From the President

Legislative Update

Alabama’s 2018 legislative session is coming to a close. The session was relatively smooth and moderately successful concerning pediatric issues. At time of the writing of this article, the Medicaid budget is poised to pass both houses with no cuts to healthcare for children and with all funding intact for the pediatrics who care for them. Thanks to carry-over funding and federal passage of the CHIP extension, the 2019 budget is safe, but we have many concerns for the 2020 budget. Our fight never ends.

The Alabama Chapter-AAP is working for the children of our state. We are celebrating the passage of HB 76 by both the House and the Senate, the Alabama Child Care Safety Act, which was amended to strengthen safety requirements for child care programs, limit which programs are exempt, and place more requirements on those that are exempt. Safe child care facilities was one of our legislative priorities and it demonstrates that we are making a difference!

While the flu season has raged on this winter keeping you busy in your offices, the Chapter has been working for you by addressing more issues of concern that have arisen outside of the State House such as proposed Medicaid work requirements, state judicial policy regarding maternal substance abuse, and adolescent immunizations and protection of the medical home.

Finally, thanks to the help of Dr. Eric Tyler, you will be receiving a letter from your area representative. We are asking each of you to help us shape our agenda and how to be more responsive to your needs.

Help us make 2018 the best year ever to practice pediatrics!

SIDS, common ER diagnoses, maternal depression among topics at 2018 Spring Meeting

Register Now!

The Chapter executive office, Executive Board and CME Chair Susan Walley, MD, FAAP, are looking forward to our 2018 Spring Meeting, to be held May 3 – 6 at the beautiful Grand Hotel Marriott Resort in Point Clear, Ala.!

Dr. Walley has put together an extraordinary line-up of topics, with a focus on asthma and smoking cessation, safe sleep, and opioids. Other topics include teen driving, common ER diagnoses, early hearing detection and intervention, infant mortality, personalized management of asthma, evaluation and management of chronic cough, early screening successes in Alabama, maternal depression screening and more!

In addition, at the conference site, there will be two separate sponsored luncheon symposia, including “New Approaches to Cow’s Milk Allergy: Clinical Benefits of Extensively Hydrolyzed Casein Formula with LGG,” sponsored by Mead Johnson, and another on HPV cancer prevention, sponsored by the West Alabama Health Education Consortium.

And on the fun side of things, join us for our Saturday dinner, Bayou Bash & Feast by the Bay, sponsored by USA Children’s & Women’s Hospital and featuring 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 to participate in five events at their own pace – bicycling, swimming, kayaking, walking/running and reading – to become eligible for great prizes. (See more details on page 8.)

Register now using the brochure mailed to you in late January, or online at http://bit.ly/2FDNZKo.

Make plans to attend now – we’ll see you at the Grand!
Alabama Chapter-AAP Works

Chapter leaders work with payors, agencies on numerous fronts

The last couple of weeks have been a flurry of activity for the Alabama Chapter-AAP, not just in preparations for the Spring Meeting and rolling out projects, but in addressing several member concerns with payors and state agencies, including the Alabama Department of Public Health and the Alabama Department of Human Resources.

• BCBS – March 1 Fee Schedule for vaccines: Chapter Executive Director Linda Lee, APR, is in conversation with Blue Cross Blue Shield regarding several vaccines, including TdaP, for which provider payment as of March 1 is less than cost. We are awaiting a response and will forward information as we know it.

• BCBS – Process for increasing payments for vaccines in response to price increases: We have long heard about frustrations of lag time in fee schedule updates. Recently, after much discussion, we received confirmation regarding improvements to this process. Please know that we are advocating for you on this at many levels.

New process for Blue Cross Blue Shield payment adjustments due to manufacturer price increases for vaccines: On August 1, Blue Cross Blue Shield of Alabama revised its drug fee update process, to perform those updates on a quarterly basis. One issue brought to the attention of the Healthcare Networks Division is that there is a two-month lag from the time Blue Cross receives the updated pricing to when the fee schedule is updated. The PMD contract has required a one-month notification prior to drug fee updates. Blue Cross has now reduced the turnaround time to roughly two weeks via a PMP contract amendment to remove the 30-day notification requirement for drug fee updates. There still could be scenarios in which a vaccine supplier could alter its pricing just after a quarterly update is applied. In reviewing pricing changes over the past year, this would be the exception to the rule. For vaccines, with the exception of seasonal flu, the pricing team is not reviewing invoices from practices, since they now receive updated pricing benchmarks quarterly. If you see instances that are contrary to this, please let the Chapter staff know and they will share with Blue Cross. The goal is to make this process more efficient.

• Medicaid – “Pivot Plan” to Primary Care Case Management: Chapter leaders had two great meetings with Medicaid leaders on its plans to take the Health Homes and strengthen them in order to provide better care for Medicaid recipients. The Chapter, combined with the two Departments of Pediatrics, will begin quarterly maternal/child meetings with Medicaid to strengthen communication.

