

# The Alabama

# Pediatrician

Fourth Quarter 2017

## From the President

Sharing our passion to improve the state of pediatrics in Alabama



Wes Stubblefield, MD, FAAP Chapter President

I am honored to serve as your Chapter president for the next two years. Although our leadership has changed, the issues that we face as pediatricians have not. These issues include unstable Medicaid funding, an increasingly complex insurance

market, erosion of the medical home, and stagnant payments, among others. Your Chapter is committed to continuing the fight to keep Alabama's children healthy by protecting the pediatricians who care for them. But, we need your help.

If you know someone that is not a Chapter member, tell them how the Chapter has helped your practice and let's get them to join us. If you are a Chapter member, find a way to get more involved. If you don't know your state or national representative or senator, get to know them. As your president, I pledge to be responsive to your needs and I invite you to contact me (stubblefield.wes@gmail.com) and tell me how we can serve you.

The practice of medicine isn't getting any easier. But, I believe we have the most passionate and most well-intentioned physicians of all of the medical specialties. We live to serve our patients and families. Let's make this the best time ever to practice pediatrics and let's make our passion known to all of those around us!

# Mark your calendars! Slate of topics for 2018 Spring Meeting at Grand Hotel is final

Conference will feature fifth annual "Grand" Pentathlon Benefiting Reach Out and Read

May 3-6, 2018 • Grand Hotel Marriott Resort, Point Clear

The Chapter executive office and CME Chair Susan Walley, MD, FAAP, are looking forward to our 2018 Spring Meeting, to be held once again at the beautiful Grand Hotel Marriott Resort in Point Clear, Ala.!

New Chapter CME Chair Susan Walley has developed a fantastic conference agenda, with a focus



on asthma and smoking cessation, safe sleep, and opioids.

The full slate of topics includes:

- SIDS and Sleep-Related Deaths: What Parents Believe
- Safe Sleep: Questions Parents Ask that You're Afraid to Answer
- Adventures in Child Health 2018: and Update from the AAP
- Smoke-Free Kids: Prevention Second Hand Smoke Exposure
- Opioid Trends in Medicaid
- Teen Driving and Alabama's Graduated Driver License Law
- Common Emergency Room Diagnoses
- Early Hearing Detection and Intervention
- Addressing Alabama's Infant Mortality Problem: What Public Health Can Do (and What It Cannot)
- Personalized Management of Asthma
- Evaluation and Management of Chronic Cough in Children
- Alabama Early Screening Success Stories with a QI Approach
- Maternal Depression Screening: An Implementation

In addition, we expect there to be at least one industry-sponsored symposium! On the lighter side, our Saturday evening dinner is going to include FUN musical entertainment from a Mobile jazz band, Bayou Rhythm, a favorite around the University of South Alabama campus--so pack your dancing shoes! Other networking opportunities will include our fifth Grand Pentathlon benefitting Reach Out and Read. The event will afford attendees, family members and exhibitors an opportunity to participate in five events at their own pace — bicycling, swimming, kayaking, walking/running and reading — to become eligible for great prizes.

Look for more details soon; registration will begin in late January.

Make plans to attend now – we'll see you at the Grand!

the alabama pediatrician

### 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
- Polly H. McClure, RPh, ROR State Coordinator
- Salina M. Taylor ROR Development/ Communications Coordinator

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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.

# 2018 Legislative Day set for Tuesday, February 13

The Alabama Chapter-AAP's 15<sup>th</sup> annual Pediatric Legislative Day will be held on Tuesday, February 13, from 9:15 a.m. – 1 p.m. in conjunction once again with VOICES for Alabama's Children's Advocacy Day.

"The 2018 legislative session and election year is expected to be a whirlwind, and it will be very important that we are as efficient as possible with our advocacy work this year," said Nola Ernest, MD, FAAP, Chapter Legislative Chair. "We encourage all members to attend the event, which will include a Chapter-only session, breakfast/brunch, meeting with VOICES and then visits with lawmakers."

Look for an agenda and registration soon, which will be sent out electronically; but meanwhile, mark your calendars and hold the date!

### **Chapter 2018 Legislative Agenda**

Notwithstanding uncertainly at the federal level regarding the continuation of the Children's Health Insurance Program, and more specifically, its federally funded portion (which is currently 100 percent for Alabama), funding for Alabama Medicaid appears to be in better shape than in recent years, thanks to more carry-forward money than what was expected, according to Medicaid Commissioner Stephanie Azar. All the same, the Alabama Chapter-AAP leadership will be closely monitoring the funding for Medicaid, CHIP and other health and human service agencies.

#### 2018 Legislative Priorities

- Improved health care for children through adequate Medicaid and CHIP funding: The Alabama Chapter-AAP keeps as its permanent priority protection of funding of Medicaid and CHIP coverage for children, who have no voice and who comprise only 24 percent of the state portion of the budget yet 50 percent of the number of Medicaid recipients. The Chapter specifically advocates for sustainable and permanent revenue solutions to adequately fund Medicaid through the General Fund, and strongly urges continuation of federal funding to sustain coverage of children in both programs in Alabama.
- Protection of the Medical Home and the practice of medicine: With the medical home established as the best place for patients to receive primary healthcare, the Chapter opposes any legislation that threatens the medical home and supports legislative efforts to protect it. The Chapter also opposes any attempts by non-physicians to control the practice of medicine or interfere with the doctor-patient relationship, or legislation that dictates requirements for the practice of medicine that violate current American Academy of Pediatrics guidelines and recommendations for the care of children
- Adequate funding for birth to 5 services: The Chapter endorses the Alabama School Readiness Alliance efforts to increase and protect funding for state-funded, voluntary, high-quality, pre-k programs, as well as protect adequate funding for early intervention services and early literacy services.
- Safe Births and Newborn Care: The Chapter opposes any effort that lowers standards of childbirth and newborn care, acknowledging the hospital as the safest place for childbirth and pediatrician-led, comprehensive well-child care as the evidence-based, established standard for prevention of disease in infants.
- **Safe Child Care:** In an effort to promote safe, high-quality child care throughout Alabama, the Chapter supports mandatory licensing of every child care/day care center in the state.

15th

**Pediatric Legislative Day** 

# Funding for CHIP Included in Continuing Resolution to Fund Government

On December 13, the U.S. House of Representatives introduced a bill to fund the government through January 19, 2018. This followed a similar continuing resolution passed on December 7 to keep the government funded at Fiscal Year (FY) 17 levels through December 22. The December 13 bill does include funding for CHIP, with the same language that was contained in the bill that passed the House in early November, HR 3922. The CHIP provisions extend CHIP funding for five years, through FY 2022 and continues the 23 percent bump for FY 2018 & FY 2019 (equating to 100 percent full federal funding for Alabama), and then steps that down to 11.5 percent in FY 2020, after which it is phased out completely. The bill also extends many of the other benefits under which the program was currently operating.

At time of writing, it is unknown if Congress will move on this legislation and beat the December 22 deadline, after which current government funding runs out. It is expected that the offsets used to pay for this bill will still be a source of contention among Democrats, in addition to potentially other issues related to the overall spending package.

Meanwhile, governors across the country have sent letters to Congress urging action on CHIP funding. Our own Governor Kay Ivey sent her own letter several weeks ago. New U.S. Senator-elect Doug Jones also mentioned the need to fund CHIP in his acceptance speech on December 12.

Meanwhile, Alabama's ALL Kids program is prepared, if necessary, to send out dis-enrollment letters (effective February 1, 2018) to parents on December 28. The Chapter will continue to keep you posted on developments; we sincerely hope that it does not come to that. We continue to advocate for Congress to do the right thing.

