



The Alabama Pediatrician

Second Quarter 2017

From the President

Continue to be present in the conversation for kids



Cathy Wood, MD, FAAP
Chapter President

Summer is here – and this year seems to be moving at a particularly fast pace. As pediatricians, we love the few months from May to September when the schedule is hammered with back-to-school check-ups and camp physicals, and the work days are generally shorter and less complicated. More

time with family, more time for hobbies, more time to complete projects that are on the “to do” list. One of my projects for this summer is reviewing my interaction with students and assessing how I can improve the experience of having students--for me and for them.

Summer projects for the Alabama Chapter-AAP include continuing to expand the collaboration of academic and community pediatric stakeholders in the advocacy process. Creating a dialogue between the academic training programs, the teaching hospitals, and the providers in the community should improve our advocacy for both our patients and ourselves. The complexities of funding and how that funding flows into our state are difficult to understand for most of us, but it is critical to be present in this process and to voice our opinions and concerns. As your Chapter leaders, we will continue to be your voice.

This last legislative session was relatively quiet for our community of pediatricians, because Medicaid funding was not on the chopping block this year. We did have some wonderful successes for children (see legislative update) and for that, we are grateful to our Chapter lobbyist and the pediatricians who spoke up on these issues. Regarding Medicaid, the questions surrounding implementation of RCOs

Annual Meeting & Fall Pediatric Update to feature oral health, NAS, MOC Part II group activity, among others

Make sure your calendars are marked for Sept. 29 – Oct. 1, 2017, for the Alabama Chapter-AAP's 2017 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, infant/early childhood mental health, opioid use/neonatal abstinence syndrome, genetics, genomics and pediatric disease, innovations in family engagement, and quality improvement.

In addition, on Friday afternoon, a separate practice management workshop, co-sponsored by the Chapter's Practice Management

Association, will feature sessions on Medicaid health homes, Blue Cross' Primary Care Select/value-based programs, payors and coding, and more! The workshop will be followed by a two-hour Loss Prevention seminar, sponsored and presented by ProAssurance Indemnity.

2017 ANNUAL MEETING & FALL PEDIATRIC UPDATE



Earn 20 MOC Part II Points and/or gain CME on Decision Skills

This year, we will once again conduct a special 20-point Maintenance of Certification Part II group activity, 2017 Decisions Skills Self-Assessment, facilitated by Melody Petty, MD, FAAP, on Saturday afternoon, Oct. 1. 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.

“This activity is a compilation of diagnostic and management puzzlers and is one of the most popular Part 2 MOC activities,” said Chapter CME Chair David Gremse, MD, FAAP.

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

Medicaid RCO Update

At time of writing, the Alabama Chapter-AAP is submitting comments to the Alabama Medicaid Agency as a response to their request for public comment regarding their proposed amendments to the Centers for Medicare and Medicaid Services (CMS)-approved 1115 Waiver, which will allow Regional Care Organizations (RCOs) to move forward. Alabama Medicaid is planning to implement RCOs in Regions A and C on October 1, and phase in the other regions as RCO organizations meet network adequacy and other requirements for each region. The amendments would allow this phase-in; in addition, they are seeking a change that would allow only one RCO to operate in a region, thereby requiring all recipients to be placed into the RCO and not remain in Fee-For-Service (Having a choice in each region was the original plan and intent of CMS). By now, providers in Regions A and C should have been contacted to sign contracts with the RCOs, which are still expected to go live in the two regions in just three short months.

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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.

Spring Meeting a win-win for pediatric education and networking

The Chapter's 2017 Spring Meeting & Pediatric Update, held May 4 - 7 at the Sandestin Golf & Beach Resort in Destin, Fla., was once again a weekend of valuable pediatric education and networking among pediatricians and other pediatric healthcare providers across the state, as well as time for family fun!

National and state speakers provided top-notch presentations on topics including addiction, the opioid epidemic, HPV, pediatrician wellness, infectious rashes, and food allergies. A vision symposium, an early childhood MOC Part 2 self-assessment and an update on Medicaid from Commissioner Stephanie Azar and Medical Director Robert Moon, MD, rounded out the weekend of education for Chapter members.



D.J. Anagnos, MD, FAAP, and Melissa McNally, MD, FAAP, both of Montgomery, enjoy the Saturday night reception and dinner.



Exhibitors help support our meeting, and this year, the exhibit hall was once again 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 fourth annual Grand Pediatric Pentathlon to raise monies for Reach Out and Read (see article in the "Reach Out and Read All About It!" section on page 6)! Many thanks go to Michael Ramsey, 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 26 – 29, 2018, at the Grand Hotel Marriott Resort!

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 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.



Ken Elmer, MD, FAAP, Chapter Area 3 Representative, and his wife Julie enjoy the music at the Saturday night dinner.

From the President continued from page 1

and how that proceeds on a state level, and the impact of changes at the federal level if the Better Care Reconciliation Act (or a relative of this bill) is implemented should be at the top of a list of concerns for Alabama pediatricians--both community and academic. Please be present in this conversation and advocate strongly for your practice and your patients.

Nine Alabama practices making incredible strides in increasing early screening

Introducing the ASQ-3 at the 9-, 18- and 24 month well-child visit, the MCHAT-R/F at the 18- and 24-month well-child visit, and for three practices, using the ASQ-SE at the 36-month well-child visit has accounted for nearly 1,200 screens with 80 referrals to either Help Me Grow or Alabama Early Intervention Services (AEIS). The Alabama Child Health Improvement Alliance's (ACHIA's) partnership with the Help Me Grow program's regional care coordinators is filling the gap for pediatricians and their patients by providing timely services and resources prior to full assessment by AEIS.