• ADPH – Response regarding Health Department encouragement of adolescent vaccine administration in schools: In the last few weeks, Chapter leaders learned that ADPH has sent a communication to school superintendents encouraging school-based vaccine clinics for TdaP, Meningococcal vaccine and HPV. The leadership has grave concerns and has outlined them in a letter to State Health Officer Scott Harris, MD. Dr. Harris has responded with much willingness in working with us on a solution to promote the medical home among adolescents.

• DHR – Response to local DHR requests for substance use reporting: Last week, the Chapter also learned about letters received by some members from county departments of Human Resources calling for reporting of babies who are “affected” by maternal use of legal/prescription/over-the-counter drugs in order to meet a newer federal mandate. We are seeking clarification and will be working with DHR on addressing the confusion that surrounds this issue. Above all, our goal is to protect babies and keep them healthy. This is related to current policy work we are conducting around opioid misuse in pregnant women.
Legislative Day brings together more than 25 pediatricians, child health advocates

More than 25 pediatricians and child health advocates from across the state came together for the Alabama Chapter-AAP’s 15th annual Pediatric Legislative Day held in conjunction with VOICES for Alabama’s Children’s larger Advocacy Day.

The day included addresses by key leaders of the Alabama Legislature and a state agency head panel discussion on budgets and advocacy issues, which was followed by individual visits to legislators.

During the pediatrics-only session, Chapter President Wes Stubblefield, MD, FAAP, presented Representative Mike Holmes with one of our Legislative Hero awards for his role in strengthening Alabama’s Graduated Driver License law. Representative Holmes gave a testimonial on why safe teen driving is important to him and his community.

State Legislative Update

- Improved health care for children through adequate Medicaid and CHIP funding: Funding for Medicaid and CHIP is intact for Fiscal Year 2018-2019, with no cuts to existing services, thanks to the CHIP extension passed by Congress in February, as well much-needed carry-forward money from the current year for Alabama Medicaid. Both the Alabama House and Senate have worked well together on the budgets, which, at time of writing, are expected to pass in mid-March. Meanwhile, the Chapter is working as part of the Healthy General Fund Coalition to communicate with the Governor on ways to address the Medicaid/General Fund agency budgets next year and moving forward.

- Adequate funding for birth to 5 services: The Chapter serves as a member of the Alabama Pre-K Task Force, which advocated for an increase of $22 million for the 2018-2019 Fiscal Year for state-funded, voluntary, high-quality, pre-k programs. The legislature reduced that amount to $20 million early in the Session, but at time of writing, is attempting to reduce it further to $18.5 million. We continue to advocate for the original request, or $20 million, at best.

- 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. This year, the Alabama Child Care Safety Act passed both houses with amendments that has limited but not fully eliminated exemptions (at time of writing).

  The Legislature is expected to adjourn the week of March 26, earlier than the maximum 30 legislative days.
CHIP funding restored for 10 years!

After a long advocacy battle that spanned 2017 and dipped into 2018, Congress passed the Bipartisan Budget Act of 2018 on February 9, which continues government funding through March 23, 2018 and adds additional funding for the Children’s Health Insurance Program for four years. Combined with the 6 years of CHIP funding previously provided in the January continuing resolution, CHIP is now funded for 10 years, through Fiscal Year 2027.

Cathy Caldwell, Director of Alabama’s Children’s Health Insurance Program/ALL Kids, thanked the many members who advocated to their Congressmen to push for this funding.

“I thank all of you and our many, many partners and child advocates at the state and national levels. I am so proud of Alabama citizens. Once we posted the notice that we would freeze ALL Kids enrollment on January 1, people started ringing not only our phones off the hook, but those of our Congressional delegation. I have no doubt that that was a huge force in getting some extra money in the December 21 Continuing Resolution, and in Congress acting to extend CHIP funding,” she said. “I am impressed and thankful for the outpouring of support for the program.”

The increase in the federal match rate stays for two years, which means that Alabama’s CHIP will be funded at 100 percent federal funds for this current fiscal year and next year. That bump in the match rate will be reduced in half to 90 percent federal funding in the third year. After that, the historical CHIP match rate of 80 percent will take effect.

The Executive Board and leaders of the Alabama Chapter-AAP thank the many members who put in so much time advocating for children on this issue. The outcome is a testament to the power of the voices of strong advocates!

---

**Event Calendar**

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

May 23, 2018
Chapter/PMA Webinar: TBA
12:15 p.m.

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

---

**At Soft Touch Medical, We’re All About Kids**

Whether it’s enteral therapy, respiratory care or durable medical equipment, we work closely with leading children’s providers to ensure the best outcome in the home setting.

Let us help your smallest patients. Visit us today at [www.softtouchmedical.com](http://www.softtouchmedical.com), or call us at 800.926.1103.

