatrician and medical consultant for the ADPH Immunization Division. "Herd immunity protects the people who received the vaccine as well as children too young to be vaccinated, persons with medical conditions preventing vaccination, and the less than 3 percent of people who do not respond to the vaccine."

Parents need to vaccinate their children according to the Advisory Committee on Immunization Practices immunization schedule. State law requires children to be up to date on their vaccinations prior to attending child care centers and school, which includes MMR (measles, mumps and rubella).

Any people who suspect they have measles should be promptly screened before entering medical waiting rooms and appropriately isolated, or have their office appointments scheduled at the end of the day to prevent exposure of other patients.

For more information, visit [adph.org/immunization/](http://adph.org/immunization/).

## Harness the power of Twitter to promote pediatric messages

By Elizabeth Dawson, MD, FAAP, Charles Henderson Child Health Center, @endawson75



Twitter is a powerful tool for organizations and individuals to amplify a message, connect with new networks, and gain access to local, state, and national decision-makers. It is very popular among younger parents and patients. I became interested in it when I got involved in legislative advocacy. It is essentially a way for people to rally from their homes and offices. The beauty of it is that with a #hashtag, you can track messages from all over the world about a subject.

Pediatricians can be part of an exchange of ideas around child health while not being limited by time or geography. The messages are short and sweet (140 characters or less) and can include photos.

One of the daunting things about Twitter is the terminology, and, as you probably know from popular media, once you "tweet" something, you can't take it back. Getting started is easy with the steps below. You can do it from your laptop, smartphone, or other device.

**Handle:** Your username (@username). Handles should be short, easy to read, and convey an identity consistent with the user's goal.

**Followers:** Users on Twitter who choose to follow you. And in turn, when YOU follow other people/organizations, their messages will show up in your Twitter feed (a list of tweets) and if you are inclined, it is easy to "retweet" something they have posted. You might want to follow @AmerAcadPeds and @AAPnews, for instance, as they have links to important health news you can share. Who you follow is public information.

**# Hashtag:** Hashtags categorize content on Twitter by topic of conversation. These are now being used on Facebook as well. By clicking on a hashtag, you can see all of the tweets that include the hashtag e.g., #putkids1st. This includes people you are not following.

**Mention (@):** A way to reference another user by username in a tweet, like tagging on Facebook. Users are notified when mentioned. This is a way to get more followers & get other followers to look at things you are following.

**Reply (@username):** If you hit reply, this starts a message with @username and only the two users see it. If you put .@username, then all of your followers will see it. If you put @username in the body, then that is a mention (see above).

**Retweet (RT):** Re-sharing someone else's tweet. There is a button in Twitter to easily do this.

Instructions for opening a Twitter account:

1. For your computer, go to <https://twitter.com/signup>.
2. For your smartphone, instructions are provided in the following links: iPhone app <http://ow.ly/BMSF1>, Android app <http://ow.ly/BMSIZ>, and Windows phone app <http://ow.ly/BMSSK>. The app is in the various app stores.
3. Click "Sign up for Twitter." Enter your name and email address and create a password.
4. Select a username – Twitter will let you know if it is available. This is an important step. You want it to say something about you but be short, so it doesn't use up all of the characters in your tweets.
5. Review your user name and account detail and click "Create My Account."
6. You will receive a confirmation email and click to open your account.
7. You can go to <http://ow.ly/BMTma> for instructions on how to post your first tweet.
8. Once you've activated your account, choose a photo for your profile. This is important, because it is the first thing others see. You can also put a few statements about yourself.

As with most things, the best way to learn about it is to get started. Twitter will give you a powerful way to get your message out about ways kids can stay healthy and important political issues. You can also open a Twitter account and never post anything, but just use it to follow people, news and movements.

