Chapter leadership evaluates member survey results, develops plans to address needs.

Our 2019 member survey results have been analyzed, and we are so thrilled that many of you decided to share your thoughts with the AL-AAP leadership! In total, we had just over 140 respondents. Most importantly, as I promised, this was passed throughout our entire leadership team. We feel that most of the comments centered on the following three areas.

1. Mental health – It is abundantly clear that pediatricians are struggling with mental health. The increasing number of children and adolescents with ADHD, depression, anxiety, and OCD, among others, places more strain on our offices to provide medications, time and resources to care for these time-intensive patients, and to find therapy options in underserved communities in an understaffed system. Furthermore, we are struggling with our own mental health due to issues like this, regulatory and payment burdens, and inefficient technology. Burnout is real and we can’t ignore it. Moving forward, our Board will be looking at our priorities to assure that we are addressing mental health in terms of our CME offerings, projects and other initiatives.

2. Practice management – Many of you expressed that you would like to have more topics related to pediatric practice management at our meetings. Katrina Skinner, MD, FAAP, our vice president, started this in the fall by securing Chip Hart and Dr. Suzanne Berman. Hopefully, as we integrate

April 23-26 are the dates! 2020 Spring Meeting to be held at the new Lodge at Gulf State Park

Are your calendars marked?

The Chapter executive office and our new CME Chair Haidee Custodio, MD, FAAP, are looking forward to our 2020 Spring Meeting, to be held in an exciting and new location at The Lodge at Gulf State Park in Gulf Shores, Ala. Dr. Custodio has developed a fantastic conference agenda, with topics including:

- The Changing Landscape of Autism Spectrum Disorder in Alabama
- Transitions of Care
- Meningococcal Disease and Vaccines
- 15 Hacks to Boost Teen Well Visits: Alabama Pediatricians Reveal Secrets
- Opioid Misuse
- Newborn Screening for Severe Combined Immune Deficiency (SCID): A Review of Our First Year
- HPV Epidemic in Alabama: What can you do to Protect the Next Generation?
- Delivering On Your Practice Culture
- The Business of Immunization: Protecting Kids Without Destroying Your Practice
- Peer-to-Peer Lessons to Move Your Practice Forward
- Life Hacks for the Pediatric Practice

In addition, there will be two industry-sponsored symposia, and plenty of time for networking in a fantastic, state-of-the-art facility overlooking the Gulf of Mexico! Look for more details soon; registration will begin in late January. And for now, scan the QR code for a video featuring the hotel and all it has to offer!

Make plans to attend now – we’ll see you at the beach!
HPV project update

HPV Peer-to-Peer Mentor Project already reaches 43 practices in two short months

Since October 1, the Chapter’s HPV Peer-to-Peer Mentoring project has conducted face-to-face, peer-led visits at 43 pediatric practices across the state! The visits are led by 10 pediatrician “mentors” in Alabama who attended a “train-the-trainer” session at the Annual Meeting in late September.

The initiative is the result of a partnership between the Chapter and the Alabama Department of Public Health Immunization Division to help pediatric practices in Alabama increase rates of up-to-date HPV immunization, thanks to funding from the Centers for Disease Control & Prevention.

The practices selected for this collaborative receive a more robust look at their data, along with a mini-training for their physicians and staff. At this visit, goals are set and then they receive follow-up from their peer mentor and Chapter staff to evaluate progress at two intervals in the next six months. Those pediatricians who are American Board of Pediatrics diplomates will receive 25 Maintenance of Certification Part 4 for participation.

“This program was very effective, immediately. With the approach outlined, along with the statistics they provide, we have had far more success at getting patients to come to the office for this vaccine when we reach out to them,” said Ben Hester, MD, FAAP, of Etowah Pediatrics in Gadsden. “The simplicity and directness of the message used in the patient approach has been very successful. Terming it the ‘HPV Cancer’ vaccine and targeting our nine-year-olds is really working!