Over the past five months, nine practices in the ACHIA Early Screening Collaborative are working through PDSA (Plan-Do-Study-Act) cycles to integrate screens into their practices. Some of the change ideas they are testing include: finding the best fit to introduce the screen (front office or nurse); identifying premature children in advance to identify the correct age-adjusted ASQ; having lunch-and-learns with the Help Me Grow care coordinators; tracking referrals to ensure follow-up; including parents in the process by having them make presentations to the staff; and transitioning to the CHADIS platform.

In June, the collaborative introduced family engagement: "What is it, why is it important, and why do we care?" Susan Colburn, a state Family-to-Family parent advisor and a member of the collaborative faculty, led the practices as they assessed their level of family engagement. This family engagement learning segment ties into future collaboratives undertaken by ACHIA.

What's trending in practice/family engagement?

As introduced in the last issue of the *Alabama Pediatrician*, the Chapter and ACHIA are hosting a family engagement speaker across three days during the Chapter's Annual Meeting & Fall Pediatric Update in September. Renee Turchi, MD, FAAP, Medical Director of the Pennsylvania Medical Home Program and professor at the Drexel University College of Medicine, will present at Children's of Alabama's Grand Rounds on September 28, at a small group of parents/providers identified by Family Voices of Alabama, and during the Chapter meeting on Saturday. In addition, she will provide technical assistance to ACHIA around family engagement as we pilot the launch of future continuous quality improvement collaboratives.

Identification of projects for the next three years

ACHIA's Continuous Quality Improvement Committee (CQIC) has been meeting over the past three months to identify topics for project portfolios for the next three years. Working with the UAB School of Public Health, this committee will identify projects in July for an announcement in September.

What is the Alabama Child Health Improvement Alliance?

Founded by the Alabama Chapter-AAP, the Alabama Child Health Improvement Alliance is a statewide collaboration of public and private partners that uses measurement based efforts and a systems approach to improve the quality of children's health. Learn more at www.achia.org.



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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.



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Legislative Session 2017 Wrap-Up

Medicaid funding okay for FY 2018; session has more ups than downs for children

This year's state legislative session, while not the contentious battlefield of previous years in terms of Medicaid funding (which was made whole thanks to the BP oil settlement monies appropriated last year), was filled with many conversations affecting child health, safety and well-being. Here is a synopsis of the big issues monitored by the Chapter:

UP: Medicaid & ALL Kids Funding

The Legislature passed the Fiscal Year 2018 General Fund budget with bare-bones funding for Medicaid, buoyed by one-time BP monies made available from legislation that passed during the 2016 special session. Although the budget was shy of the Governor's original ask, which included dollars for RCO/Medicaid reform, it was enough to cover this next year, according to Commissioner Stephanie Azar. The assumption here is that Congress renews the full federal funding of the Children's Health Insurance Program. If they revert to the traditional 80/20 split, the General Fund Budget will use the \$91 million reserve earmarked for Medicaid in its 2018-2019 budget.

DOWN: Child Care Safety Act

HB 277, the Child Care Safety Act, which would have required all child care programs to be licensed, met with fierce opposition on the part of the lobbyists (preachers) for faith-based facilities. After legislators debated a substitute version, which passed the House in April, the bill died before the end of the Session, despite tireless advocacy efforts on the part of VOICES for Alabama's Children and many other child advocacy organizations.

UP: Pre-K Funding

Toward the end of the Session, the Alabama Legislature gave final approval to a \$13 million expansion of Alabama's First Class Pre-K program. The bill, which includes a total of \$77.5 million for the state's high-quality, voluntary pre-kindergarten program, was signed by Governor Kay Ivey, who later announced that 122 new classrooms will be added this fall, increasing the size of the program for the 2017-2018 school year to 938 classrooms, enrolling approximately 16,884 four-year-olds (28 percent of all four-year-olds) statewide.

DOWN: Lay Midwifery Legislation

HB 315, which establishes a state board of midwifery and decriminalizes the practice of midwifery for lay midwives, passed on the last day of the session and was enacted, despite opposition from the Alabama Chapter-AAP, the Medical Association and other



Chapter Executive Director Linda Lee, APR, and Chapter Lobbyist Graham Champion were among those on hand for Governor Kay Ivey's signing of the strengthened Graduated Driver License bill on June 27. The legislation puts teeth into enforcement of the law through stiffer penalties.

medical organizations. The Medical Association did work, however, to amend the bill to include liability protections for physicians and also prohibitions on non-nurse midwives' scope of practice, the types of pregnancies they may attend and a requirement for midwives to report outcomes.

UP: Coverage of medically necessary autism therapies

HB284, a bill that requires certain insurance plans to cover evidence-based therapy for individuals with autism, passed both Houses and was enacted. The fifty percent of Alabama's children on Medicaid will not have coverage for another 18 months, as is also the case for those with ALL Kids and state employee plans. Coverage for those who get it currently cuts off after 18 years of age. Individual and small group (50 or fewer) plans are excluded from the coverage requirement.

UP: Graduated driver license law strengthened

The Alabama Chapter-AAP's contract lobbyist, Graham Champion, worked diligently this session to monitor and positively affect legislation by Representative Mike Holmes and Senator Clyde Chambliss that increased penalties for Graduated Driver License law violations. The goal of our efforts this year was to ensure that the debate did not open up the opportunity to weaken the existing law. We were successful, and the legislature passed both houses and was enacted. As passed, this legislation will put teeth into the penalties for violating the law. This should help save more lives moving forward.