# Chapter Executive Board welcomes new members

We are delighted to welcome three new members – Jennifer McCain, MD, FAAP, Area 3 Representative; Eric Tyler, MD, FAAP, Area 4 Representative; and Susan Walley, MD, FAAP, CME Chair – to the Alabama Chapter-AAP Executive Board, and also are happy to have several existing members re-elected or move to new positions!

The new Executive Board, which took office on October 1, is listed below: President – Wes Stubblefield, MD, FAAP

Vice President/President-Elect - Ken Elmer, MD, FAAP

Secretary/Treasurer – Katrina Skinner, MD, FAAP

Immediate Past President – Cathy Wood, MD, FAAP

Area 1 Representative – Kevin Ellis, MD, FAAP, Huntsville

Area 2 Representative – Bruce Petitt, MD, FAAP, Tuscaloosa

Area 3 Representative - Jennifer McCain, MD, FAAP, Birmingham

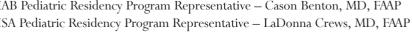
Area 4 Representative – Eric Tyler, MD, FAAP, Alexander City

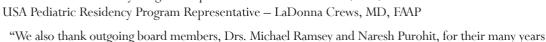
Area 5 Representative – Elizabeth Dawson, MD, FAAP, Troy

Area 6 Representative – Norma Mobley, MD, FAAP, Mobile

CME Chair – Susan Walley, MD, FAAP

UAB Pediatric Residency Program Representative – Cason Benton, MD, FAAP





of service. Their contributions to pediatrics in Alabama are countless and we can never thank them

enough for their advocacy and volunteerism," said Wes Stubblefield, MD, FAAP, Chapter President.



Jennifer McCain, MD, FAAP



Susan Walley, MD, FAAP

## **How to Contact Your Chapter Leaders**

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

Vice President/President-elect Kenneth Elmer, MD, FAAP Ph: (205) 206-8480 kelmer@swclinic.org

Secretary/Treasurer Katrina Skinner, MD, FAAP Ph: (251) 928-5568 katski@bellsouth.net

Immediate Past President Cathy Wood, MD, FAAP Ph: (334) 272-1799 cdocwood@aol.com

Area 1 Rep. (Huntsville) Kevin Ellis, MD, FAAP Ph: (256) 265-2464 kellis@huntsvillepediatrics.com

Area 2 Rep. (Tuscaloosa) Bruce Petitt, MD, FAAP Ph: (205) 752-7337 bpetitt@westalabamapeds.com

Area 3 Rep. (Birmingham) Jennifer McCain, MD, FAAP Ph: (205) 870-1273 jennifer.mccain@childrensal.org

Area 4 Rep. (Alexander City) Eric Tyler, MD, FAAP Ph: (256) 234-5021 opa1018@live.com

Area 5 Rep. (Troy) Elizabeth Dawson, MD, FAAP Ph: (334) 566-7600 nelso71@hotmail.com

Area 6 Rep. (Mobile) Norma Mobley, MD, FAAP Ph: (251) 344-7044 drmobley@mobilepeds.com

CME Chair Susan Walley, MD, FAAP Ph: (205) 638-9922 swalley@peds.uab.edu

**UAB Pediatric Residency** Program Rep. Cason Benton, MD, FAAP Ph: (205) 638-9585 cbenton@peds.uab.edu

USA Pediatric Residency Program Rep. LaDonna Crews, MD, FAAP Ph: (251) 434-3917 Imcrews 1@aol.com

### Chupp named Master Pediatrician, Carlo honored with Wallace Clyde award

Recognizing outstanding accomplishments and dedication to the practice of general pediatrics, the Children's of Alabama Master Pediatrician has been awarded since 1991. Many long-time Chapter members have earned this distinction, and this year, Chapter member David Chupp, MD, FAAP, of Marshall County Pediatrics, has joined his colleagues on the list.

Dr. Chupp graduated magna cum laude from Emory University

School of Medicine, where he received the Hewlett-Packard Award and the Lemmon Award for Primary Care. After completing his residency at Boston Children's Hospital, he and his family moved to Guntersville in



The year's Master Pediatrician recipient, David Chupp, MD, FAAP.

1995, joining Marshall County Pediatrics. Starting a ministry for the homeless called "Room in the Inn," Dr. Chupp with his wife Shirley were named "Humanitarians of the Year" by the Marshall County Interagency Council for their work with the homeless.

The Wallace Alexander Clyde, M.D. Distinguished Service Award was established in 1984 by the UAB Department of Pediatrics and Children's as a means of recognizing outstanding physicians who have devoted a lifetime of service to children and their families. This year, Waldemar "Wally" Carlo, MD, FAAP, a long-time neonatologist at UAB, was honored with the award.

Dr. Carlo graduated from medical school at the University of Puerto Rico Medical Sciences Campus in San Juan, completed his residency at University Children's Hospital in San Juan

# Annual Meeting attendees enjoy practice management pearls, MOC Part 2 group session, special awards dinner

Pediatricians from across the state came together for yet another successful Annual Meeting and Fall Pediatric Update at the Hyatt Regency Birmingham—The Wynfrey Hotel in late September, which featured a Friday practice management workshop, a medical liability/risk management workshop by ProAssurance, a Chapter business meeting on Saturday, the annual awards dinner in association with Children's of Alabama and our third annual MOC Part 2 group session on Saturday afternoon.

At the Children's of Alabama/UAB/Chapter Awards Dinner, new Mental Health Commissioner Lynn Beshear provided a keynote address, and outgoing



Department of Mental Health Commissioner Lynn Beshear presents her vision for children's mental health in Alabama.

Chapter President Cathy Wood, MD, FAAP, recognized several other individuals for their outstanding work, including:

AL-AAP 2017 Legislative Heroes, Alabama Senator Clyde Chambliss and Alabama Representative Mike Holmes

· in recognition of their leadership in strengthening Alabama's graduated driver license law this year by imposing stiffer penalties;

David Kimberlin, MD, FAAP, Immediate Past President, as the 2016 recipient of the Marsha Raulerson Advocacy Award, in recognition of his:



Cathy Wood, MD, FAAP, with 2017 Legislative Hero, Alabama Senator Clyde Chambliss.



Marsha Raulerson, MD, FAAP, presents her namesake award (2016) to David Kimberlin, MD,

- · Serving as an expert to Chapter leadership on efforts to change state rules on vaccination requirements
- $\cdot$  Providing expert testimony and background information on a variety of legislative issues related to childhood disease and vaccination
- · Serving as an expert to the Chapter and payors on coverage of medicines for childhood RSV
- $\cdot$  Strong advocacy in the media to advocate for the importance of vaccines and their safety in the face of continuing media misinformation.

Michael Ramsey, MD, FAAP, Immediate Past President, as the 2017 recipient of the Marsha Raulerson Advocacy Award, in recognition of his:

- · Creating the Choose to Have a Healthy Family, Alabama! campaign, which resulted in pediatricians across the state using social media to educate parents.
- $\cdot$  Continuing to use video technology and social even today in his own practice to educate parents about child health issues.

#### From Annual Meeting continued from page 4

· Staging a massive public relations and advocacy campaign both in 2015 and 2016 to avert disaster in our state funding for Medicaid, going above and beyond by writing letters to the editor, using social media to spread the word, conducting massive letterwriting campaigns, hosting news conferences, and engaging in countless media interviews on the topic.

"I can think of no other Chapter member who has, in recent years, demonstrated a spirit of advocacy for the children of Alabama," Dr. Wood said.



Michael Ramsey, MD, FAAP, accepts the 2017 Marsha Raulerson Advocacy Award

In addition, District X special achievement awards were presented to Dr. Ramsey, Cason Benton, MD, FAAP, medical director of the Alabama Child Health Improvement Alliance; Richard Simpson, DMD, Chapter Oral Health Liaison; and Eric Tyler, MD, FAAP, with Pediatric Associates of Alexander City.

The festivities concluded with Children's awarding of its Master Pediatrician and Wallace Clyde awards (see sidebar stories).