---

**Pediatric Specialist Dedicated and Passionate About Quality Care**
Chapter/ADPH Opioid Misuse/NAS Task Force continues policy work to establish statewide consensus on treatment of pregnant women and their babies

By Cathy Wood, MD, FAAP, Immediate Past President

At time of writing, the Alabama Chapter-AAP/Alabama Department of Public Health Opioid Misuse/Neonatal Abstinence Syndrome Task Force is gearing up for its next full meeting, which will include reports from the Legal Committee as well as a game plan for educating healthcare providers, law enforcement and others on NAS and appropriate protocols.

The Chapter leadership is still working with key state agencies to reach consensus on public education related to the opioid crisis among pregnant women and reduce the fear of recrimination. Included in this strategy are some high-level discussions with the Commissioner of the Alabama Department of Mental Health, the State Health Officer and the Commissioner of the Alabama Department of Human Resources.

We will share more as we make further, definitive gains on this front. Once there is full agreement on a statewide policy, clinicians on the task force will set to work to establish recommended protocols and a plan of education for providers, pregnant mothers and other stakeholders.
What is the Vaccines for Children Program?
The Alabama Vaccines for Children (VFC) is federal entitlement program designed to save parents and providers out-of-pocket vaccine expenses for eligible children. The routine childhood vaccines available in the program are recommended by the national Advisory Committee on Immunization Practices (ACIP) with the goal of protecting eligible children age 0-18 years from a number of preventable diseases and cancers.

What are the benefits of the VFC program?
As a health care provider, you can provide all recommended vaccines to Medicaid, uninsured, American Indian/Alaskan Native, and underinsured Federally Qualified Health Center (FQHC) children – and you will not incur any vaccine costs.

VFC providers can:
- Ensure patients get vaccinated on time.
- Save money on vaccine purchases.
- Receive in-person technical assistance and quality improvements to help increase vaccination rates, as well as assistance with record-keeping, vaccine handling and missed opportunities.
- Reduce referrals of eligible children, allowing them to stay in their medical homes and ensure continuity of care.
- Charge for the office visit, but not the administration fees.

How can I enroll as a provider in the VFC program?
Enrolling in the VFC program is easy! Go online to www.adph.org/immunization, Vaccines for Children, New Provider Enrollment Packet to complete the enrollment process.

Your strength is the ability to provide.

1.866.674.4807
www.adph.org/immunization or
facebook.com/AlabamaImmunizationInfo
Chapter weighs in on proposed Medicaid work requirement

Alabama Medicaid, at the request of the Governor, has put forth a proposal that would require some Medicaid recipients, namely mothers/caretakers of dependent children, to work in order to keep their coverage. The Chapter has concerns about such a proposal and Executive Director Linda Lee spoke at an open forum on March 5 on this issue. At time of writing, the Chapter leadership is working on formal public comment to send back to Medicaid, particularly around the following issues:

- The proposal, in short, is an express lane to the coverage gap that exists for most adults in Alabama who make too much to meet Alabama’s bare-bones requirements, but too little to afford coverage on the Health Insurance Exchange. The work requirements would force those in this category to lose their Medicaid coverage. And as more Alabamians lose their insurance, they will begin to visit emergency departments, which is a much more expensive way to treat patients. As a result, the state would see increased uncompensated care costs.

- New research also demonstrates that coverage of parents has spillover effects in terms of increased use of preventive services by children. Uninsured parents have more difficulty getting needed care. That can compromise their health, and in turn, affect their ability to work, support their families, and care for their children.

- The other huge issue is that, even if mothers could find work and pay for their healthcare, they are also faced with child care needs. Currently, Alabama Medicaid is uncertain whether it will be able to be granted additional federal funding to provide child care as part of this workforce initiative. Stay tuned for more details as this process unfolds.

Alabama Medicaid in process of “pivoting” to Primary Care Case Management entities

On February 13, Chapter leaders, including members of the Executive Committee and Pediatric Council, met with the medical directors at the Alabama Medicaid Agency to learn more about the Agency’s pivot plan in the “post-Regional Care Organization” world.

Robert Moon, MD, Chief Medical Officer and Deputy Commissioner, Health Systems, explained that since the announcement that the RCOs are not going forward, the

continued on page 13
Reach Out and Read All About It!

By Salina Taylor, Development and Communications Coordinator

Fifth annual Grand Pediatric Pentathlon returns to where it began

New this year: Raise money now by creating a practice team!

2018 marks the fifth year of the Grand Pediatric Pentathlon, when we will return to the site of the original 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.

The Grand Pediatric Pentathlon is a five-event activity held during the Alabama Chapter-AAP’s Spring Meeting that raises funds for Reach Out and Read-Alabama. The last four events have raised a total of $42,000 and this year’s event is well on the way to surpassing last year’s total of $12,500.