NEWS FROM THE AAP

AAP engages members on current healthcare reforms

The advocacy continues in Washington and on the part of pediatricians across the country as they make their voices heard regarding proposed cuts to Medicaid as part of federal healthcare reform efforts to "repeal and replace" the Affordable Care Act.

Over the last several months, the AAP has engaged members on making contact with Congressmen, most recently with our U.S. Senators, regarding the threat of a bill that will have disastrous consequences on Medicaid funding, particularly in Alabama, since our program is already "bare bones" and struggles for state funding each year.

The Chapter leadership thanks the many members who have made contact with Senators Shelby and Strange, on the consequences drastic cuts would have on Medicaid in Alabama.

At time of writing, the Better Care Reconciliation Act is expected to be voted on in the U.S. Senate the week of July 10.

Many thanks to Chapter members who reached out to their Congressmen about the bill and the importance of Medicaid; please continue to let your voice be heard in Washington on this issue.

Stay tuned for further details, which change from week to week!

Reach Out and Read All About It!

By Salina Taylor, Development and Communications Coordinator

Fourth Annual Grand Pediatric Pentathlon exceeds goal!

By Salina Taylor, Development and Communications Coordinator

Reach Out and Read-Alabama begins another decade of building better brains in Alabama's children with a successful Grand Pediatric Pentathlon at the Alabama Chapter-AAP's 2017 Spring Meeting, raising more than \$12,500.



Michael Ramsey, MD, FAAP, Event Chair, and his wife Cindi were among the participants who enjoyed the "photo op" at the Pentathlon check-in reception on Saturday night.

Meeting participated in the multi-day event.

The Sandestin Golf & Beach Resort once again provided a perfect venue for all 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 throughout the resort sporting the bright blue

signature Pentathlon shirts as they tackled the activities with their colleagues. Tickets were given for each event completed and used to win prizes, including a Regions Bank green cruiser bicycle, a kayak, an Apple Watch, a YETI cooler, an autographed Alabama football and other exciting prizes.

"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, Immediate Past President and Pentathlon chair. "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 across Alabama.

A special thank-you goes to our sponsors: Poarch Band of Creek Indians, ALL Kids, the Medical Association of the State of Alabama Medical Foundation, the Sandestin Foundation for Kids, My Care Alabama, Momma Goldberg's Deli, the Business Council of Alabama and Jackson Thornton.

2018 marks the fifth year of the Grand Pediatric Pentathlon, when we will return to the site of the initial event, the Grand Hotel Marriott Resort. We are excited to announce a new event chair, Nola Ernest, MD, FAAP, as well as a few surprises to mark our fifth milestone event.

For more pictures of this year's event, visit our Facebook page.



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



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“Consultation” vs. “Conference”

By Lynn Abernathy Brown, CPC

The term “Consultation” is often used in primary care practices for two types of visits and, from a billing standpoint, are documented and coded very differently. Consultations generally must be at the request of a provider or appropriate source as opposed to “Conferences,” which can be at the request of the parent/caregiver. Remember, for billing purposes, the “appropriate source” should have an NPI since some payors are starting to deny claims without the requester NPI.

CONSULTATION 99241-99245:

Primary care providers are often asked to provide consultations, requested by the surgeon, for patients having surgery. Many times there is a “One-Day Surgery” H & P completed and returned to the surgeon. This pre-op service for surgery clearance is billed using consultation codes CPT 99241-99245**.

One scenario commonly seen is clearance for dental surgery. In this example, the consultation documentation must include:

- The diagnosis of Z01.818, *Encounter for other preprocedural examination* (Pre-op or Surgery clearance), followed by the diagnosis for the surgery, such as K02.9, *Dental Caries*;
- Request for provider’s opinion, which includes the reason for the request;
 - For example, “I am seeing Jane Doe at the request of Dr. John Smith for pre-operative clearance for dental surgery on July 2, 2017.”
- Render the service in order to develop an opinion;
 - History of Present Illness, Exam, Assessment, Opinion for surgery clearance
- Report back to the requesting provider with the opinion.
 - One-Day H & P report back to surgeon including surgeon’s name on H & P or CC note in progress note stating report back to surgeon

CONFERENCE 99201-99215:

Another visit type providers encounter are parent conferences, often regarding patients with behavior issues or possibly ADHD. Separating the terms “Consult” vs. “Conference” in the progress note will help better define the type of visit. These are time-based visits, especially if the child is not present, although Alabama Medicaid does require that the child be present per CMS. These visits should be billed using codes for New or Established Patient CPT 99201-99215.

From the appointment scheduling type to the progress note documentation, defining the type of appointment as Consultation or Conference helps clearly identify the information necessary to support these types of visits.

**Medicare does not allow Consultation codes, so providers must bill for Medicare patients using New or Established codes. Alabama Medicaid and all commercial payors still allow Consultation codes to be billed.