# From Clyde Award continued from page 4

and his fellowship at Rainbow Babies and Children's Hospital in Cleveland, Ohio. Currently

in Cleveland, Ohio. Currer
the Division Director
of Neonatology and
Director of Newborn
Nurseries at UAB in
Birmingham, Dr. Carlo
has a special interest
in neonatal respiratory
disorders and has
extensive experience
in clinical research,
including the design,
implementation, data
analysis and reporting
of neonatal and childhood



Wally Carlo, MD, FAAP, recipient of the Wallace Clyde award.

of neonatal and childhood research. He designs and directs many randomized clinical trials, has conducted experimental and epidemiological research, and has mentored many neonatologists through the years.

Congratulations, Drs. Chupp and Carlo!

# Project ECHO: Autism

A unique opportunity for YOU to help kids with autism

## What is Project ECHO: Autism?

Project Echo: Autism is an innovative "telementoring" system that allows virtual real time access to autism experts to help you care for your patients with autism in your own community.

# Why should Project ECHO: Autism matter to you?

- 1 in 68 children have autism
- 50-80 % have trouble with sleep
- 40-80% have GI issues
- More than half have co-occurring anxiety or behavioral difficulties
- Parents and families need medical support in their home communities

## What do you need to participate?

- Internet access and a front-facing camera via smartphone, tablet or computer
- Time every other Friday from 11:45 am 1:15 pm (90 minutes)





# JOIN US IN BRINGING THE BEST AUTISM CARE TO PRIMARY CARE.

Email echoautism@peds.uab.edu or call 205.638.9254 to sign up TODAY!

## Enroll now for "Breathe Alabama," ACHIA's asthma QI collaborative!

ACHIA's "Breathe Alabama: An Asthma QI Collaborative" for primary care practices rolls out in January! Maintenance of Certification Part 4 will be available and the curriculum is similar to previous Chapter/AAP asthma collaboratives, although this iteration includes no travel for the practice, virtual CME/ CEU, a shortened collaborative timeline and less data collection. Particularly exciting for 2018 is that several Medicaid Health Homes will incorporate the asthma home visiting model that was popularized in Boston. In this model, the home visitors reinforce the practice care plan with additional asthma education and environmental assessments.

#### Why participate?

- Achieve better outcomes for your patients
- Interventions occur outside of busy "flu" and "back-to-school" season
- Home visiting will boost patient self-management skills
- Connect with Alabama asthma experts
- Some payors incentivize asthma measure performance
- Increase QI skills and teambuilding
- Learn from other practices on how to deliver excellent asthma care in a busy practice
- Avail yourself to MOC Part 4 and CME/CEU credit
- Achieve better outcomes for patients (worth repeating!)

If you have questions, contact Cason Benton, MD, FAAP, at cbenton@peds.uab.edu. To enroll, email Linda Champion at lchampion@alaap.org.

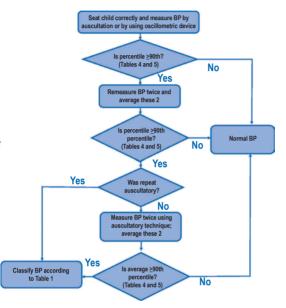
# Healthy Active Living: Is your practice sustaining the gains?

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

It has been a little over two years since ten Alabama practices with 44 physicians, 77 residents and 90,000 annual patient visits improved obesity prevention and treatment processes through the Alabama Child Health Improvement Alliance's Healthy Active Living (HAL) collaborative. At HAL's conclusion, close to 100 percent of patients experienced accurate measuring and interpretation of blood pressures as well as had body mass index assessed and received nutrition and physical active counseling at all health supervision visits.

If you were one of the HAL practices, how are you doing? Updates regarding blood pressure guidelines<sup>1</sup> and a practical article on stigma and obesity<sup>2</sup> provide great opportunities to revamp protocols, check in on data, and get everyone in the practice on the same page for obesity prevention and treatment.

Incorporating the simplified blood pressure guide lines could increase the efficiency of triage, and being mindful of "word choice" might motivate patients. See the blood pressure algorithm at right and stages in the table below. If you would like information about data (what is the numerator/denominator, how many to abstract) or updated QI tools such as the Plan-Do-Study-Act cycle, just send an email to <a href="mailto:cbenton@peds.uab.edu">cbenton@peds.uab.edu</a>.



The AAP guidelines recommend that pediatricians:

- Perform routine blood pressure measurements only at annual preventive care visits.
- Follow a simpler screening table that identifies blood pressures needing further evaluation.
- Follow a simplified blood pressure classification for adolescents age 13 or older that aligns with forthcoming guidelines from the American Heart Association and American College of Cardiology.
- Use 24-hour ambulatory blood pressure monitoring to more exactly diagnose hypertension
- Start blood pressure-lowering medications if lifestyle changes fail to reduce the blood pressure or if the child has another condition like diabetes or kidney disease

The first-line treatment remains lifestyle changes, as there is a high correlation between hypertension and obesity.

TABLE 2: Updated Definitions of BP Categories and Stages

For Children Aged 1–13 y	For Children Aged ≥13 y
Normal BP: <90th percentile	Normal BP: <120/<80 mm Hg
Elevated BP: ≥90th percentile to <95th percentile or 120/80 mmHg to <95th percentile (whichever is lower)	Elevated BP: 120/<80 to 129/<80 mmHg
Stage 1 HTN: ≥95th percentile to <95th percentile + 12 mmHg, or 130/80 to 139/89 mmHg (whichever is lower)	Stage 1 HTN: 130/80 to 139/89 mm Hg
Stage 2 HTN: ≥95th percentile + 12 mmHg, or ≥140/90 mmHg (whichever is lower)	Stage 2 HTN: ≥140/90 mmHg

<sup>1</sup>Clinical Practice Guideline for Screening and Management of High Blood Pressure in Children and Adolescents. Joseph T. Flynn, et al, Subcommittee on Screening and Management of High Blood Pressure in Children, Pediatrics Sep 2017, 140 (3) e20171904; DOI: 10.1542/peds.2017-1904

<sup>2</sup>Stigma Experienced by Children and Adolescents With Obesity. Stephen J. Pont, Rebecca Puhl, Stephen R. Cook, Wendelin Slusser, Section on Obesity, The Obesity Society, Pediatrics Nov 2017, e20173034; DOI: 10.1542/peds.2017-3034

## Reach Out and Read All About It!

By Salina Taylor, Development and Communications Coordinator

You can help build better brains for Alabama's children: see postcard for details!



As you know, learning begins at birth, and the first five years offer a critical window for brain development. Frequent exposure to words through reading aloud, talking, singing, and rhyming helps young children develop language skills that serve as the foundation for all learning, and fosters a love of books that will last a lifetime. By prescribing books at well-child visits and teaching parents to read aloud to their babies and toddlers through Reach Out and Read-Alabama, our providers are making sure that children have an opportunity for a brighter future.

We invite you to contribute to our exciting program by scanning the QR code on the enclosed postcard.

Help us reach our goal of \$15,000. For more information, contact <u>stsowell@roralabama</u>.

## Literacy builds life skills as well as language skills

By Polly McClure, RPh, Statewide Coordinator

Just a year ago, in a report published in the *Journal of the American Medical Association*, Brody and colleagues described a neuroimaging study demonstrating that supportive parenting prevented the reduced growth of certain areas of the brain that occurred as a response to living in poverty. This new research showed that positive parenting can overcome the effects of poverty on healthy brain development in adolescents.

In a recent article in *The New York Times*, Perri Klass, MD, FAAP, Reach Out and Read National Medical Director, reiterated the role that parents play in the healthy brain development of their child. "As more and more attention was drawn to early brain development, it seemed clear that as we talked about getting books into children's hands and homes, what we were really trying to do was help foster the language-rich parent-child interactions that build children's brains," Dr. Klass said. "Children are constantly learning, but they need adults, voices and interactions for that learning to take place."