Also, having every point of contact the patient has with our office (phone call to schedule, check-in, triage, nurse then provider) mention the “HPV cancer” vaccine gets them ready to discuss and then agree much more easily once they get into the room with the provider. We are even finding this working with some parents who formerly objected.”

The mentors have found it to be a great initiative as well:

“I’m thrilled to be part of this innovative project to decrease HPV cancers in Alabama by improving our vaccination rates. I’ve been using the ‘announce’ method for years, even before the study was done, and it definitely works,” said Pippa Abston, MD, FAAP, of Huntsville.

“This AAP initiative has been effective in helping practices identify HPV administration barriers unique to their individual clinics, while implementing practical solutions to increase their HPV vaccination rates,” added Jaime McKinney, MD, FAAP.

Congratulations to all of these practices who are making great improvements, and kudos to our mentors for helping drive the needle forward! We look forward to sharing more successes over the next nine months.
Chapter’s Opioid Misuse in Pregnant Women Task Force members make headway along policy front

Morissa Ladinsky, MD, FAAP, adolescent and general pediatrics at University of Alabama at Birmingham (UAB), along with Chapter President Wes Stubblefield, MD, FAAP, and Linda Lee, APR, Executive Director, represented the Chapter and its Opioid Misuse in Pregnant Women/NAS Task force at a 1.5-day Leadership Summit on Substance Use in Pregnant Women in November. Over 60 Alabama stakeholders representing healthcare, law enforcement, criminal justice, and human resources were in attendance. The Summit, hosted by the Jefferson County Department of Health (JCDH), aimed to build consensus, review best practices and provide recommendations for short- and long-term actionable programming.

Intentional discussion and consensus-building focused on pregnant women who are subject to the state’s Chemical Endangerment law. Dr. Ladinsky, with physician colleagues from JCDH and UAB, summarized key recommendations in an oral proposal offered recently to the Governor’s Study Group on Criminal Justice Policy.

“We believe these recommendations represent a significant step toward system change so that robust, equitable care for pregnant women and babies is achieved, regardless of where they live in Alabama,” Dr. Ladinsky stressed.

A transcript of the proposal follows:

Substance Use in Pregnant Women: Addressing Challenges Faced by Alabama Families

People with behavioral health conditions, including serious mental illness and substance use disorders including opioid use disorders, are overrepresented in Alabama’s criminal justice system. Pregnant women with substance use disorders pose further challenges to the overburdened system by utilizing exponentially more jail/prison healthcare funding to ensure the safety of both mother and child.

Illinois and Fulton County, Georgia are among entities addressing this legislatively with successful jail diversion and law enforcement deflection initiatives. 1,2,3

In response, we propose:

1) Determine, by first appearance before a Magistrate or Judge (ideally within 48 hours), if any criminally detained woman of childbearing age is pregnant.

2) Create pathways to divert pregnant women facing non-violent offenses, including chemical endangerment offenses, away from incarceration.

3) Create minimum standards for diversion developed jointly by the Office of Prosecution Services in collaboration with the Administrative Office of Courts, the Alabama Department of Mental Health, Alabama Department of Human Resources, the Alabama Department of Public Health and supported by consumer representation.

4) Incorporate best-practice data-driven statewide standards for such pre-arrest and pre-trial diversion pathways for pregnant women, utilizing partnership networks of peer support, child welfare, Family Drug Courts, behavioral health and addiction treatment services.

5) Appropriate additional funding to the Alabama Department of Mental Health for - (a) a minimum of 32 additional substance use disorder treatment beds with priority access for pregnant women, and (b) additional peer recovery support resources for this vulnerable population. (Note - Supplemental treatment resources are necessary for the expansion of pre-arrest pre-trial diversion, or Drug Courts to be successful across the state.)