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Payor Updates

This year has been a busy year for payor updates. Below is a brief summary based on questions from practices of information that may be helpful to providers and their billing staff:

1. BCBS-AL updated the HCR Preventive Care Services

Coding sheet updated 06/13/17

Added:

- Maternal Depression Screening 96161
 - o Ages birth – 6 months, 4 services during age range
 - o Routine diagnosis such as Z00.12* or Z13.89
- Sensory Screening – Hearing, effective 05/01/17
 - o Ages 2 months to 10 years – no more than eight tests
 - o Ages 11-21 years – no more than three tests (increase)
 - o Diagnosis linked to Z00.12* or Z13.5

2. Weight Assessment HEDIS measures:

BCBS-AL Specific for in-state BCBS claims (Alabama Members only)

- Claim Line Item: G0447 linked to Z68.51-Z68.54 BMI percentile - Counseling for Obesity with no minute limitation per BCBS discretion (Modifier 25 on the E/M)
- Appropriate documentation in progress note required to support

3. M-Chat

- BCBS-AL and ALL Kids confirmed that 96110 is allowed for M-Chat
- Alabama Medicaid only payor to date requiring M-Chat be filed with 96127 Emotional/Behavioral Assessment (CMS)

4. Maternal Depression Screening update:

96161 – Caregiver Health Assessment (Maternal Depression Screening), effective 01/01/17 (Note: any denials prior to May should be reprocessed manually)

5. Aetna Provider News update:

96127 Emotional / Behavioral Assessment for Depression (such as Adolescent Depression) should be billed with Z13.89 Screening for other specified diseases and disorders

Watch for updates to the July 2017 AL Medicaid Provider Manual related to EPSDT Appendix A.

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Recommended Vaccines

	Child Care Centers (by 12 Months of Age)	Kindergarten through 5th Grade	6th through 12th Grade
DTaP	4*	5*	5*
IPV	3*	4*	4*
MMR	1*	2*	2*
Varicella	1*	1*	2**
Hib	4*		
PCV	4*		
Tdap			1*
Rota	3		
Hep A	1	2	2
HepB	3	3	3
HPV			3
MCV			2

**Prior to entering all Alabama schools and child care centers,
each child must submit an up-to-date Certificate of Immunization.**

*Code of Alabama §16-30-4 **1 dose for <13 years of age or 2 doses for >13 years of age

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Let's hear it from our Departments of Pediatrics!

Telemedicine and Telementoring

By Mitch Cohen, MD, FAAP, Chair, Department of Pediatrics, University of Alabama at Birmingham School of Medicine; Physician in Chief, Children's of Alabama



Mitch Cohen, MD, FAAP

The Department of Pediatrics at UAB and Children's of Alabama are moving forward with new telemedicine and telementoring programs. We will be starting three telemedicine projects: One will connect pediatric subspecialists in Infectious Diseases to inpatients needing consultation through hospital-based specialists (pediatric hospitalists) in Huntsville at Huntsville Hospital. A

second will connect experts in pediatric cardiology with patients in Mobile. As the only center in the state with pediatric cardiac electrophysiology expertise, patients, who are already followed for their anatomic issues by their local pediatric cardiologist, still have to travel up to five hours for a 15-minute visit with us. This telemedicine initiative with the University of South Alabama will allow patients in Lower Alabama to have their face-to-face visit, via telemedicine, with the electrophysiology team at UAB and receive a full cardiac device interrogation and adjustment.

And, a third effort will connect kidney transplant physicians (pediatric nephrologists) at UAB with patients from around the state who have had kidney transplants and need ongoing follow-up. As the only renal transplant center for children in the state of Alabama, we have a large number of patients who travel more than 150 miles, each way, to get to their appointments. The frequent appointments include meetings with all members of the transplant team (MD, nurse clinician coordinator, pharmacist, nutritionist, counselor, social worker and child life specialist) who are all integral to comprehensive care and long-term transplant success. A telemedicine approach, utilizing the equipment now available at most county departments of health, will allow access to the transplant team without extreme travel distances, thereby improving access and adherence.

Unlike telemedicine, where there is direct contact with patients, in telementoring, patients are not examined through video hook-ups. Rather, primary care physicians and specialists are connected for two-way learning about real patients. The concept, often referred to as Project ECHO (<http://www.tinyurl.com/ProjectECHO>) was initially started to improve access to specialists for adult patients with hepatitis C in New Mexico. It has now been expanded to a host of conditions, including pediatric illnesses. The AAP is sponsoring a pilot project, Pediatric Endocrine Growth Disorders ECHO, via the Georgia Chapter-AAP, and we will provide expertise as specialists in Alabama.

We have also initiated Project ECHO: Autism, an effort to connect primary care providers and a multidisciplinary team to improve diagnosis and management of children with autism. Many communities in Alabama have no meaningful access to expert autism care, and families touched by autism need medical

support in their home communities. Access to specialist knowledge improves lives, reduces health care costs and improves access to care. For more information about this project, contact echoautism@peds.uab.edu.

Other efforts in telemedicine and telementoring are also underway – all with the goal of improving the health of the children of Alabama and bringing care close to home!

USA Pediatrics: Pediatric Leadership Alliance

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



David Gremse, MD, FAAP

All pediatricians can benefit from making time to invest in themselves and their career development. USA is grateful to the AAP and the Alabama Chapter for their part in hosting the USA Pediatric Leadership Alliance seminar at the Strada Patient Care Center at the USA Children's and Women's Hospital Campus on June 16-17, 2017. The content of the Pediatric Leadership Alliance focused on using leadership skills for change management

to qualify a practice to certify as a Patient-Centered Medical Home using the leadership model from the book by Kouzes and Posner: *The Leadership Challenge*. The components of the Leadership Challenge, including Modeling the Way, Encouraging the Heart, Inspiring a Shared Vision, Enabling others to Act, and Challenging the Process, were enthusiastically presented by a team led by Gil Liu, MD, FAAP, the Medical Director of Kentucky Medicaid. Special thanks to the other presenters, including Michael Ramsey, MD, FAAP, who enlightened us with his experience in certifying Dothan Pediatrics as a PCMH; Francis Rushton, MD, FAAP, Medical Director of South Carolina QTIP (Quality through Technology and Improvement in Pediatrics); J. Wiley, MD, FAAP, who shared his experiences in leading his Focus MD network; Dr. Craig Pearce from the USA Mitchell College of Business, who expounded on his management research, and Daniel Preud'Homme, MD, FAAP, Chair of the USA Pediatric Quality Improvement Committee, who dared us to Challenge the Process.