According to 2017 Alabama Kids' Count Data Book, almost 300,000 of our state's children live in poverty and only 38.3 percent of our children have a fourth grade reading proficiency. Reach Out and Read-Alabama's evidence base is supported by independent, published research studies showing that the children we serve:

- are read to more often by their parents,
- · have improved language skills, and
- have a greater love of reading.

"When we speak of literacy, we need to acknowledge how much [it] encompasses. Yes, it's a key to success in school, with all that that implies about life trajectory, earning power, and socioeconomic status," emphasized Dr. Klass.

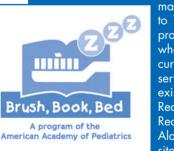
In the past 11 years, Reach Out and Read-Alabama has prescribed almost 2 million books. Each time a physician takes a book into the room, shares it with the child and provides instruction to the parent(s) about sharing the book together, he/she is creating the possibility for a brighter future for that child.

If you or your practice is interested in implementing Reach Out and Read, please contact Polly McClure, statewide coordinator at <a href="mailto:pmcclure@roralabama.org">pmcclure@roralabama.org</a>.

# Chapter secures DentaQuest grant to bring Brush, Book, Bed initiative to Alabama

Counseling families to establish good habits that will last a lifetime is the cornerstone of pediatrics. Oral hygiene practices, reading, and regular bedtimes are three simple life skills that pediatricians can reinforce to pay dividends to the lifelong health of their patients and their families. Many families, especially those most vulnerable, are not aware of the importance of early oral health, seeing a dentist and reading to their children.

Using the American Academy of Pediatrics' (AAP) already established model program, the Alabama Chapter-AAP has developed the Alabama Brush, Bed and Book Statewide Initiative (BBB), which will recruit pediatricians to promote the establishment of healthy nighttime routines among young children (ages 0 - 3) and their families in 2018. Thanks to a grant from the DentaQuest Foundation, along with in-kind support from the Alabama Department of Public Health's Oral Health Division, the Chapter and its early literacy arm, Reach Out and Read-Alabama, will distribute educational and other



materials
to 12
practices
who
currently
serve as
existing
Reach and
ReadAlabama
sites and
guide them

on talking with families about healthy nighttime routines: brush the child's teeth, read together, and set a regular bed time.

Families will leave well-child

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### From Reach Out and Read continued from page 7

Alabama's DentaQuest Health Equity Hero donates back to Reach Out and Read By Salina Taylor, Development and Communications Coordinator

As mentioned in a previous edition of The Alabama Pediatrician, Richard A. Simpson, DMD, chair

of the Oral Health Coalition of Alabama, and pediatric dental liaison to the Alabama Chapter of the American Academy of Pediatrics, was recently selected as one of DentaQuest's 2017 Health Equity Heroes. As chair of the Oral Health Coalition of Alabama, Dr. Simpson leads efforts to identify successful initiatives and best practices from other states and implement them in Alabama to enhance accessibility to oral health services for seniors, children and the underserved. Dr. Simpson has also spent the past 17 years 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.



Dr. Simpson is pictured here with Becca Mix, Vice President of DentaQuest Care Group (left), Janice Jackson, DMD, with UAB's Pediatric Dental Residency Program, and Polly McClure, Reach Out and Read-Alabama Statewide Coordinator.

With his award, Dr. Simpson designated Reach Out and Read-Alabama as one of two programs to receive a \$500 grant to honor his recognition. The checks were presented at the Chapter's 2017 Annual Meeting & Fall Pediatric Update Awards dinner. Congratulations and heartfelt thanks go to Dr. Simpson for all of his hard work and generosity!

# From Brush, Book, Bed continued from page 7

visits with materials in hand (age-appropriate books, stickers, a toothbrush, and toothpaste) to remind them of the need to complete the BBB routine each night to achieve optimal oral health for their children.

Each practice will receive a quantity of materials to share with 500 children and resources to satisfy necessary training needs on early childhood literacy and oral health.

Interested pediatric practices must agree to organize a core team, identify a champion, develop a workflow, participate in three webinar/calls, and collect minimal data. Look for recruitment information soon, which will include all of the criteria for interested practices!

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

Saluting Franklin Trimm, MD, FAAP By David Gremse, MD, FAAP, Chair, Department of Pediatrics, University of South Alabama



David Gremse, MD, FAAP

In this season of thanksgiving and celebration of the holidays, it is fitting for us to express our thanks to Dr. Franklin Trimm and celebrate his accomplishments as the Pediatric

Residency Program Director at the University of South Alabama. After serving for 25 years as the Program Director, Dr. Trimm will become the Associate Dean for Diversity and Inclusion at the USA College of Medicine.

In addition to his leadership in graduate medical education at the University of South Alabama and nationally, Dr. Trimm has also been a leader in the American Academy of Pediatrics. He chaired the AAP Committee on Pediatric Education, was course director for the AAP DB:PREP 2012 and is the founding Co-Editor of AAP PREP DBPeds.

Dr. Trimm has led the residency from a total of 18 residents when he took over to a program with 45 residents today. One of the trademarks of the pediatric residency at the University of South Alabama is the diversity

and
geographic
scope
of the
program,
features
that
developed
through
the



Franklin Trimm, MD

leadership and dedicated effort of Dr.
Trimm. Our former residents are practicing throughout the United States from upstate
New York to Southern California and from the southern tip of Florida to Portland,
Ore. Internationally, graduates of our residency program practice on four different continents.

Through it all, Dr. Trimm has kept the program on the cutting edge of developments in medical education, most recently directing our faculty into the era of competency-based education of our learners.

Please join me in congratulating Dr. Trimm on accepting this new leadership position at the University of South Alabama.

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## From Departments of Pediatrics continued from page 9

UAB and Children's of Alabama welcome new pediatrics faculty 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 UAB
Department of
Pediatrics and
Children's of
Alabama has
welcomed 12 new
faculty since August
2017. These new
faculty will enable us

to better serve the children of Alabama and many of you as referring physicians. I am pleased to introduce them to you.

Amitha Ananth, MD, Assistant Professor in Pediatric Neurology, earned her medical degree from UAB. She completed her general pediatrics residency at UCSF Benioff Children's Hospital, in Oakland, Calif., a child neurology fellowship at Baylor College of Medicine/Texas Children's Hospital, in Houston and medical genetics fellowship at Stanford University School of Medicine. She has served as a pediatric neurologist at Providence St. Vincent Medical Center in Portland, Ore. and as a session instructor in applied biochemistry and human genetics at Stanford. Dr. Ananth holds a certification in neurology with Special Qualification in Child Neurology from the American Board of Psychiatry and Neurology. Her clinical interests are neurometabolic disorders and neurodegenerative disorders.

Amy Myers CaJacob, MD, Pediatric Allergy and Immunology, earned her medical degree from University of Cincinnati College of Medicine. She completed an internal medicine residency and allergy and immunology fellowship at UAB and Children's of Alabama. She has served as a clinical instructor at various

institutions including UAB's Division of Pulmonary, Allergy and Critical Care. Dr. CaJacob will serve as the Associate Program Director of the Pediatric Allergy and Immunology Fellowship program. Her research interests include asthma, food allergy, and eosinophilic gastroenteropathies.

Lynzee Head, DO, MSPP, Pediatric Emergency Medicine, earned her Doctorate of Osteopathic Medicine from Des Moines University. Prior to that, she earned a Master of Science in public policy from Georgia Institute of Technology in Atlanta. Dr. Head completed her pediatric residency at Mercer University/Navicent Health in Macon, Ga. In addition, she served as Co-Chief of the Mercer University Pediatric residency Program. Her research interests include adolescent medicine, particularly LGBT adolescents.