Continuing with the success of the past four years, the pentathlon will include a one-mile run/walk, 30 minutes of biking, 30 minutes of kayaking, one hour of swimming (bay or pool) and an hour of reading for fun. The event provides a perfect opportunity to involve the entire family in the Spring Meeting while sending a message about how Reach Out and Read-Alabama pediatricians share the importance of reading.

“One of my favorite events every year is the Reach Out and Read Grand Pediatric Pentathlon. My entire family looks forward to it!” said Dr. Ernest. “I am especially excited to be the honorary chair of this year’s GPP, which we hope will be the most successful event yet.”

New this year! Create a practice team, compete with other practices and WIN PRIZES!

This year, there is an exciting way for you and your staff to participate in the Pentathlon now, even if you can’t make it to the meeting. All practices that participate will be eligible for great prizes just like the participants at the actual event!

All you have to do is decide to create a team and participate in our peer-to-peer campaign, which will allow your team members to invite friends and family to support this amazing early literacy program.

Getting started is easy; simply email Salina Taylor at stsowell@roralabama.org; she’ll give you the website link and other information so you can begin fundraising!

Whether you come to the Pentathlon in person or create a team – or both! – help Reach Out and Read by becoming a brain-builder for Alabama’s children!

End-of-year report highlights accomplishments and donors

With the generosity of our donors and the dedication of more than 300 of our physicians and other healthcare providers, the Chapter’s Reach Out and Read program has prescribed more than two million

continued on page 9
AAP National Elections Update

In February, AAP CEO and Executive Vice President Karen Remley, MD, FAAP, announced that the AAP National Nominating Committee has selected Sara “Sally” H. Goza, MD, FAAP, a general pediatrician in Fayetteville, Ga., and George C. Phillips, MD, MBA, FAAP, an academic pediatrician in Overland Park, Kan., as candidates for AAP president-elect (2019 term).

Additional information about the candidates, including profiles and position statements, will be published in upcoming issues of AAP News and online at the AAP Election Center; www.aap.org/election. Voting will begin Nov. 2 and ends Dec 2. Members should visit the Election Center to learn more; they will need their AAP login information to access the page to learn about the candidates and vote.

“I believe that the member we choose to lead our national organization sets a tone for the direction we want for the AAP,” said Chapter President Wes Stubblefield, MD, FAAP. “Please learn more about Drs. Goza and Phillips and plan to vote your choice between November 2 and December 2.”

From Reach Out and Read continued from page 8

books to the children and their families of Alabama! That’s over 600 brand-new, age- and developmentally appropriate books per day. For a list of our donors and more 2017 highlights, visit http://www.roralabama.org/yearinreview2017.

Expanding in Etowah County

On Tuesday, March 6, Gadsden Pediatric Clinic hosted a Dr. Suess celebration to kick off their Reach Out and Read-Alabama program. Partnering with United Way of Etowah County/Success by Six and Help Me Grow-Alabama, the practice will serve 1,250 of the more than 6,600 children ages 5 and under and their families in Etowah County. According to VOICES for Alabama’s Children 2017 Kids Count Data Book, 34.4 percent of these children live in poverty and 32.2 percent are living in single-parent homes. Together with Quality of Life Health Services, the program will serve over 65 percent of the counties children and their families.

“We are so excited to start a Reach Out and Read program at our office,” said Claire Yother, MD, FAAP, a pediatrician at the clinic. “As pediatricians, we know that reading aloud to children is vital to their language development and future school success. By providing and prescribing a book at each well-child visit up to age 5, we hope to encourage families to read aloud together daily.” While Drs. Yother and Cynthia Hill serve as the programs coordinators, six other physicians and one nurse practitioner will be prescribing books through the program.

12 Reach Out and Read practices to be selected for Brush, Book, Bed initiative

Calling all Reach Out and Read practices! Do you want to help families establish good habits that will last a lifetime? 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 Reach Out and Read providers 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, families will leave well-child 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.

For details, scan the QR code.
Breathe Alabama ACHIA asthma learning collaborative kicks off in January

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

Fourteen Alabama practices are collaborating to reliably deliver optimal asthma care according to the national guidelines.

The practices are part of the Alabama Child Health Improvement Alliance’s Breathe Alabama asthma learning collaborative, which kicked off in January. Most practices completed their onsite or virtual QI coaching visit as well as their online CME.

Next steps include reviewing baseline data and implementing change ideas using the Plan-Do-Study-Act approach to track whether the changes lead to improvements.

In addition, practices are working with Medicaid Health Homes who are conducting asthma home visits. At the home visit, health home staff perform an environmental assessment and provide remediation supplies funded by the Alabama Chapter-AAP. Additionally, health homes can reinforce technique, provide medication reconciliation, comb data to connect with patients who go to Emergency Departments rather than their primary care provider, and even work with schools.