Most federal, many state and local decision-makers use Twitter. It is an excellent way to show them that you are paying attention and to send them a message publicly to demonstrate that people are

## Coding

**O** By Lynn Abernathy Brown, CPC

**r** Initial or subsequent: What to choose for the injury

**n** With summertime here, more injuries including insect bites may present to your office.

**e** Below are two scenarios that may be encountered when searching for an ICD-10 diagnosis code.

**r** **Injury Scenario:** A patient sustained a concussion without loss of consciousness last week when a soccer ball hit her in the head. She was seen in the emergency department on the day of the injury. Two days later, she is seen by her pediatrician for the first time as a follow-up of the concussion and she is improving. On that visit, the pediatrician determines ICD-10 code S06.0X0#, Concussion without loss of consciousness, but wonders whether to use A, initial encounter, or D, subsequent encounter, as the 7<sup>th</sup> digit. Because this is a follow-up to an episode of care (concussion) and the patient is in the recovery stage, the visit would be coded S06.0X0D, subsequent encounter. Additionally, the pediatrician can code “how” the injury occurred using W21.02XD, Struck by soccer ball, subsequent encounter. Each follow-up visit after this, when there is no active treatment but only routine recovery from the concussion, the ICD-10 will continue to be S06.0X0D.

When trying to locate the ICD-10 code for an injury, keep in mind that any injury can be located by first searching the body part, then the type of injury such as superficial which includes contusion, abrasion, blister, foreign body, and insect bite plus open wound, fracture, and more complicated problems. For pediatricians using EMRs to search for codes, this has proven to be a little more complicated because of the number of types of injuries to a certain body part with the multiple encounter types.

Below is another common scenario that will be seen in just about every office:

**Insect Bite Scenario:** A patient presents with swelling, itching and redness on the lower left leg. He has not been seen by anyone else for this problem. After examination and discussion with the patient, the pediatrician determines the problem is due to an insect bite and chooses ICD-10 diagnosis code S80.862A, Insect bite (nonvenomous), left lower leg, initial encounter. Because the ICD-10 code starts with S or T, the documentation includes the date of onset which is necessary in order to bill the diagnosis code to the insurance payor.

Just like in the above scenario, the injury in ICD-10 will be located by first searching the body part, then the type of injury.

As a reminder, any ICD-10 diagnosis code beginning with V – Y (External Causes of Morbidity) would not be used as a primary diagnosis. These codes indicate how an injury occurred. They can also be used on the claim as a secondary code but, while informative, they are not mandatory in a physician office setting. The most often miscoded injury is Insect Bite. When searching for Insect Bite, pediatricians often find Bitten or Stung by nonvenomous insect, W57.XXX# but this code cannot be used as the primary diagnosis.

*DISCLAIMER: Children's of Alabama does not accept responsibility or liability for any adverse outcome from the advice of Lynn A Brown. Any statement made by Lynn A Brown, CPC does not imply payment guarantee by any payor discussed.*

### Best Practices continued from page 12

contacting them. I recommend doing this in a respectful manner, so as not to detract from your message.

Check out #CanYouHearUsNowAL and #IamMedicaid to see the power of Twitter in the recent Medicaid financing debate. Google those #hashtags to see all the posts. And if you want to schedule tweets and Facebook posts in the future, check out Hootsuite in the app store, which can schedule posts for you.

I look forward to seeing your tweets!

## The Beneficial Scribe

By Rosalyn Rowley,  
AL-AAP Practice Management  
Association Chair

A medical scribe is a revolutionary concept in modern medicine. The implementation of Electronic Health Record (EHR) and the increased standards of insurance companies have created an overload of documentation and clerical responsibilities that bog physicians down and interfere with patient care.

The use of a scribe allows the physician to spend more time with the patient while ensuring accurate documentation.

Scribes should have a number of skills to adequately perform the job, including:

- Medical terminology
- Recognition of the physical exam process and ability to record exam details
- Computer proficiency
- Ability to multi-task and act calmly in busy or stressful situations

There are several ways to determine the effectiveness of a scribe using objective metrics. They include relative value units per hour, number of patients seen per hour, clinical versus administrative time, average charge per billable visit, number of incomplete charts, check-in to check-out time, and patient satisfaction.

A medical scribe is essentially a personal assistant to the physician, performing documentation in the EHR, gathering information for the patient's visit, and partnering with the physician to deliver the pinnacle of efficient patient care. This concept allows the provider to focus on the patient without hiding behind a computer.

Consider adding this model to your practice, if you haven't already, to increase your efficiency in this busy world of healthcare as we now know it.