The Pediatric Leadership Alliance was a tremendous success and demonstrates resources that the Academy can offer to pediatricians to empower them to advocate for children. Special thanks to Mary Lou White and Tina Morton, VP and Director of Membership Outreach and Marketing, respectively, for leading the support from the national office of the Academy for the meeting, Linda Lee for the Chapter's contribution to the meeting, and Linda Champion for also making the trip to Mobile.

Most pediatricians are in positions where they are looked upon as leaders. The Academy has created a valuable program to train pediatricians to coordinate processes that facilitate practices to adapt to changing circumstances. The USA PLA was a wonderful opportunity to benefit from training that will help shape better leaders for our community and for the Chapter.

Does this sound familiar?

A 9-year-old male is seen for his annual well child check. He hasn't been seen in a couple of years and after reviewing his growth charts you are concerned about his growth. As a young child he tracked along the 75th percentile for height, now his current height is at the 25th percentile. His weight gain has been sluggish as well. Mom causally mentions the child is developing some pubic and axillary hair. Now what do you do? Is a work up indicated? Wish you could run this by your friendly pediatric endocrinologist but just don't have time to call? We have a solution for you!

Project ECHO®: Pediatric Endocrinology and Growth

UAB/COA is partnering with the AAP to present a mini series on pediatric growth and short stature using project ECHO (extending community health outcomes), a model of telementoring, designed to link expert specialists with pediatric providers and other clinical staff in local community practice. Each virtual clinic involves 20 minutes of a concise didactic lecture and 40 minutes of case presentations and discussion. Topics include identification of concerning growth patterns, work up for pathologic growth, referral indications, etiology and treatment of growth hormone deficiency, syndromes associated with short stature, and many more!

Who can join in?:

Anyone looking to advance their knowledge on pediatric growth and short stature (pediatricians, family physicians, PA's, nurse practitioners, nurses and MA's).

Our team:

Gail Mick, MD, Professor of Pediatric Endocrinology; Shelly Mercer, MD, FAAP, Pediatric Endocrinology Fellow; Michelle Coulter, CRNP

Dates/ times:

Friday, July 7 from 12-1pm;
Friday, July 21 from 12-1pm

Equipment needed: Smartphone, tablet, or PC. The zoom software will be provided to you at no cost.

Contact Information: To sign up or for more information email endoecho@peds.uab.edu.

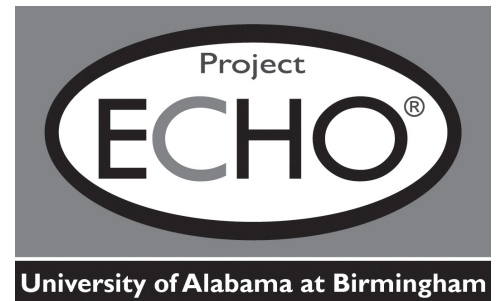
Announcing the “Project ECHO: Autism” telementoring program for Alabama pediatricians and other healthcare providers

By Justin Schwartz, MD, FAAP, Developmental-Behavioral Pediatrician and Assistant Professor of Pediatrics, University of Alabama at Birmingham

We are excited to bring an exciting, innovative project called Project ECHO: Autism to Alabama. Project ECHO: Autism is a “telementoring” platform that allows autism experts from a variety of disciplines to connect directly with healthcare providers across the state on a regular basis. Our mission is to support healthcare providers in their care of children with autism right in their home community by sharing expert knowledge and best practices.

Our team consists of experts from the University of Alabama at Birmingham, Children's of Alabama, and the Autism Society of Alabama, and includes a developmental-behavioral pediatrician, child psychologist, child and adolescent psychiatrist, nutritionist, social worker, and parent expert/advocate. Our project focuses on several aspects of autism care, from early identification to management of common medical and psychiatric comorbidities, to increased familiarity with local, state, and national resources. We do this by presenting short didactics about high-yield autism topics, as well as discussions of cases of children seen in the practices. Cases vary in focus, but serve as the main vehicle for sharing information and learning.

ECHO: Autism meets twice a month for 90 minutes each session, and runs over a six-month period/cycle. All those who care for children with autism and who are interested in joining an exciting virtual network of providers committed to improving the care of children with autism in Alabama are encouraged to join! Simply contact our project coordinator, Charlene Rhoades, at 205-638-9254, or by e-mail at echoautism@peds.uab.edu to join or to request more information.



Best Practices: Through common patient narratives, we find opportunities for advocacy

By Justin Schwartz, MD, FAAP, Developmental-Behavioral Pediatrician and Assistant Professor of Pediatrics, University of Alabama at Birmingham

Editor's Note: Dr. Schwartz was instrumental in his tireless advocacy for HB284, which requires certain insurance plans to cover evidence-based therapy for children with autism. We are indebted to him for his long hours spent on this issue prior to and during this last state legislative session.