Mike Leonis, MD, PhD, Pediatric Gastroenterology, Hepatology and Nutrition earned his medical degree and Doctorate of Philosophy from Washington University School of Medicine, in St. Louis, Mo. He completed his pediatric residency at Primary Children's Hospital Medical Center at the University of Utah School of Medicine in Salt Lake City and his fellowship in pediatric gastroenterology, hepatology and nutrition at Cincinnati Children's Hospital Medical Center. Most recently, Dr. Leonis was an Associate Professor of Clinical Medicine in the Department of Pediatrics at the University of Cincinnati College of Medicine while also serving as Director of Training and Education and Director of the Gastroenterology Fellowship Training Program in the Division of Gastroenterology, Hepatology and Nutrition at Cincinnati Children's. His clinical interests include all areas of pediatric hepatology and pediatric liver transplantation and he has participated in NIH-sponsored multi-center clinical research projects in pediatric acute liver failure over the last decade. Dr. Leonis joins UAB Pediatrics and Children's as the

Bradford Dean Dixon Endowed Professor in Pediatric Hepatology. He also serves as the Medical Director of the Pediatric Liver Care Center and the Medical Director of Pediatric Liver Transplantation.

Wayne Liang, MD, FAAP, Pediatric Hematology & Oncology and Informatics Institute, earned his medical degree from Case Western Reserve University in Cleveland, Ohio. In addition, he is a candidate for a Master of Science in Biomedical and Health Informatics at University of Washington in Seattle, Wash. Dr. Liang completed his pediatric internship and residency at Monroe Carell Jr. Children's Hospital at Vanderbilt in Nashville. Dr. Liang also served as Pediatric Chief Resident at Monroe Carell Jr. Children's Hospital. He completed his Pediatric Hematology & Oncology Fellowship at the University of Washington/ Seattle Children's Hospital/Fred Hutchinson Cancer Research Center, and a post-doctoral fellowship in biomedical informatics at the University of Washington. His clinical and research interests include solid tumors, clinical informatics, clinical decision support, and precision medicine.

Riley Livingston, MD, MPH, Pediatric Hospital Medicine, earned her combined medical degree and Master of Public Health from Tulane University School of Medicine and School of Public Health and the University of Alabama at Birmingham (UAB) School of Medicine and School of Public Health. Dr. Livingston completed a residency in anatomic and clinical pathology at UAB. Most recently, Dr. Livingston completed her pediatric residency with the University of Florida at Sacred Heart Hospital in Pensacola, Fla. Her clinical and research interests include outcome disparities among newborns and infants, resident education, root-cause analyses, and quality improvement endeavors, including improvement of resident hand-offs and

### From Departments of Pediatrics continued from page 10

systems-based practice during the hospital admission process.

Erika Mendoza, MD, Pediatric Cardiac Critical Care, earned her medical degree from Universidad Central de Venezuela, Escuela Jose Maria Vargas, in Caracas, Venezuela. She completed her pediatric residency at Albert Einstein Medical Center/St Christopher's Hospital for Children, in Philadelphia and Pediatric Critical Care Fellowship at Cooper University Hospital, in Camden, NJ and at Harbor-UCLA Medical Center/Children's Hospital of Orange County in Torrance, Calif. Dr. Mendoza completed her pediatric cardiac critical care fellowship at Arkansas Children's Hospital in Little Rock. Prior to that, she served as a pediatric hospitalist at Yakima Valley Memorial Hospital in Yakima, Wash.

Annie Moroski, MD, General Pediatrics, earned her medical degree from Medical University of South Carolina in Charleston. She completed her pediatric residency at the University of California Irvine at Children's Hospital of Orange County in Orange, Calif., where she continued as a CVICU hospitalist. Her clinical interests include everything related to the care of children from general pediatrics/ newborn nursery to intensive care.

Sarah Novara, MD, Assistant Professor in Pediatric Neurology, earned her medical degree from Florida State University College of Medicine, Tallahassee, Fla. Dr. Novara completed her pediatric neurology residency at UAB. Dr. Novara has given a variety of noon conferences for both UAB Pediatrics residents and UAB Adult Neurology residents. In addition, she served as a UAB School of Medicine small group preceptor for MSII students during their neuroscience modules for the past two years. Starting this fall, she will serve as Assistant Program Director for the UAB Pediatric Neurology residency program. Dr. Novara's clinical interests include pediatric epilepsy, headache, developmental delay, and ischemic stroke. Her research interests are pediatric simulation education and quality improvement in the care of pediatric neurology patients.

Gabriela Oates, PhD, Assistant Professor in Pediatric Pulmonary and Sleep Medicine, earned her Ph.D. in medical sociology from UAB. She holds a secondary faculty appointment in the Division of Preventive Medicine and is an Associate Scientist at the Cystic Fibrosis Research Center, Associate Scientist at the Minority Health & Health Disparities Research Center (MHRC), and Scientist at the Center for Outcomes and Effectiveness Research. Dr. Oates is a K12 Scholar in the AHRQ-funded Patient-Centered Outcomes Research program. She has held numerous appointments at UAB, including Director of Research of the MHRC. Her research addresses the social determinants of health in chronic respiratory conditions. She is particularly interested in the role of the physical and social environments for adherence to treatment and health outcomes.

Cassandra Smola, MD, Assistant Professor in Pediatric Hospital Medicine, earned her medical degree from UAB. She completed her pediatric residency, pediatric chief residency and pediatric fellowship in hospital medicine at the UAB Department of Pediatrics at Children's of Alabama. Dr. Smola has held various teaching roles including her experience as a Clinical Preceptor at UAB's Primary Care Clinic. Recently, she was the Rotation Co-Director of Injury Prevention and Child Advocacy at UAB. Her academic interests include unintentional poisonings, ear and eye exams for residents, residency advocacy, cleft and craniofacial pediatrics.

Megan Yanik, MD, MSPH, Pediatric Nephrology, earned her medical degree from the Ohio State University College of Medicine, in Columbus, Ohio. Dr. Yanik completed her pediatric residency and pediatric nephrology fellowship at UAB Department of Pediatrics and Children's of Alabama. She recently finished her Master of Public Health in Clinical and Translational Research with a concentration in biostatistics at UAB. Her clinical and research interests include immunosuppressant medications and outcomes in pediatric kidney transplant recipients.



Amitha Ananth, MD



Amy Myers CaJacob, MD



Lynzee Head, DO, MSPP



Mike Leonis, MD, PhD



Wayne Liang, MD, FAAP



Riley Livingston, MD, MPH



Erica Mendoza, MD



Annie Moroski, MD



Sarah Novara, MD



Gabriela Oates, PhD



Cassandra Smola, MD



Megan Yanik, MD, MSPH

## NEWS FROM PUBLIC HEALTH

Newborn screening news: SCID added to panel Alabama hospitals are adding a screening test for Severe Combined Immune Difficiency (SCID) to the Newborn Screening Panel.

#### Facts about SCID

- SCID is a 100 percent fatal disease without bone marrow transplant.
- Babies with SCID referred for transplant within the first three months of life have a nearly 100 percent survival rate.

#### Here's how it works

- Your office and the UAB Clinical Immunology group will receive notification of positive screens.
- The UAB group will contact you to determine who should notify the family.
- After the family has been notified, UAB will FedEx a shipping container for a lavender top tube with a return label to the UAB Cellular Immunobiology Laboratory for a flow cytometry confirmatory test.
- Your office will be requested to help arrange for a CBC and a lavender top tube (1-2 mL) to be drawn on the patient for shipment to the lab.

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 A patient who has very low T cells on flow cytometry will be admitted directly to the Children's of Alabama bone marrow transplantation unit for this life-saving procedure.

Questions? Call the UAB Department of Pediatrics Clinical Immunology Group at 205-638-9072.