Both asthma QI collaboratives and asthma home visiting initiatives are evidence-based ways to improve asthma outcomes.

Stay tuned for more Breathe Alabama updates! To learn more, go to www.achia.org.

ACHIA Practices
- Charles Henderson Child Health Center
- Enterprise (Dothan Pediatrics) Pediatric Clinic
- Fairhope Pediatrics
- Fort Payne Pediatrics
- Greenvale: Brook Highland
- HAPPI
- Jefferson Country Western Health Department
- Metro Pediatrics P.C.
- Preferred Medical Group
- Primary Care Pediatrics and Family Medicine
- Purohit Pediatric Clinic
- Southeastern Pediatrics
- University Medical Center
- University of South Alabama Pediatrics

Asthma Optimal Care
1. Classify Asthma Severity
2. Assess Asthma Control
3. Medications: Step up or down as needed
4. Follow up appropriately
5. Support self-management with asthma action plans.

Chronic Condition coding pearls

By Lynn Abernathy Brown, CPC

- Don’t forget to include chronic conditions in your progress note assessment when they are addressed during the visit.

- We just met with our Blue Cross Blue Shield of Alabama provider network representative and they have a new tool on their website for pediatric providers. The tool, Patient Management Resource, allows providers to see what chronic conditions have been diagnosed for their patients in the past but have not been coded in the past year. For example, a patient came in previously and was diagnosed with asthma, and then comes back in the current measurement period but asthma is not on the claim because he was in for another reason. This missing diagnosis will show up in the Chronic Condition Coding Overview for that patient. The new tool can be found under Profiles and Reports, Efficiency and Quality.

Providers should be sure to they have their BCBS representative show them this information.

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

by Mitch Cohen, MD, FAAP, Chair, UAB Department of Pediatrics

The Pediatric Gastroenterology Division is growing! In addition to increasing our ability to see your general GI patients in a timely manner, we have added new faculty and services in Hepatology and Motility. Our long-standing Hepatology and Transplant Program has grown with the addition this summer of Mike Leonis, MD, PhD (Medical Director of the Pediatric Liver Care Center and the Medical Director of the Pediatric Liver Transplant Program); Mike comes from Cincinnati Children’s. Gillian Noel, MD, also joined us after completing her Advanced Hepatology Training at Emory and her GI fellowship at Colorado Children’s. Along with Jan Nogueira, MD, Drs. Leonis and Noel are the physician members of the Pediatric Liver Care Center and will serve the children of Alabama and the region for evaluation and treatment of liver disease.

Neel Tipnis, MD, Medical Director of the Pediatric Motility and Functional Bowel Diseases Program, joined us in December from the University of Mississippi. Dr. Tipnis has established a new gastrointestinal motility program at Children’s of Alabama, which now includes a full range of diagnostic motility services.

With the addition of these two programs, which complement our existing programs in Inflammatory Bowel Diseases, Eosinophilic Gastrointestinal Disorders, Intestinal Failure and Rehabilitation, and Aerodigestive Diseases, we can now provide specialty consultation for the full range of gastrointestinal, liver and nutritional problems.

Teamwork and partnerships result in multi-disciplinary NCQA PCMH recognition

by David Gremse, MD, FAAP, Chair, USA Department of Pediatrics

The Patient-Centered Medical Home (PCMH) is an approach to providing comprehensive primary care that facilitates partnerships between patients, pediatricians, office staff, and families. One of the goals for the USA Department of Pediatrics over the past two years has been to earn National Committee for Quality Assurance (NCQA) PCMH recognition for our primary care clinics. The goal is to create a patient care and training environment where our medical students are in ambulatory settings that incorporate best practices for patient-centered care, which includes effective use of interprofessional teams for healthcare delivery.

The process was greatly facilitated with the help of the Alabama Chapter-AAP at the USA Pediatric Leadership Alliance workshop, held at the Strada Patient Care Center at USA Children’s and Women’s Hospital in June 2017. This initiative was built on the AAP’s Pediatric Leadership Alliance program with an emphasis placed on leadership techniques for change management to transform a practice into a medical home. We appreciate Natalie Fox’s leadership from USA and Linda Lee’s participation on the planning committee, along with the support of Mary Lou White and Tina Morton from the AAP national office. Drs. Michael Ramsey and J. Wiley were excellent speakers during the sessions.

The NCQA application from USA was expanded to involve 38 providers from the Departments of Family Medicine, Internal Medicine, and Pediatrics. The application was submitted to NCQA last summer. On September 18, 2017, the Family Medicine, General Pediatrics, and Adolescent Medicine Clinics received Level 3 NCQA Recognition, and the Stanton Road Clinic in the Department of Internal Medicine was recognized by NCQA as a Level 2 PCMH. This achievement makes the USA College of Medicine among a select number of medical schools with multi-disciplinary NCQA recognition of all of its primary care departments.