The day-to-day clinical work of a pediatrician focuses on helping children and families one by one. But as the voice of the thousands of children we each care for, we as pediatricians are in a prime position to help change the lives of many through advocacy. Recently I had the opportunity to participate directly in the effort to move forward HB284, a bill that requires certain insurance plans to cover evidence-based

therapy for individuals with autism. As a developmental-behavioral pediatrician, not only is this issue important to the many children and families I see whose lives are touched by autism, but it also directly impacts the success of my own practice, as well as that of all providers who see children with autism.

Without insurance coverage for effective therapies for autism, all our efforts toward early screening and diagnosis of autism amount to very little benefit.

We were ultimately successful in passing a version of the bill that is a good start but also



Regional Autism Networks up and running in Alabama

By Anna McConnell, LCSW, MPH, State Autism Coordinator, Alabama Department of Mental Health

In 2009, the Alabama Interagency Autism Coordinating Council (AIACC) was charged with developing a statewide system of care for those with Autism Spectrum Disorder (ASD) and their families back. That year, the Regional Autism Network (RAN) was legislated to provide professional training programs, technical assistance and consultation, individual and family assistance, and public education programs, but it was not funded until last year.

We are thrilled with the legislative funding of the RAN through the Alabama Department of Mental Health and the AIACC, and believe it will be a key component to developing a system of care for those with ASD.

Alabama's RAN is staffed by experts in the field of ASD and is housed at three (soon to be five) universities. Each RAN strives to connect people with ASD, their families, educators, and service providers to the information and/or services that best meet their needs. The participating universities are: Auburn University, University of Alabama at Birmingham, and University of South Alabama, with University of Alabama and University of Alabama in Huntsville to come on board October 2017,

completing statewide coverage.

"The Regional Autism Networks are here for pediatricians and providers as much as for the families that they serve," said Justin Schwartz, MD, FAAP, Developmental-Behavioral Pediatrician and Assistant Professor of Pediatrics at the University of Alabama at Birmingham. "They are an easily accessible source of information on local resources and opportunities for individuals with autism. We ultimately hope that pediatricians can turn to the RANs not only for information, but for access to technical assistance and trainings that can improve the day-to-day practice of care of children with autism in their offices, such as making their environments and flow more welcoming, improving the success of well and sick visits, and much more."

This year has been exciting, not just in the funding of RAN, but also in the expanded insurance coverage for Applied Behavior Analysis (ABA) therapy. The passage of HB284 is critical in allowing access to life-changing services. Lack of availability or accessibility to services has been a persistent barrier in Alabama. With the passage of

"The Regional Autism Networks are here for pediatricians and providers as much as for the families that they serve."

HB284 and the creation of the Regional Autism Networks, Alabamians will have improved access to needed therapies, expanded training opportunities, support to those working with people with ASD, and connection to the increasing list of resources.

Contact the RANs here: Auburn University, 334-844-2004; University of Alabama at Birmingham, 205-934-1112; and University of South Alabama 251-410-4533.



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CHAPTER BRIEFS

Simpson named among five 2017 Health Equity Heroes by DentaQuest



Richard Simpson, DMD

In May, DentaQuest, a large oral health benefits administrator, named five health leaders across the country as 2017 Health Equity Heroes, including our own Richard Simpson, DMD,

Chapter Oral Health Liaison to the Alabama Academy of Pediatric Dentistry.

The awards are given to people who “are breaking down barriers and developing innovative programming to improve health outcomes and access to care for underserved populations,” according to a news release.

Each recipient receives a \$1,000 donation from DentaQuest’s Citizenship Fund toward a nonprofit of his or her choice that promotes health equity. Dr. Simpson will be contributing a portion of his award to the Chapter’s early literacy arm, Reach Out and Read-Alabama.

Dr. Simpson, a pediatric dentist in Tuscaloosa, was recognized for his long-term service as an advocate for children’s health services. He is in his second year as the chair of the Oral Health Coalition of Alabama, finding and working to implement ways to improve the oral health status of state residents. He is also an advocate and leader in interprofessional training in the state, training pediatricians to do oral health risk assessments through the 1st Look program, which he was instrumental in starting in our state.

The DentaQuest award recognizes Dr. Simpson’s work in “coordinating interprofessional outreach and education between pediatricians and pediatric dentists at a state level that has resulted in national recognition for advocacy and innovative collaboration,” according to the news release.

Congratulations to Dr. Simpson for this stellar accomplishment!

Cohen elected to AAP Section on Gastroenterology, Hepatology & Nutrition Executive Committee



Michael Cohen, MD, FAAP

Mitchell Cohen, MD, FAAP, pediatric gastroenterologist and Chair of the UAB Department of Pediatrics, has been elected to serve as a member of the American Academy of Pediatrics (AAP) Section on

Gastroenterology, Hepatology & Nutrition Executive Committee. His three-year term will begin on November 1, 2017. Dr. Cohen was also appointed to the Association of Medical School Pediatric Department Chairs (AMSPDC) Education Committee and New Chairs Program Committee, each for a two-year term, effective April 2017. Well done, Dr. Cohen!

Ramsey named 2017 AAP Council on Community Pediatrics Local Hero



Michael J. Ramsey, MD, FAAP

The AAP Council on Community Pediatrics has announced that Michael J. Ramsey, MD, FAAP, has been selected to receive the 2017 AAP Council on Community Pediatrics Local Hero Award.