In addition, the ADPH Newborn Screening Program is working on updating the Newborn Screening Reference Manual for Medical Providers in 2018 and will be mailing this out to all pediatric providers in the state and distributing at the Chapter's Spring Meeting meeting in May.

ImmPRINT: Bridging the gap between provider and vendor communication

By Takenya Taylor, Immunization Division, Alabama Department of Public Health

The Alabama Department of Public Health's (ADPH) Immunization Patient Registry with Internet Technology (ImmPRINT) is a statewide, population-based information system for all residents in Alabama. There are more than 4,000 sites using ImmPRINT, including providers, pharmacies, hospitals, urgent care centers, public and private schools, and childcare centers. The program provides multiple benefits for providers participating including 1) printing the only ADPH-approved Certificates of Immunization (COI); 2) gaining access to the ACIP Vaccine Forecaster to ensure the best medical decisions for patients; and 3) having the ability to run HL7 reports to ensure all EMR vaccine administered is transmitted correctly and in a timely manner.

For providers with EMR interfaced with ImmPRINT, the vendor may not provide the information quickly enough or respond to questions and concerns of providers in a timely or effective manner. ImmPRINT staff may be able to help. One of the registry's goals is to help educate vendors and providers on what is necessary to make the registry successful, and ultimately ensure that the most accurate and valuable immunization information is included in the registry.

ADPH Immunization staff understands provider office staff are busy or may not have the technical background to fully communicate with vendors to determine the most appropriate plan of action to correct issues. The ImmPRINT staff has computer programming, nursing, and departmental staff who can help navigate the conversation between providers and vendors for corrective action. As part of the Be the Boss component of ImmPRINT participation, registry staff is available to assist providers with discussions with their vendors.

the alabama pediatrician

# News from Help Me Grow Alabama

By Katie Naman Prince, Help Me Grow Alabama Director, Alabama Partnership for Children

#### Well Visit Planner introduced in Alabama

Help Me Grow (HMG) Alabama is excited to partner with The Child & Adolescent Health Measurement Initiative and the Help Me Grow National Center to begin utilizing the Well Visit Planner as a new tool to engage families, communities, and child health providers in promoting children's healthy development.

The Well Visit Planner (WVP) is an online pre-visit planning and education tool (based on the American Academy of Pediatrics' Bright Futures guidelines) that promotes family engagement and helps parents of children ages four months to six years learn about and plan for their child's next preventive care visit. The WVP does so by allowing parents to



reflect on their child's and family's strengths and needs; answer standardized questions about their child's development, family, and context; learn about and choose priorities for discussion; and get a personalized visit guide to share with their health care team. The personalized visit guide will give families an overview of their responses, show their selected priorities, and provide resources and examples of questions to ask their child's health care provider.

Outreach is currently being focused in the HMG South Alabama region, however anyone statewide can share the tool with the families they serve by directing parents and caregivers to <a href="https://www.WellVisitPlanner.org/HelpMeGrowAlabama">www.WellVisitPlanner.org/HelpMeGrowAlabama</a>.

Did you know? ASQ Enterprise provides better coordination for your patients HMG Alabama has adopted the ASQ Enterprise system to better coordinate and track statewide developmental screening efforts and to aid or enhance early care and education programs that have incorporated the ASQ into their programs to maximize the quality of care provided. ASQ Enterprise is a convenient, online tool that allows programs serving young children and families to easily organize and manage their screening efforts. Specifically, it allows providers to create and manage child and program records, store results and follow-up decisions in child records, easily track when children need to be screened, access activities parents can try at home to encourage child progress, access automatic scoring and screening selection to help eliminate scoring errors and provide more accurate referral information.

Through the Family Access component, practices can now utilize tablets for parent completion in waiting rooms or send the families the link to complete the ASQ online before their next well-child visit.

Screening is always linked to follow-up when there is a concern identified, and health care providers have a professional responsibility to ensure appropriate follow-up, referral, and connection to services for the family and child. However, screening is not helpful when the parent or provider does not know where to turn, which is why the HMG system in Alabama is so important. HMG is a valuable tool if a provider is working with a child who might not fit into established referral procedures, and HMG Care Coordinators can help that provider find the right information. A provider who has a concern or wants more information about a child's development can simply dial 2-1-1 or make a direct referral with the family's permission. In either case, there is no cost and the information provided is entirely confidential.

HMG staff will help practices with program set-up, staff training, and continuous technical assistance as questions or needs arise. Anyone interested in learning more about HMG or the ASQ Enterprise system can contact Katie Prince at 334-271-0304 or <a href="mailto:kprince@smartstartalabama.org">kprince@smartstartalabama.org</a>.

### Chapter/ADPH Opioid Misuse/NAS Task Force makes headway in highlevel conversations on getting treatment for pregnant women

By Cathy Wood, MD, FAAP, Immediate Past President

As reported in the last issue of The Alabama Pediatrician and as part the Executive Board's current Strategic Priorities, the Chapter leadership joined forces this year with the Alabama Department of Public Health's Office of Women's Services to form an opioid misuse/NAS task force to look at improving protocols and education to reduce the incidence of maternal substance abuse and improve outcomes for newborns and young children.

The Task Force, made up of stakeholders from across the state, has begun the important work of advocating to the state Office of Prosecution Services (OPS) and the Attorney General, in conjunction with the Alabama Section of the American Congress of Obstetricians and Gynecologists (ACOG), to establish a state strategy on getting help for pregnant women before their baby is born and before they risk being charged with chemical endangerment of their child.

A small group from the Chapter met with the Executive Director of the OPS, and there appears to be support and growing consensus of the need to educate mothers on Medication Assisted Therapy and other aspects of prenatal care and reduce the fear of recrimination.

Once there is full agreement on a statewide education/policy initiative, clinicians on the task force will set to work to establish recommended protocols and a plan of education for providers and pregnant mothers.

### From Public Health continued from page 12

There are two options for this assistance. The first option is a scheduled, three-way conference call with the provider, vendor, and ImmPRINT staff personnel. To schedule a call, please email your request to <a href="mailto:immprint@adph.state.al.us">immprint@adph.state.al.us</a>. In addition, ImmPRINT staff will begin conducting biweekly calls on Fridays from noon to 2 p.m. on January 12. These calls allow providers and their staff to call in with questions about issues concerning their vendors and ask how to best speak with their vendor to correct problems. To participate in the calls, please call 1-800-469-4599 and choose option number 1 on the call menu.

Remember, the ADPH ImmPRINT staff wants to support providers to successfully document, transmit, and monitor data. This will ensure that all Alabamians receive the necessary vaccinations they need to prevent vaccine-preventable disease and live a healthy life.

For more information on ADPH Immunization activities and programs, visit its website at www.alabamapublichealth.gov/immunization, and its Facebook page, Alabama Immunization Info, at www.facebook.com/AlabamaImmunizationInfo.

### The importance of immunization for the adolescent By Takenya Taylor, Immunization Division, Alabama Department of Public Health

Although the benefits of vaccination are numerous for adolescents, the number of adolescents being immunized against vaccine-preventable diseases is still very low, allowing many to suffer with unnecessary illness. Vaccination has eradicated diseases such as smallpox, polio and measles, allowing the United States to thrive without suffering from diseases that can cause death, cancer, 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.

#### Hope of HPV vaccine

The Human Papillomavirus (HPV) vaccine has been a recent significant and successful accomplishment for adolescent immunization. Many have heard about HPV, but there are few who understand the virus, how it is transmitted or how to prevent it. HPV is such a common virus and nearly all men and women contract it at some point in their lives The danger of HPV is the nine different types of strains; seven are cancer causing.

- Since its introduction in 2006, the first HPV vaccine, Gardasil<sup>®</sup>
   9, has consistently demonstrated effectiveness by decreasing the number of infections and HPV precancers in young people.
- The vaccine underwent years of extensive safety testing before being licensed by the FDA.