Our thanks to the Alabama Chapter leadership for their support in making this recognition possible.
Chapter begins plans to pilot behavioral health integration in Tuscaloosa

The Alabama Chapter-AAP is in its 4th year as a subgrantee for Project LAUNCH, in partnership with the Alabama Department of Mental Health and the Alabama Partnership for Children. The goal of the project has been to create a shared vision for the wellness of young children that drives coordination of key child-serving systems and the integration of behavioral and physical health services.

Thus far, the Chapter has supported the project through the screening and assessment of young children via the Help Me Grow model by training primary care providers on quality improvement principles and developmental screening and improving referrals to appropriate services. In addition, Reach Out and Read-Alabama has increased the number of practices/clinics with ROR sites in the Tuscaloosa area, which is the pilot county for the five-year, federally funded initiative. This year, the Alabama Chapter-AAP is working with Brian Gannon, MD, FAAP, at University Medical Center in Tuscaloosa, to pilot the streamlined integration of behavioral health services into primary care using care coordination as a cornerstone. The pilot will kick off later in the summer.

The Chapter conducted a survey of members this Winter and found that true integration of mental health and primary care rarely occurs, due to barriers such as payment and lack of resources.

Psychiatric Intake Response Center (PIRC) now open at Children’s of Alabama

A new service at Children’s of Alabama aims to help patients, families and providers better navigate the mental health care system. Children’s and the Anne B. LaRussa Foundation of Hope have established the Psychiatric Intake Response Center (PIRC). The PIRC is located in Children’s Emergency Department and opened March 1. Licensed mental health clinicians via telephone or in person assess a child or teen’s mental, emotional and behavioral needs and recommend the best treatment options.

Anyone with a mental health question or concern regarding a child or adolescent is encouraged to contact the PIRC at 205-638-PIRC (7472).

The PIRC is open seven days a week, year-round from 8 a.m. to 11 p.m.

Benton selected for ABP’s Paul V. Miles Fellowship Award

The American Board of Pediatrics (ABP) has selected Elizabeth (Cason) Benton, MD, FAAP, Associate Professor of Pediatrics at UAB and founding Director of the Alabama Child Health Improvement Alliance (ACHIA), to receive the 2018 Paul V. Miles (PVM) Fellowship Award, given annually to an accomplished mid-career pediatrician dedicated to improving the quality of health care for children.

Mitch B. Cohen, MD, FAAP, Professor and Chair of the Department of Pediatrics at UAB, said Dr. Benton’s skill goes far beyond UAB. “She has not only been instrumental in developing quality improvement initiatives at our institution, but also in fostering a culture of QI in primary care across the state,” he said in his nomination letter. “ACHIA’s QI endeavors have helped shift attitudes toward QI from ‘something required for professional standing’ to a valued component of ‘the way we do business.’”

Each year, the ABP’s PVM Fellow receives an invitation to come to Chapel Hill, NC, to share their ideas, innovations, and enthusiasm for quality improvement with the ABP staff and present Pediatric Grand Rounds at both the University of North Carolina and Duke University medical schools.

“We look forward to Dr. Benton’s presentations,” said Virginia Moyer, MD, MPH, Vice President, Maintenance of Certification and Quality at the ABP. “Her passion and knowledge about building statewide partnerships from the ground up to improve medical care for children will provide a powerful base for interesting conversations and learning.”

Congratulations and well-deserved, Dr. Benton!
Encouraging healthcare offices’ participation in AFIX visits

AFIX – assessment, feedback, incentives and eXchange – is a Center for Disease Control and Prevention (CDC) quality improvement (QI) program whose goal is to assist clinics and health care providers to improve their immunization practices and rates. This program is a research-supported initiative aimed at working collaboratively with providers to increase evidence-based immunization practices that sustain high immunization coverage.

“We recognize at both the national and state level that increasing immunization rates has to be a partnership between immunization programs and health care providers,” stated Cindy Lesinger, director of the Immunization Division at the Alabama Department of Public Health. “We can’t truly assess, gather feedback, and implement changes without working together.”

Immunization staff throughout the state conduct AFIX visits with Vaccines For Children (VFC) providers to help implement the program in Alabama, although it is available to all health care providers who vaccinate children. The AFIX program consists of four components:

- **Assessment** - Generate data reports on vaccination coverage and examine the effectiveness of providers’ immunization delivery practices
- **Feedback** - Share with providers their assessment results, discussing practice procedures and barriers, and collaborate to develop customized QI strategies.
- **Incentives** - Recognize practice accomplishments and make practice-based changes, develop more effective vaccine delivery systems, and improve immunization coverage rates.
- **eXchange** - Provide regular follow-up with providers to monitor their QI progress and offer guidance support.