The award recognizes pediatricians who epitomize the “community pediatrician,” leading community action and advocacy for children in local communities, and who do several of the following: promote child health within all environments such as the community, school, and family; collaborate with community partners to address population-based child health issues and promote health equity; advocate for children who lack access to health care and other resources; and implements public health approaches to advance the health of all children in the community.

Dr. Ramsey will be honored at the

Community Pediatrics Awards and Poster Display Event at the 2017 AAP National Conference and Exhibition in Chicago, IL in September.

“This is so well-deserved,” said Cathy Wood, MD, FAAP, Chapter President. “Michael worked tirelessly for the last several years on Medicaid funding advocacy, going over and above in reaching outside of his practice to help kids.”

Kudos, Dr. Ramsey, on this well-deserved honor!

Dimmitt named as David E. Dixon Endowed Chair in Pediatric Gastroenterology



Reed Dimmitt, MD, FAAP

Reed Dimmitt, MD, FAAP, professor in the UAB Department of Pediatrics, the director of the Division of Gastroenterology, Hepatology and Nutrition, and the medical director of Children’s Intensive Feeding Program,

has been selected as the first holder of the David E. Dixon Endowed Chair in Pediatric Gastroenterology. Dimmitt’s research includes mucosal immunology, the role of intestinal microbiota in the pathogenesis of injury, and the causes of intestinal failure associated liver disease. The Endowed Chair position is named after David E. Dixon, who contributed to his community through stellar volunteer leadership service at Children’s of Alabama. Congratulations, Dr. Dimmitt!

Walley selected for pediatric hospital medicine advisory board



Susan Walley, MD, FAAP

Susan Walley, MD, FAAP, with UAB Department of Pediatrics and Pediatric Hospitalist at Children’s of Alabama, has been selected as a member of the Pediatric Hospital

Chapter Briefs continued from page 12

Medicine Advisory Board for the Inaugural edition of Pediatrics Review and Education Program (PREP) Hospital Medicine, which will be released in January 2018 in anticipation of the first Pediatric Hospital Medicine Board Subspecialty Certification in 2019. Kudos, Dr. Walley!

Dr. Boppa selected for the PREP Infectious Diseases Editorial Board



Suresh Boppa, MD, FAAP

Suresh Boppa, MD, FAAP, pediatric infectious disease specialist with UAB Department of Pediatrics, has been appointed to the PREP Infectious Diseases Editorial Board for a three-year term beginning

July 1, 2017. As a member of the Board, he will play an important role in the development and success of the PREP Infectious Diseases Self Assessment. Congratulations, Dr. Boppa!

Chapter, AAP partner with USA to conduct Pediatric Leadership Alliance

On June 16 and 17, the Alabama Chapter-AAP, American Academy of Pediatrics and the University of South Alabama Department of Pediatrics partnered to host a Pediatric Leadership Alliance workshop for faculty and community pediatricians at USA, developed as a value-added service by the AAP for the institution's 100 percent membership buy in the two organizations.



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Pictured are Michael Ramsey, MD, FAAP; Chapter Project Coordinator Linda Champion; Chapter Executive Director Linda Lee; Daniel Preud'homme, MD, FAAP, USA Department of Pediatrics, J. Wiley, MD, FAAP; and David Gremse, MD, FAAP, USA Department of Pediatrics.



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ANNOUNCING A BETTER WAY

Pediatric Surgery at Children's of Alabama now offers a new, minimally invasive procedure to repair inguinal hernias in select patients. The laparoscopic technique:

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This technique allows the surgeon to perform minimal dissection of the vas deferens and spermatic blood vessels, which may reduce the chance of vascular injury to the testicle which may lead to testicular atrophy in the future.

Choose Children's. We offer a full complement of pediatric surgical services from ear tubes to cardiovascular procedures. Call today at 205.638.9688 to learn more about this new method for inguinal hernia repair.

Event Calendar

July 26, 2017
Chapter/PMA Webinar: Social Media
12:15 p.m.

September 13, 2017
Chapter/PMA Webinar: Conflict Resolution
12:15 p.m.

September 16 – 19, 2017
AAP National Conference & Exhibition
Chicago, IL

September 29 – October 1, 2017
2017 Annual Meeting & Fall Pediatric Update
Hyatt Regency Birmingham-The Wynfrey Hotel
Birmingham, AL

April 26 – 29, 2018
2018 Spring Meeting & Pediatric Update
Grand Hotel Marriott Resort
Point Clear, AL

Best Practices continued from page 10

leaves much room for continued advocacy. But the success of passage of the bill was only one benefit gained through the advocacy experience. For me, it was a chance to gain experience contributing my knowledge and expertise to the decision-making process about the lives of children. We are truly viewed as trusted authorities on child health, and even in the face of heavy opposition, we can count on our undeniable experiences and evidence base to guide us through difficult conversations with lawmakers and opposing organizations. I also found it incredibly moving to have had the opportunity to interface with so many inspiring families along the way. To become a part of the fabric of the community of children and families that we care for elevates our own professional mission as pediatricians, and provides us with a reminder that we should always make ourselves available to hear and be affected by the stories of our patients, for only through perception of common narratives do we find opportunities for advocacy.

We still have a long way to go to achieve our goal of broad, affordable access to life-changing therapies for autism. The fifty percent of Alabama's children on Medicaid will not have coverage for another 18 months, as is also the case for those with ALL Kids and state employee plans. Coverage for those who get it currently cuts off after 18 years of age. Individual and small group (50 or fewer) plans are excluded from the coverage requirement. Many Alabamians are still left behind on this issue and many others that touch those we serve.