## Public Health continued from page 12

### Zika virus update

In late May, the Alabama Department of Public Health reported the fourth and fifth travel-related cases of the Zika virus in Alabama residents. The positive specimens were from residents of Houston and Jefferson counties. In February and March, Zika cases were reported in residents of Morgan, Jefferson and Shelby counties.

State Health Officer Tom Miller, MD, said, "We have implemented enhanced surveillance with these two cases. The Department's Bureau of Clinical Laboratories in Montgomery can now perform Zika testing, so we have a greater opportunity to prevent transmission of the disease because test results are received much faster. We continue to work with the medical community to identify high-risk individuals."

Enhanced surveillance means individuals with Zika will be asked to provide the names of their household and sexual contacts. These contacts will be asked if they have Zika symptoms and to use insect repellents to prevent mosquito bites that could lead to possible disease transmission.

ADPH is taking steps to ensure that youth and parents understand how to protect themselves from the virus. The department has created Zika coloring books that present prevention information in an educational and fun format.

"We have two goals: to educate youth and engage them and their parents in the process of protecting themselves. We believe this coloring book will accomplish both goals," said Bureau of Environmental Services Director Sherry Bradley.

Coloring books will be distributed to public schools statewide as well as to private schools that have provided contact information.

Learn more about the Zika virus and emergency preparedness, at [www.adph.org/mosquito](http://www.adph.org/mosquito).

## CHAPTER BRIEFS

### Pediatrician educates on poverty cycle

Kudos to Jaime McKinney, MD, FAAP, Chapter CATCH Coordinator and professor of general pediatrics at the University of Alabama at Birmingham Department of Pediatrics, for organizing an AAP Leonard P. Rome CATCH Visiting Professorship program, Poverty Status, Education, Health Equity in Children and Adolescents, and town hall meeting in April at the Children's of Alabama.

Dr. McKinney was part of a panel of physicians and educators, who discussed the complications of childhood poverty and what can be done to improve the quality of life in Alabama, a poor state that consistently ranks among the lowest in categories pertaining to child poverty.

"Frederick Douglass once said, 'It is easier to build strong children than to repair broken men,'" said Dr. McKinney, who moderated the event. "I think that really encapsulates what we are trying to do."

UAB Department of Pediatrics is taking further action to implement community outreach efforts with Birmingham City Schools, and the Pediatric Residency program is expanding its community advocacy investment with this upcoming curriculum.

### Anz presented MASA's Burleson Award

In April, Linda H. Anz, MD, FAAP, of Pediatric Clinic, LLC, in Opelika, was presented with the Medical Association of the State of Alabama's Paul W. Burleson Award, in recognition of a medical career that encompasses not only high ethical and professional standards in patient care, but includes extraordinary service to physician organizations at the county, state and national levels.



Jerry Harrison, MD, (left) and Buddy Smith, MD (right) present Dr. Anz with the Burleson Award at the Medical Association's Annual Session.

Dr. Anz has a long history of service and contributions to both the leadership of the American Academy of Pediatrics (AAP) and the Alabama Chapter-AAP, as well as pediatric medicine in Alabama. In addition to serving on the Executive Board and as President of the Chapter from 1997 to 1999, she served as District X Vice Chairperson from 2005 to 2008, as well as Chair of the National Nominating Committee, of which she was a member from 2002 to 2005.

The Burleson award is named in recognition of Paul W. Burleson, MD, an Alabama physician and renowned benefactor.

Congratulations, Dr. Anz!



Dr. Lester's daughter accepts his award from Medical Association board members Jerry Harrison, MD, and Buddy Smith, MD.

### Lester honored with Buford Word award

Congratulations to Richard "Dick" Lester Jr., MD, FAAP, of Huntsville, recipient of the Medical Association of the State of Alabama's 2016 Samuel Buford Word Award.

The award is the highest honor given by the Medical Association and is presented in recognition of service to humanity beyond the usual scope of medical practice, with such services having been rendered at some personal sacrifice.

Dr. Lester cared for the Huntsville community for more than 40 years as a general pediatrician, joining a colleague to form Huntsville Pediatric Associates. He would often make house calls, taking his wife and children along on the visits.