“The program works best when providers and their staff are truly involved in the visit,” said Ms. Lesinger. “We believe the key to maintaining effective AFIX visits in Alabama is having supportive providers and their staff offer valuable insight and input during visits, and follow up with practical and efficient ideas discussed during AFIX visits.”

All VFC providers are subject to AFIX compliance visits, as part of the enrollment agreement. AFIX is available to vaccine health care providers who are interested in improving their immunization rates. It is important to the VFC program to evaluate program processes and outcomes. Immunization staff are available to assist and support all health care providers by:

- Creating awareness of and knowledge about immunization rates and missed opportunities to vaccinate,
- Motivating providers to incorporate changes into their current practices,
- Introducing new immunization service strategies, and
- Supporting sustained improvements in vaccination delivery services.

For more information on AFIX, visit CDC’s AFIX Web page at https://www.cdc.gov/vaccines/programs/afix/. To schedule an AFIX visit, email the Immunization Division at immunization@adph.state.al.us.

From Medicaid News continued from page 7

Agency is “pivoting” to a new plan of care coordination, enhancing the existing health homes, with a target date of completion of October 1, 2018. He explained that the Agency is developing a new regional plan for case management entities that will have a broader reach than the current Health Homes. These new entities, which would be called Primary Care Case Management (PCCM) entities, would also be responsible for what the maternity contractors do in the current 14 regions. The Health Home regions could change and would likely be smaller.

In this new plan, providers would still be paid fee for service through one claims system at Alabama Medicaid, like they do now, but case management fees would be paid by the entity to the provider.

During the meeting, the medical directors sought feedback from the pediatric leaders on new ways of looking at payment structure to encourage strong care coordination and reward providers for quality care, saying that many of the lessons learned during the formation of the RCOs would be applied here.

Providers would sign agreements to work with the entities but they would not be rigid payment contracts like with the RCOs.

Dr. Moon also stressed that he wants the help of Children’s of Alabama and the USA Children’s & Women’s Hospital to help construct case management guidelines for children with special health care needs and would be working with them. At a subsequent meeting between pediatric leaders and the Medicaid Commissioner, a plan was set in motion for the pediatricians at the children’s hospitals to begin that dialogue with the Medicaid staff.

The Chapter will share more on the PCCM program as it is known.
Chapter Challenge: Reach out to local political candidates NOW on pediatric issues!

At the 15th annual Pediatric Legislative Day, the Alabama Chapter-AAP leadership invited members to take part in our 2018 “Chapter Challenge” to reach out to local candidates for public office on the importance of considering child health in their platforms. We want to extend that challenge to all members across the state and ask for them to make connections between now and the Chapter Spring Meeting, which starts on May 3.

“The goal of this effort is to get pediatricians across the state talking to those running for office about what we consider important for pediatrics, including affordable, high quality health insurance coverage, access to care, healthy eating, safety, early learning, immunizations and much more,” said Nola Ernest, MD, FAAP, Chapter Legislative Chair.

The “Bible” for these visits is the Chapter’s “Blueprint for Child Well-Being” booklet, which can be found on the Chapter website and outlines our priorities for Alabama’s children.

During the visits, which could be done at clinics, local coffee shops or wherever makes the most sense, members can lend their expertise and ideas on helping the candidates position Alabama to lead the nation in support for children.

Afterward, members are asked to respond and let us know how it went.

To “accept the Challenge,” visit www.alaap.org/2018-chapter-challenge.

From Chapter Briefs continued from page 12

AL-AAP Practice Management Association update

By Josie Brooks, PMA Chair

Spring is almost here! Don’t forget to register for the Alabama Chapter-AAP Spring Meeting at the beautiful Grand Hotel in Point Clear/Fairhope. The Practice Management Association will have a booth with lots of great information to take back to your office managers and staff, including details on how they can become members. If your manager is not already a member, please encourage him/her to do so—our Annual Meeting and Practice Management Workshop in September is going to be a full day of wonderful speakers and lots of learning!

Another perk is the PMA group email list, where any and all questions are welcome, from billing to staffing to how to handle any situation in the office setting. This is a great resource!

The Practice Manager Association currently has over 100 members and is going strong.

Monroe recipient of 2018 SSPR Founder’s Award

Congratulations to Kathy Monroe, MD, FAAP, UAB Pediatric Emergency Medicine, who was awarded the 2018 Southern Society for Pediatric Research (SSPR) Founder’s Award. The award is given to a member of SSPR who has made significant contributions to health care of children and SSPR. Congratulations, Dr. Monroe!

Wall and Tofil named to Endowed Chairs in Pediatrics

The University of Alabama at Birmingham Department of Pediatrics has announced that Nancy Tofil, MD, FAAP, UAB Pediatric Critical Care, has been named as the Ann Dial McMillan Endowed Chair in Critical Care Medicine, and Terry Wall, MD, FAAP, UAB Academic General Pediatrics, has been named as the John W. Benton Endowed Chair in Pediatrics.