I encourage all pediatricians to continue to collect the common narratives of our patients, and to join with families and advocates by lending our experiences and expertise to improve the lives of all children in our state and beyond.

Pankaj Dangle, MD, Mch, has joined the Pediatric Urology team at Children's of Alabama as director of the recently established robotic surgery program. Robotic surgery allows for tiny incisions and minimal effect on surrounding healthy tissue. Benefits include:

- Faster recovery time
- Less pain
- Little to no scarring
- Minimal blood loss
- Shorter hospital stay



Dr. Dangle, an assistant professor at the University of Alabama at Birmingham (UAB), joins David Joseph, MD, FAAP, FACS, and David Kitchens, MD, FAAP, to offer comprehensive diagnostic and therapeutic services for diseases of the urinary and genital tract. In addition to robotic surgery, his practice focuses on:

- Complex hypospadias
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NEWS FROM PUBLIC HEALTH

WIC income guidelines increase

Under the 2017 federal poverty guidelines, more families may be eligible for the Special Supplemental Nutrition Program for Women, Infants, and Children, better known as WIC. WIC is open to participants with incomes up to 185 percent of the federal poverty level. Check the table below to see which family incomes qualify:

Family Size	Annual Income	Weekly Income
1	\$22,311	\$430
2	\$30,044	\$578
3	\$37,777	\$727
4	\$45,510	\$876
5	\$53,243	\$1,024

WIC participants must have both a limited income and a nutritional need. Families who receive Medicaid, SNAP, formerly known as Food Stamps, or Family Assistance, formerly known as TANF (Temporary Assistance to Needy Families) already meet the income qualifications for WIC. Even families who do not qualify for these programs may be eligible for WIC because of its higher income limits.

For more information please go to www.adph.org/wic or call the statewide toll-free line at 1-888-942-4673.

Public Health Immunization Division Update: Outbreaks 2017

One of the major accomplishments in America during the past 150 years has been the introduction of vaccination. Vaccination has eradicated diseases such as smallpox, polio and measles, allowing the United States to sustain a human race that is allowed to thrive without suffering from diseases that can cause death and disability. And although some may debate how often or how much vaccine should be administered, not many would deny the history of success vaccination has achieved throughout the years.

But, there are times when responding to vaccine-preventable disease outbreaks still occur. Recently, the Alabama Department of Public Health (ADPH) Immunization Division has been investigating multiple outbreaks in the state involving vaccine-preventable diseases including pertussis (also known as whooping cough) and mumps. These highly contagious diseases have affected four counties with more than 13,217 persons exposed and a combined 33 laboratory-confirmed illnesses. It is important for physicians, schools and parents to continue to be aware of the signs, symptoms and treatment of the diseases and to help prevent them from spreading in Alabama.

According to the Centers for Disease Control and Prevention (CDC), pertussis can affect people of all ages, but can be particularly serious, even deadly for babies less than one year old. The respiratory disease causes an uncontrollable, violent coughing that often makes those infected take deep breaths that can result in a “whooping” sound.

The recent pertussis outbreaks in Alabama appeared in Chambers, Monroe, and Talladega counties in April 2017, May 2017 and March

2017, respectively. And although two of the outbreaks are currently closed, the outbreak in Chambers is ongoing with the discovery of an increasing number of children and adults having been exposed.

The following is a breakdown of the pertussis cases by county:

- Chambers County - 19 PCR+ (cases in students in elementary, high school and community colleges and there are multiple people who are symptomatic)
- Monroe County - 2 PCR+ cases
- Talladega County - 3 PCR+ cases (two of which are infants less than 8 weeks of age)

During February 2017, the ADPH began investigating an outbreak of mumps at the University of Alabama located in Tuscaloosa County.

According to CDC, in 1986 and 1987, there was a resurgence of mumps that occurred in the United States after a significant decrease in the disease once the mumps vaccine was licensed for use. The peak of the resurgence occurred in 1987 when 12,848 cases were reported. The highest incidence of mumps during the resurgence was among older school-age and college-age youth (10-19 years of age), who were born before routine mumps vaccination was recommended.

To date, the investigation in Tuscaloosa is ongoing and 13 laboratory-confirmed cases have been reported.

ADPH prefers physicians collect the proper specimen to be tested, but field staff may also collect some specimens. For pertussis investigations, please collect an NP swab or aspirate specimens for a PCR test on all patients with cough of two or more weeks and/or patients with a cough with paroxysms, whoop, and/or posttussive vomiting. For mumps investigations, please collect a buccal swab. All vaccine-preventable disease specimens can be sent the Bureau of Clinical Laboratories. Physicians with any questions should contact the Immunization Division by phone at 1-800-469-4599 and ask for the epidemiologists in the Data Quality and Surveillance Branch. General information and updates can be found at www.adph.org/immunization and the division's Facebook page Alabama Immunization Info at www.facebook.com/AlabamaImmunizationInfo.

Law allows Alabama students to apply sunscreen at school

A new law allows Alabama school students to apply personal sunscreen at school without the need for special permission from a doctor or parent. The law (Act 2017-278) includes both public and private schools and went into effect immediately.

Previously, students were unable to use sunscreen unless prescribed by a physician. With the passage of this law, no rules of the State Board of Education or the Alabama Board of Nursing will apply to Food and Drug Administration-approved over-the-counter sunscreen.

Alabama is among a growing number of states – like Arizona, California, New York, Oregon, Texas, Utah and Washington State – that lawfully permit students' use of sunscreen at school.

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