- According to the National Cancer Institute, the HPV vaccine is highly effective in preventing infection with the types of HPV it targets when given before initial exposure to the virus—which means before individuals begin exposure.
- In the trials which led to the approval of Gardasil, the vaccine was found to provide nearly 100 percent protection against persistent cervical infections with HPV types 16 and 18 and the cervical cell changes these persistent infections can cause.

#### Health System Barriers

While some parents have strong opinions against immunization, other factors contribute to low vaccination rates, including:

- Lack of strong recommendation from provider to parent One proven method is to try the presentation approach to parents, "Today your adolescent will receive the Tdap, Meningococcal, and HPV vaccine." This type of approach can be increasingly effective if it is conducted during both well and sick visits.
- Shortage of vaccine in provider offices Some providers may
  not be ordering the correct number of vaccines for their office
  and then have to go through the secondary process of ordering
  additional vaccine. Working with the Alabama Department of
  Public Health's (ADPH) Immunization Vaccines for Children
  (VFC) can help alleviate some issues with vaccine ordering.

#### Resources for Vaccination

Parents can find more information about adolescent immunization by reviewing easy-to-read vaccination schedules, the Centers for Disease Control and Prevention's Vaccine Safety website, the Immunization Action Coalition brochures and blogs, and the Alabama Department of Public Health's website located at <a href="https://www.alabamapublichealth.gov/immunization">www.alabamapublichealth.gov/immunization</a>, Facebook page, Alabama Immunization Info at <a href="https://www.facebook.com/">www.facebook.com/</a> AlabamaImmunizationInfo.

Adolescents deserve to lead a healthy future by receiving all ACIP-recommended vaccines in a timely manner, in addition to having the access and information they need about immunization. Together, health care providers and public health can work to make sure this happens.

# Keeping the game fair...



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# Project ECHO continues with two offerings in 2018

By Justin Schwartz, MD, FAAP, Developmental-Behavioral Pediatrician and Assistant Professor of Pediatrics, and Shelly Mercer, MD, FAAP, Pediatric Endocrinology Fellow, University of Alabama at Birmingham

ECHO (Extension for Community Healthcare Outcomes) is a



national model
of telementoring,
designed to link
expert specialists
with pediatric
providers and
other clinical staff
in local community
practice through
video-conferencing

Project ECHO

Pediatric Diabetes & Obesitu®

software called Zoom. Each virtual clinic consists of a concise didactic lecture, case presentations and discussion. Faculty at the University of Alabama at Birmingham began using this technology in 2017 and will continue in 2018 with two new iterations.

# Introducing ECHO Alabama: Pediatric Diabetes & Obesity - A Mini Residency

How many patients with obesity do you encounter on a typical day? With the high rate of obesity in our state, the answer is probably close to one third of your patients per day. What other chronic disease has that prevalence in your office? We know that

obese youth have a higher chance of growing up to be obese adults who experience significant comorbidities. What can we do to stop this cycle?

UAB/COA is partnering with Project ECHO to present a series

on pediatric diabetes and obesity. Topics will include: diagnosis of metabolic syndrome/obesity, both medical and non-medical management of obesity and pre-diabetes, differentiating Type 1 and Type 2 diabetes, recognizing and managing comorbidities of diabetes and obesity, updates on diabetes-related technology, psychosocial support for patients, and many more!

Who can join in? Anyone looking to advance their knowledge in pediatric diabetes and obesity – pediatricians, family physicians, PAs, nurse practitioners, nurses and MAs – are welcome to participate.

Our team consists of Gail Mick, MD, Professor of Pediatric Endocrinology, Shelly Mercer, MD, FAAP, Pediatric Endocrinology Senior Fellow, and Michelle Coulter, CRNP. These videoconferencing sessions will be held from January 12 to June 22, 2018 on the second and fourth Fridays from noon to 1 p.m.

Participants will need a Smartphone, tablet, or PC. The zoom software will be provided at no cost.

To sign up or receive more information, email endoecho@peds.uab.edu.

# Project ECHO: Autism announces new cycle of sessions beginning January 19

Join us in promoting best practice care for autism across the state

Why ECHO Autism? Autism currently affects one out of every 68 children. Children diagnosed with or suspected to have autism often wait on long waiting lists to see subspecialty providers, creating unnecessary delays in care. These children often have difficulties with behavior, constipation/GI issues, seizures, anxiety, and feeding and sleeping problems, which impact health and quality of life, and families often struggle to find resources and support in the community, leading to isolation and stress. Transportation is a huge barrier to access to subspecialty services as well. Families affected by autism have expressed a desire for their primary care providers to know more about autism.

Through ECHO Autism, you will meet regularly with a team of autism experts from multiple disciplines who will support you in the care of your patients with autism through in-depth case discussions and a series of brief high-yield didactics. Topics include screening

> and referral, constipation, sleep, anxiety and ADHD, irritability/ aggression, resources, supporting families, and more!

The multi-disciplinary team consists of Justin Schwartz, MD, Developmental-Behavioral

Pediatrician; Sarah O'Kelley, PhD, Child Psychologist; Laura Montgomery-Barefield, MD, Child and Adolescent Psychiatrist; Suzanne Geerts, MS, RD, Dietitian; Lizzie Griffith, LGSW, coordinator of Regional Autism Network Region B; Bama Hager, PhD, parent and policy advisor/program coordinator, Autism Society of Alabama; and Tracy Cron, parent expert.

The sessions will begin January 19 and run every other Friday from 11:45 a.m. to 1:15 p.m. To sign up, email <a href="mailto:echoautism@peds.uab.edu">echoautism@peds.uab.edu</a> or call 205-638-9254. For more details, visit <a href="http://www.childrensal.org/project-echo">http://www.childrensal.org/project-echo</a>.



# Documenting the HPI

By Lynn Abernathy Brown, CPC

With the implementation of EMR (electronic medical record) and the ability to streamline work flow processes, a few questions have arisen regarding how the progress note is documented and who can enter that information. The basic guidelines have not changed since the 1995 and 1997 Documentation Guidelines for Evaluation and Management Services were published. Until these guidelines change, payors will reference them whenever there is an audit of the provider's progress note.

Many payors commonly follow the two guidelines, 1995 and 1997 DOCUMENTATION GUIDELINES FOR EVALUATION AND MANAGEMENT SERVICES, available through these links:

- $\bullet \ \, \underline{ https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNEdWebGuide/Downloads/95Docguidelines.pdf} \\$
- <a href="https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNEdWebGuide/Downloads/97Docguidelines.pdf">https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNEdWebGuide/Downloads/97Docguidelines.pdf</a>

On the Blue Cross Blue Shield of Alabama website related to physician extenders, there is this statement regarding requirements for HPI (History of Present Illness) documentation:

For evaluation and management (E&M) services, Blue Cross requires claims to be billed under the name and National Provider Identifier (NPI) of the provider who physically evaluates the patient to collect or confirm the patient's History of Present Illness (HPI). The provider who is physically conducting or affirming the HPI and performing an inperson examination can bill for the Evaluation and Management (E&M) service. This work is not relegated to ancillary staff. The Review of Systems (ROS) and Past/Family/Social/History (PFSH) may be recorded by ancillary staff or on a form completed by the patient. In certain instances, an office or triage nurse may document pertinent information regarding the chief complaint, but this information should be treated as preliminary information. The billing provider of the E&M service must consider this information preliminary and needs to document that he or she explored the HPI in more detail. The information the billing provider records as the HPI needs to be his/her own synopsis of all of the HPI gathered. Additionally, Blue Cross does not recognize "incident to" billing. Under no circumstances should services performed solely by a CRNP, CNM, CRNA, PA or PA/SA be billed under a physician's name and NPI.