Kudos, Drs. Tofil and Wall!

Adolescent Medicine Fellow Hill selected to MCHB Trainee Ambassador Group

Samantha Hill, MD, FAAP, second-year UAB Adolescent Medicine fellow and Leadership Education in Adolescent Health trainee, has been selected for the 2018 Maternal and Child Health Bureau Trainee Ambassador Group (TAG). TAG is a national collaborative, comprised of health professionals from MCH training programs around the country. It serves to provide leadership training and networking among participants in all MCH training programs in an effort to increase the MCH workforce.

Congratulations, Dr. Hill!

Walley to receive Becky Trigg Outstanding Woman UAB Faculty Member award

Susan Walley, MD, FAAP, UAB Pediatric Hospital Medicine, has been selected to receive the Becky Trigg Outstanding Woman UAB Faculty Member Award. The award is given by the UAB Commission on the Status of Women to honor women in the UAB and Birmingham community who have mentored and served other women, taken a courageous stance or overcome adversity to achieve a goal.

Well-deserved, Dr. Walley!
Best Practices: Incorporating families into your medical home

By Lauren Morris, MD, FAAP, Chapter Family Engagement Champion

The medical home, as defined by National Committee for Quality Assurance – Patient Centered Medical Home (NCQA-PCHM), is being implemented at some level in many pediatric practices in the state. The goal of a pediatric medical home is to be a home base for the child and family to feel comfortable in the healthcare process. The medical home should be accessible, continuous, comprehensive, coordinated, compassionate and family-oriented. The NCQA guidelines for medical home certification are instructive on how these should be accomplished, with the exception of family involvement.

While family involvement in practices is not mandated for certification, having families involved in the decisions of the practice has shown promise for overall improved patient care and satisfaction. It can be established via family health partnering by creating a family advisory panel that, from the perspective of families, looks at how to improve the experience of the healthcare their child receives. With more competition than ever from urgent care centers, school-based sports physicals and vaccine pop-up clinics, primary care medical home practices need to understand the views of families and patients and their value to the clinic.

The addition of family involvement to patient care can be daunting; how and where do we start? An approach to this can be taken in several small steps with the goal of making changes that are meaningful not only to practices, but the patients and families they serve. The first question is to evaluate if your practice is ready to implement: do you have the staff, both physicians and support staff, who are dedicated to meet with families, listen to their perspectives, and implement the changes decided upon by the practice? Next, you need to evaluate the families you want to be involved in a family advisory panel. Ultimately, the panel should reflect the demographics of your practice and include families from different cultural and ethnic backgrounds and parents of children with chronic illnesses as well as healthy children, which will allow a diverse group to see a “big picture” of how healthcare is provided and where changes can be made to improve. Family advisors offer perspectives not often seen by the staff and physicians.

The creation of a family advisory panel starts with establishing a director of the panel, usually one to two physicians within the practice, a staff coordinator who is able to schedule meetings and help with recruitment and contacting family members on the panel, and the family advisors chosen to be on the panel. The families recruited to the panel should understand the commitment, have a team approach, and be able to offer changes for the greater good of the patient care experience. Family recruitment can begin with patient care surveys sent to families with the option of contact information given so a staff member can contact them to evaluate their interest and level of commitment. Other forms of recruitment can come from suggestion boxes for both staff and patients, with optional contact information provided for further interest. As you add families to the advisory panel, community involvement may also be considered.

Once your panel is set, establish quarterly meetings to identify areas that need to be changed and ways to implement those changes and evaluate progress along the way. Changes are most successful when they are incremental and made over time, with frequent evaluation, so that you can reach the ultimate goal of improving patient care and satisfaction.

While this seems like a daunting task, the perspective of the family can be an eye-opening experience to prompt change in how we as physicians practice. The ultimate goal is to create a complete medical home.

For more information on how to incorporate families in your medical home, visit www.tinyurl.com/NICHQ-Family-Engagement-Guide.
Alabama Chapter
19 S. Jackson St.
Montgomery, AL 36104

Mark Benfield, MD

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

OFFICES in Birmingham, Huntsville and Montgomery

Special Interests of Pediatric Nephrology of Alabama:

Primary Pediatric Nephrology
• Hematuria
• Proteinuria
• Urinary Tract Infections and Reflux
• Enuresis
• Electrolyte Problems
• Kidney Stones

Glomerular Diseases
• Nephrotic Syndrome
• Glomerulonephritis

Hypertension
SLE
Chronic Loss of Kidney Function
Transplantation
Congenital Anomalies of the Kidneys and Urinary Tract
Metabolic Syndrome

1425 Richard Arrington Jr Blvd South Ste 206; Birmingham, Alabama 35205
Phone (205) 558-3200

WWW.PEDNEPHAL.COM