References

1 Atlanta/Fulton County Pre Arrest Diversion Initiatives, www.prearrestdiversion.org


ALABAMA CHAPTER-AAP
2019 MEMBER SURVEY FINDINGS

BIGGEST CHALLENGES ALABAMA PEDIATRICIANS FACE*:
- 24% Mental Health Issues in Children, Adolescents
- 24% Reimbursement/Payor Bureaucracy
- 20% Lack of Time/Burn-Out
- 20% Consumerism vs. Good Medicine

*From open-ended comments

TOPICS/PROJECT AREAS MOST IMPORTANT TO THEM AS PEDIATRICIANS

TOP FIVE RESPONSES
- Mental Health: 44.25%
- Access to Care: 35.25%
- Obesity: 22.55%
- Vaccines: 22.33%
- Community Pediatrics: 21.31%

TOP THREE RESPONSES
- Mental Health: 64.54%
- Payor Issues/Medicaid: 34.75%
- Telemedicine: 32.62%

SURVEY RESULTS BASED ON RESPONSES FROM 142 MEMBERS OF THE ALABAMA CHAPTER-AMERICAN ACADEMY OF PEDIATRICS. SPRING 2019
WWW.ALAAP.ORG
Alabama Project ECHO: Pediatric Diabetes & Obesity announces new cycle of sessions beginning February 7, 2020

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 co-morbidities. What can we do to stop this cycle?

The University of Alabama at Birmingham Department of Pediatrics and Children’s of Alabama are 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? Anyone looking to advance their knowledge in pediatric diabetes and obesity, including pediatricians, family physicians, PAs, nurse practitioners, nurses and MAs, are welcome to participate.

Our team consists of Giovanna Beauchamp, MD, Assistant Professor of Pediatric Endocrinology, Gail Mick, MD, Professor of Pediatric Endocrinology, and Michelle Coulter, CRNP, Pediatric Endocrinology Nurse Practitioner and Project Coordinator.

The program includes videoconferencing sessions held in blocks of four mini sessions occurring from February 7 to November 2020. Each mini session consists of four bimonthly videoconferences (1st and 3rd Fridays of the month) from noon to 1 p.m. Mini Session 1 will address Type 2 diabetes and metabolic syndrome; Mini Session 2 will address obesity; Mini Session 3 will address comorbidities of Type 2 diabetes and obesity; and Mini Session 4 will address Type 1 diabetes.

Participants will need a smartphone, tablet, or PC to participate. The Zoom software will be provided at no cost.

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

Display posters, promote the 2020 Census to families

The message is “count ALL kids – wherever they are on April 1”

By now, you should have received your “Whose Child is Missing?” posters from the Chapter to display in your office or clinic regarding the 2020 Census and the importance of families counting all of their children.

As you now know, the Alabama Chapter-AAP is part of a large, statewide push to promote complete counting of Alabamians, particularly young children, in the 2020 Census, which takes place in March/April 2020. Families of young children are being targeted due to previous undercounting of children from birth to 5 years of age in the 2010 Census.

One important point to note is that whoever the child is living with on April 1, 2020 (whether it is his or her permanent guardian or not) is the person who should count that child on his/her census form. Please be on the lookout for more resources we will be sending your way soon that you can use to get the message out to your families. We encourage your practice to think outside the box in order to promote this to families – you can host a promotional event for it, use your practice’s social media, or conduct interviews with the media about the importance. The sky’s the limit!

Don’t forget: you can order more posters (in five languages!) at this link: https://www.alaap.org/census-2020-poster-order-form.
Alabama Marijuana Education Campaign: Necessary Information for a Needed Conversation

By Shannon Murphy, MD, FAAP, a pediatrician in Birmingham and board member, National Families in Action

In August, the Surgeon General of the United States, Dr. Jerome Adams, issued an advisory on the health harms of marijuana, stating that there was no safe level of marijuana use in adolescents and pregnant women and urging the nation to prioritize education on the topic.1 This advisory came on the heels of national data showing an increase in marijuana use for those 12 and above over the past several years, with much of the increase seen in young adults aged 18-25.1