#### From Legislative Day continued from page 2

#### 2018 Educational Priorities

- Protection of health insurance benefits to children: The Alabama Chapter-AAP continues to advocate for the many benefits of the Affordable Care Act for children, including required coverage of preventive health benefits and immunizations, prohibition of lifetime caps, especially for medically needy children, and expanded health care access for their parents who don't currently qualify for Medicaid.
- Smoke-free public places in Alabama: In conjunction with the Coalition for a Tobacco-Free Alabama, the Chapter is working to educate legislators and the public on the hazards of secondhand smoke.

# Get 'em in! Improving vaccine rates for adolescents

By Michael J. Ramsey, MD, FAAP, Dothan Pediatric Healthcare Network

Improving vaccine rates for adolescents has many challenges. Teens don't come to

the doctor as often as their younger peers, limiting opportunities for vaccination. Some creative strategies can help to recall patients to make sure vaccinations remain up to date. Our clinic uses many different methods to try to capture these visits.



- 1. Appointment cards: Probably the least effective is giving an appointment reminder card to the family as they leave. We encourage them to write it on their calendar at home or enter it into their phone as soon as possible.
- 2. Recall phone messages: Several companies provide free or low-cost messaging services that are customizable. Reports are run on a monthly basis, and a pre-recorded call with an approved script is made to the number on file. The effectiveness of this is also somewhat limited-the family has to still have the same phone number in service, they have to listen to the message, and then remember to act on it.
- 3. Make an appointment: When we give a vaccine that requires a booster dose several months later, we add that patient to the schedule the day it is due. We use extra slots so that it doesn't reduce the number of available appointments. If the patient does not come in that day, our nurses call the family to remind them that they need a vaccine. Although this is time-consuming, it yields fantastic results, and the patients really seem to appreciate the personal touch. On most days, two or three phone calls per provider are made at the end of the day. If the family can't be reached, we send a letter in the mail. We have a very high percentage of patients that come in within a week of the phone

If you have other strategies for vaccine recall, let us know and we can share them in a future newsletter!

## CHAPTER BRIEFS

Kimberlin to serve on the FDA's Microbiology Devices Panel of the Medical Devices Advisory Committee



David Kimberlin, MD, FAAP

David Kimberlin, MD, FAAP, UAB Pediatric Infectious Disease, was invited to serve as a member on the Microbiology Devices Panel of the Medical Devices Advisory Committee of the Food and

Drug Administration (FDA) for a term that began on Sept. 29, 2017 and ends Feb. 28, 2021.

The Microbiology Panel reviews and evaluates data concerning the safety and effectiveness of marketed and investigational in vitro devices for use in clinical laboratory medicine including microbiology, virology, and infectious disease and makes appropriate recommendations to the Commissioner of Food and Drugs.

Kudos, Dr. Kimberlin!

## AL-AAP Practice Management Association update

By Josie Brooks, PMA Chair

It's hard to believe that a new year is here and with it comes a lot of new information that is to be learned. Our AL-AAP Practice Manager Association is working hard to get your managers and staff members the most up-to-date information with our webinars. Make sure to join us for our first one of the year on January 24, 2018, as we learn how Dr. Justin Schwartz is connecting medical providers across Alabama with autism experts at Children's of Alabama with Project ECHO. Also, make sure to stay connected and be a part of the AL-AAP

PMA email list. With over 120 members strong, there is always something new to learn! We look forward to a great year!

Wallace selected as President-Elect of subspecialty society



Stephanie B. Wallace, MD, FAAP

Stephenie B.
Wallace, MD, FAAP,
UAB Adolescent
Medicine, has been
selected to serve
as Vice President/
President-Elect
of the Southeast
Regional Chapter
of the Society for
Adolescent Health and

Medicine. The Southeast Regional Chapter includes members from six states: Alabama, Louisiana, Mississippi, Tennessee, Georgia and Florida. Congratulations, Dr. Wallace!



## NEWS FROM THE AAP

AAP moves into new headquarters, Alabama Chapter conference room to be named

# Alabama Chapter members collectively contribute more than any other Chapter

On December 8, the American Academy of Pediatrics moved into a new headquarters that is designed to support current and future generations of pediatricians in their work on behalf of children.

The new five-story, 183,000-square-foot, state-of-the-art office building includes work space for the Academy's 455 professional staff as well as an expansive conference center to host meetings for the Academy's physician members.

"This new headquarters is designed to support the work of our staff and our 66,000 members at the highest level. Our new headquarters is more than just an office building; it is designed to be the new home for the profession of pediatrics, where we can pursue the AAP's mission together," said AAP CEO and Executive Vice President Karen Remley, MD, FAAP.

Conveniently located 10 miles from O'Hare International Airport in Itasca, Ill., the new pediatric home is designed to support the Academy's growth and members' evolving needs. The building's 81 meeting rooms reflect the need for collaboration in all areas of the Academy's work, with state-of-the-art audiovisual and connectivity technology to enable physicians to participate no matter where they are located.

The Itasca headquarters will be the Academy's third home since it was founded in 1930 by 35 pediatricians to serve as an independent forum to address children's health needs. The AAP moved from its original offices in Evanston to a building in Elk Grove Village in 1984, when the Academy numbered 26,000 members and 125 employees. The 110,000-square-foot Elk Grove Village building is being sold to help finance the purchase of the new headquarters.

The new building is also being funded through the generosity of members and other donors across the country who have been contributing to the AAP's "For Our Future" building fund.

"I'm excited to announce that Alabama Chapter members have pledged more than \$50,000 to the campaign, which allows us to name a conference room as the 'Alabama Chapter' Room," said Chapter President Wes Stubblefield, MD, FAAP. "To date, we are the highest contributing Chapter across the country!"

## Dr. Yasuda voted AAP president-elect; Ramsey appointed to CFMC

Kyle Yasuda, MD, FAAP, of Seattle, has been voted the AAP president-elect. He ran against Michael A. Weiss, DO, FAAP, of Coto de Caza, Calif. Dr. Yasuda will take over as president on Jan. 1, 2019, following Colleen A. Kraft, MD, FAAP, of Cincinnati, who will serve as president in 2018. To read about Dr. Yasuda's background, visit http://www.aappublications.org/news/2017/06/02/Yasuda060217.

In addition, results for additional AAP national offices in our District X, which take effect Jan. 1, 2018, were as follows:

District Chairperson - Lisa A. Cosgrove, M.D., FAAP, Florida

District Vice Chairperson - Mobeen H. Rathore, M.D., FAAP, Florida

National Nominating Committee Representative -Evelyn D. Johnson, M.D., FAAP, Georgia

And finally, our own Michael J. Ramsey, MD, FAAP, Past President of the Chapter, has been appointed as the incoming Representative of the Chapter Forum Management Committee, a position he will assume in 2018. Congratulations, Dr. Ramsey!



Michael J. Ramsey, MD, FAAP

## **Event Calendar**

Starts January 12, 2018 Project ECHO®: Pediatric Diabetes & Obesity Telementoring Session 12 noon – 1 p.m.

Starts January 19, 2018 Project ECHO®: Autism Telementoring Session 11:45 a.m. – 1:15 p.m.

January 18, 2018 AL-AAP Webinar: Adolescent Vaccination Best Practices in Meningococcal B Disease Prevention 12:00 noon

January 24, 2018 Chapter/PMA Webinar: ECHO Autism 12:15 p.m.

February 13, 2018 15th Annual Pediatric Legislative Day RSA Terrace/Alabama State House 9:15 a.m. – 1 p.m.

May 3 – 6, 2018 2018 Spring Meeting & Pediatric Update Grand Hotel Marriott Resort Point Clear, AL

September 28 – 30, 2018 2018 Annual Meeting & Fall Pediatric Update Hyatt Regency Birmingham-The Wynfrey Hotel Birmingham, AL

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