He also served as chair of the Huntsville Hospital Medical Education Committee, the Continuing Medical Education Committee, and the Department of Pediatrics. He developed the Neonatal Ethics Committee for the hospital in

**continued on page 15**



### Chapter Briefs continued from page 14

the 1980s, which expanded to become the Medical Ethics Committee, and he remained the chair until his retirement. In addition, he was very active in his local community, serving as president of the Huntsville Arts Council and the Huntsville Symphony Orchestra Association, and as a board member of the Huntsville Ballet and The Children's Theater.

### UAB announces faculty scholars program recipients

Recently, the University of Alabama at Birmingham Office of Faculty Development announced the inaugural class for the Department of Pediatrics Faculty Scholars Program. The following Chapter members were among the recipients: JR Hartig, MD, PhD, FAAP, General Pediatrics & Adolescent Medicine; Morissa Ladinsky, MD, FAAP, General Pediatrics & Adolescent Medicine; Cassi Smola, MD, FAAP, Pediatric Hospital Medicine; and Stephenie Wallace, MD, MSPH, FAAP, General Pediatrics & Adolescent Medicine. This one-year program is designed to strengthen the school's cadre of teaching faculty and support the development, implementation, and evaluation of innovative curricula designed to improve pediatric graduate medical education.



Cason Benton, MD, FAAP

### Benton selected for MOC Portfolio Review Panel

Cason Benton, MD, FAAP, of UAB Department of Pediatrics and Director of the Alabama Child Health Improvement Alliance, has been selected to serve on the American Academy of Pediatrics (AAP) Maintenance of Certification (MOC) Portfolio Review Panel. Under the purview of the AAP Quality Cabinet, review panel members provide ongoing review and critique of Part IV MOC applications, bi-annual project reports, and final reports for projects submitted through the AAP MOC Portfolio.

Congratulations, Dr. Benton!



Alabama had a nice contingent of representatives at the AAP's recent Legislative Conference in Washington, DC, including (back row, left to right) Myriam Peralta-Carcelan, MD, FAAP, Norma Mobley, MD, FAAP, Justin Schwartz, MD, FAAP and Erin Boyd, MD; (front row) Marsha Raulerson, MD, FAAP, and Elizabeth Dawson, MD, FAAP.



## PEDIATRICS 24/7, 365 IT MATTERS

When a patient goes in for a surgical procedure at either of our two locations, that child receives world-class care from board-certified pediatric professionals:

- surgeons ● anesthesiologists ● nurse anesthetists
- OR nurses ● OR scrub technicians ● respiratory therapists
- recovery room nurses and ● support staff.

Everyone on our staff made the choice to work with children and their families.

## Choose Children's.

We offer a full complement of surgical services from ear tubes to cardiovascular procedures to delicate surgeries on neonates weighing less than 1 pound.

### Russell Campus

18 surgical suites + 2 CV suites  
1601 5th Avenue South  
Birmingham, Alabama 35233  
205.638.9777

### Children's South Outpatient Center

6 surgical suites  
1940 Elmer J. Bissell Road  
Birmingham, Alabama 35243  
205.638.3217



Children's  
of Alabama®

# American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN™



Alabama Chapter

19 S. Jackson St.

Montgomery, AL 36104

Presorted Std  
U.S. Postage  
**PAID**  
Montgomery, AL  
Permit #456



## PEDIATRIC NEPHROLOGY of Alabama

 Best Doctors®

Mark Benfield, MD

### OFFICES in Birmingham, Huntsville and Montgomery

- Over 20 years of experience in caring for children and young adults with kidney disease
- Renal ultrasound and lab in office
- Caring for children birth-25 years of age
- Accept all insurance including Medicaid and Medicare

### Special Interests of Pediatric Nephrology of Alabama:

#### Primary Pediatric Nephrology

- Hematuria
- Proteinuria
- Urinary Tract Infections and Reflux
- Enuresis
- Electrolyte Problems
- Kidney Stones

#### Glomerular Diseases

- Nephrotic Syndrome
- Glomerulonephritis

Hypertension

SLE

Chronic Loss of Kidney Function

Transplantation

Congenital Anomalies of the Kidneys and Urinary Tract

Metabolic Syndrome

1425 Richard Arrington Jr Blvd South Ste 206; Birmingham, Alabama 35205

Phone (205) 558-3200

[WWW.PEDNEPHAL.COM](http://WWW.PEDNEPHAL.COM)