Although the science is unfolding on the health impacts related to marijuana use, current data detailing acute and chronic effects of marijuana is concerning. The National Institute of Drug Abuse warns of serious health effects including addiction, cognitive deficits impacting IQ, increased risk of mental health disorders including psychosis, and an increased risk for the development of schizophrenia, particularly for those with a genetic vulnerability.1 Youth and young adults still undergoing brain development are particularly susceptible to these effects.4

The marijuana of today resembles nothing of the marijuana from years ago. New products such as edibles as well as high-potency THC concentrates dominate the retail market in some states. In Colorado, poisonings secondary to marijuana ingestion have increased among children, and a 2017 analysis showed that marijuana-related emergency room evaluations for adolescents increased four-fold during the years corresponding to changes in state marijuana policies that facilitated widespread access.5,6

Despite the abundance of scientific evidence demonstrating the potential for significant health risks associated with marijuana use, there is a paucity of factual messaging available to our communities. In fact, much of the messaging related to marijuana is fueled by inaccuracy and frequently pushed by advocates and an industry whose main goals are to minimize risks much like the days of tobacco years ago. This lack of consistent, factual information has an impact. The Substance Abuse and Mental Health Services Administration, as an example, notes a decrease in perception of risk associated with marijuana use.7 Unfortunately, years of data from our nation’s annual Monitoring the Future Survey show that decreases in perception of harm are linked with subsequent increases in use.8

Recognizing these concerns, prevention specialists from around the state of Alabama have embarked on a marijuana health education campaign. Collaborating with key stakeholders within the community, this team has identified several content areas within which to focus. These areas include information on addiction, academic and cognitive impact, mental health impact, as well as workplace and highway safety. Messaging has been developed with the goal of promoting consistent, science-based information that reaches all of our Alabama communities.

In 2015, the American Academy of Pediatrics issued its second policy statement on marijuana “reaffirming [its] opposition to legalization of marijuana.”9 The authors noted, “Just the campaigns to legalize marijuana can have the effect of persuading adolescents that marijuana is not dangerous, which can have a devastating impact on their lifelong health and development.”9 Since then, the push to market and commercialize marijuana has grown simultaneously with an increase in the understanding of both the harmful cognitive and neuropsychiatric effects associated with use. Education has never been more important.

Let’s join in and take the lead on this crucial conversation. It’s time to stop this emerging public health crisis in its tracks.

References
Reach Out and Read All About It!

By Salina Taylor, Development and Communications Coordinator

Only a few weeks left in the Reach Out and Read-Alabama end-of-year campaign.

A book is just the beginning. You are helping to build foundations for success in Alabama’s children with your support of Reach Out and Read-Alabama. We believe all families should have the tools and information they need to make reading aloud a daily routine. We help integrate reading into pediatric practices, advise families about the importance of reading with their children, and share books that serve as a catalyst for healthy childhood development.

Can Alabama’s families count on you with your commitment of $50 a month ($600 annually) to help families form lasting connections and children learn new skills that serve them well throughout their lives?

If you haven’t made your contribution yet, please donate online at [https://bit.ly/2kqA8lm](https://bit.ly/2kqA8lm) today!

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Clayne Crawford Foundation chooses Reach Out and Read-Alabama as the first Pig Out 2020 partner

Reach Out and Read shares the power of reading with families of all backgrounds and economic means, helping them make reading a part of their daily lives. This creates a ripple effect throughout our communities, which is exactly what the Clayne Crawford Foundation challenges their friends to do—make waves of change no matter where they live.

“This year, we are partnering with local charities focused on the future and aiding the children of the Southeast. Our first beneficiary on the list is Reach Out and Read-Alabama,” said Kiki Crawford, wife of actor and foundation head Clayne Crawford. “With our first grandchild, Clayne and I are even more excited to help ALL of Alabama’s children benefit from reading together with their parents AND grandparents every day.”

The campaign kicked off in November with an event at Kendra Scott at The Summit, raising more than $1,000 for Reach Out and Read-Alabama.

Thank you, Clayne Crawford Foundation!

Children’s of Alabama pediatric sites join Reach Out and Read-Alabama

Midtown Pediatrics officially kicked off their Reach Out and Read program with a fun, Dr. Seuss-themed event on November 21 with guest readers Erica Williams, Director of Educational Advancement from the office of Mayor Randall Woodfin, and Candice Hardy, Outreach Librarian of the Birmingham Public Library.

“We at Midtown Pediatrics are thrilled to now be part of the amazing work of Reach Out and Read-Alabama. We are always looking for opportunities to stress the importance of early literacy to families at our check-ups,” said Amy McCollum, MD, FAAP, medical coordinator of Reach Out and Read-Alabama at Midtown. “The books provide a wonderful bonding experience in the office between the caregiver, child and physician, and serve as a tangible reminder to families of the importance of spending time reading together with our children. We are excited for the opportunity to kick off this excellent program and are grateful to our community supporters who are helping make this happen in our clinic.”

In addition to the Children’s of Alabama Midtown clinic, providers at Pell City Pediatrics, Pediatrics West in Bessemer and Pediatrics West-McAdory are excited to provide families with the understanding and tools they need to make reading and storytelling part of their daily routines through the program.

Reach Out and Read-Alabama attends National Conference in Boston

As part of the ROR 30th Anniversary Celebration in Boston, our statewide program coordinator, Polly McClure, RPh, was invited to attend the “Next Chapter” Forum prior to the meeting. The goals of the forum were to bring together leaders in early childhood development who are focused on the promotion of positive, language-rich, parent-child interactions through pediatric primary care and to set the stage for discussion that will generate new and practical solutions to the challenges of making Reach Out and Read a standard of care.

A highlight of the forum was a presentation by David Willis, MD, FAAP, Senior Fellow, Center for Study of Social Policy, which documented the findings of their Pediatrics Supporting Parents (PSP) initiative to support partnerships between pediatric primary care providers and parents to promote the social and emotional development of young children. The CSSP team demonstrated that this relationship requires three overarching common practices: nurture of parents’ competence and confidence, connection of families to additional supports, and development of a care team and clinic infrastructure and culture.

Reach Out and Read was one of 13 programs selected from a field of 70 to be included in this study, which is designed to identify common practices across evidence-based programs operating within pediatric primary care.

The strength of the Reach Out and Read Nationwide Network is mentioned in this report as a means of supporting medical clinics in promoting nurturing parent-child relationships. To read the full report, visit https://bit.ly/34gvSFy. Reach Out and Read-Alabama is part of a network of 6,000 clinics across the US that serve nearly 5 million children and their families.

For more information about implementing a Reach Out and Read program in your practice, contact Polly McClure, RPh, at pmclure@roralabama.org or 205-223-0097.
Six UAB divisions begin institutional memberships in AAP and AL-AAP

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

On Oct. 1, six divisions (Academic General Pediatrics, Adolescent Medicine, Child Abuse Pediatrics, Developmental and Behavioral Pediatrics, Hospital Medicine and Rehabilitation Medicine) of the Department of Pediatrics became “institutional members” of the AAP.

This means that every member of these divisions (48 faculty) are members of the AAP and the Alabama Chapter of the AAP. Not only does this demonstrate our strong support for the work of the Academy and Alabama Chapter, but it also provides an opportunity for local and national engagement and leadership on issues critical to Alabama’s children.

Currently a number of faculty from Children’s of Alabama and the Department of Pediatrics serve in leadership roles for the Academy at the national level. These include:

David Kimberlin, MD, FAAP, Editor of the Red Book
Stephanie Wallace, MD, MSPH, FAAP, Committee on Adolescence

Tamera Coyne-Beasley, MD, MPH, FAAP, Committee on Pediatric Research
Myriam Peralta-Carcelen MD, MPH, FAAP, Developmental & Behavioral Pediatrics: Executive Committee
Dan Feig, MD, FAAP, Nephrology: Executive Committee
Mike Chen, MD, FAAP, Surgery: Executive Committee
Elizabeth Beierle, MD, FAAP, Surgery: Executive Committee
Susan Chu Walley, MD, FAAP, Tobacco Control: Executive Committee, Chair
David B. Joseph, MD, FAAP, Urology: Executive Committee
Mitchell Cohen, MD, FAAP, GI, Hepatology & Nutrition: Executive Committee, Chair

In addition, a number of faculty are currently involved in the Alabama Chapter, including:

Cassie Smola, MD, FAAP, Pediatric Residency Program Faculty Representative
Cason Benton, MD, FAAP, ACHIA Medical Director
Kathy Monroe, MD, FAAP, Injury Prevention Committee
Justin Schwartz, MD, FAAP, Early Childhood Champion

We welcome our continuing partnership with the AAP and the Alabama Chapter of the AAP.

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Upcoming online E/M CPT codes for 2020

by Lynn Abernathy Brown, CPC

Providers have been discussing ways to code for digital visits, especially with increased patient portal use in EMRs. CPT is introducing new codes effective 01/01/2020 for evaluation and management services online. These codes will replace 99444 Non-Face-to-Face Online Medical Evaluation, which will be deleted. Payors may or may not respond to coverage of these codes initially.

The new codes for 2020 for online patient-initiated, established patient E/M services are:

- 99421 Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 5-10 minutes
  - 99422 (11-20 minutes), 99423 (21 or more minutes)
- 98970 Qualified nonphysician health care professional online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days. [eg, speech-language, pathologists, physical therapists, occupational therapists, social workers, dieticians]; 5-10 minutes
  - 98971 (11-20 minutes), 98972 (21 or more minutes)

Per CPT guidelines, these codes are for evaluation and management purposes, not for non-evaluative electronic communication of test results, scheduling of appointments, or other communication that does not include E/M. Detailed guidelines are in the CPT book preceding the new codes.

Looking ahead to 2021, there will be a dramatic change in documentation guidelines for Evaluation and Management codes. EMR templates and documentation macros or forms may need to be reviewed when CMS E/M guidelines update on 01/1/2021. Watch for webinars and coding updates, such as the recent November PMA webinar available on demand on the Chapter website at https://www.alapa.org/ondemand-trainings.

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.
Early Career Spotlight: Katie Wolter, MD, FAAP

*By Nola Jean Ernest, MD, PhD, FAAP, Chapter Early Career Pediatrician Representative*

One of the biggest contributors to burnout in pediatrics is knowing that our patients are often faced with situations over which we have no control, even if those situations impact their health. One such situation is food insecurity, a common problem for families in poverty or living in food deserts. We all know the health impacts of food insecurity, but what is a pediatrician to do about it?

One Alabama early career pediatrician has found a creative way to tackle this problem. In 2016, Katie Wolter, MD, FAAP, a pediatrician at Pediatric Associates of Auburn, teamed up with Beth Hornsby, a Lee County farmer, to found Nourish, AL, a non-profit organization that provides fresh produce to food-insecure families.

“In our community alone, one in four children doesn’t know where his or her next meal will come from,” Dr. Wolter said.

The nurses at Pediatric Associates help identify families that would benefit from assistance and, since dispensing its first baskets in 2016, Nourish has delivered over 70,000 pounds of food into the pantries of families across the Auburn-Opelika area.

“Our goal is that these families will eventually reach a place financially where they don’t need assistance, but as long as they’re using the food, there’s no time limit on Nourish,” Dr. Wolter added.

In addition to the weekly distribution of fresh foods, Nourish also works to meet other financial needs of patients, including helping with school supplies and Christmas gifts. In order to maintain the program, Nourish holds an annual fundraising dinner. In addition, Dr. Wolter recently launched a branch of Nourish, AL called Nourish Blooms. She grows, arranges and sells cut flowers, and the proceeds go directly to fund other Nourish projects.

A graduate of Florida State University College of Medicine and the Orlando Health Pediatric Residency program, Dr. Wolter is also a mother to six sons. In addition to spending time with her family and expanding the future reach of Nourish, Dr. Wolter is also interested in expanding local resources to breastfeeding mothers.

A committed advocate for Alabama’s children and an inspiration to us all, we are grateful that Dr. Wolter is a pediatrician in Alabama!

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From Departments of Pediatrics continued from page 10

USA Pediatrics hosts inaugural diversity dinner

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

The USA Department of Pediatrics congratulates Myria Mack-Williams, MD, FAAP, and Haidee Custodio, MD, FAAP, for organizing the Department’s inaugural diversity dinner, “Celebrating Cultural Diversity” in Mobile on Dec. 11. La’Tasha Williams, our Pediatric Residency Program Coordinator, was also instrumental in planning the event.

Dr. Mack-Williams conceived of the event after a survey of the residents found gaps in understanding of cultural norms among patients and staff. Organizing a gathering that allows all to showcase their cultural traditions outside of work increases awareness and respect of our uniqueness.

Dr. Custodio added that the event was an opportunity to “celebrate our similarities and differences.” The countries represented in the program included Bangladesh, Belgium, Colombia, Cuba, Dominica, Guatemala, India, Ireland, Israel, Kuwait, Lebanon, Nepal, Netherlands, Nigeria, Pakistan, Philippines, Puerto Rico, Qatar, Romania, Syria, Thailand, and the United States. Attendees dressed in their cultural attire and feasted on a buffet of international cuisine with recipes from around the world.

I join in the excitement of our residents and staff who benefit from the fellowship provided to increase their awareness and respect for others they encounter within and outside their professional roles to improve the delivery of culturally competent care.
You have the power to reduce the incidence of human papillomavirus (HPV) cancers and pre-cancers among patients in your care. **HPV cancer prevention starts with you.**

Make it your goal for every patient you care for to be vaccinated against HPV before the age of 13. Every member of a practice plays a critical role in advocating for HPV vaccination as cancer prevention and should work together as a team.

**TAKE THESE ACTIONS TO INCREASE HPV VACCINATION WITHIN YOUR PRACTICE TODAY.**

- **Make a presumptive recommendation**
  Your recommendation is the #1 reason parents choose to vaccinate their children.

- **Answer parents’ questions**
  Let parents know the vaccine is safe, effective and prevents cancers.

- **Minimize missed opportunities**
  Use every opportunity to vaccinate and keep patients up-to-date. Use EHR prompts to help.

- **Take the team approach**
  Empower every member of the team to be a HPV vaccination champion. Provide in-service training. Discuss vaccination status at huddles. Practice messaging “HPV vaccination is cancer prevention.”

- **Evaluate and sustain success**
  Implement quality improvement strategies to drive up HPV vaccination rates to be on par with your Tdap and MenACWY rates.
QI Update

Enroll now in Best Beginnings QI Collaborative to begin in January!

The ACHIA Best Beginnings Collaborative kicks off in January and runs through September 2020. Participating pediatricians will be able to choose the one screening that they want to work on, by either improving their current screening process or integrating a new screener, including:

- Development
- Autism
- Social Emotional
- Postpartum Depression

Specifically, the collaborative will focus on closing referral gaps, which are so important to comprehensive care for these children. As usual, the collaborative is worth 25 points American Board of Pediatrics Maintenance of Certification Part 4.

Hurry to enroll! Email Linda Champion at lchampion@alaap.org.

What is new in Early Screening Guidelines?

Updated early screening guidelines included in the Best Beginnings collaborative

Updated early screening guidelines for development, autism, social-emotional concerns, and postpartum depression are scheduled for release this month and in January. Changes include integrated algorithms for developmental, autism and motor screening. The surveillance definition is refined, and medical testing recommendations are expanded. Additional changes not only include heightened surveillance at the four- to five-year-old visit, but also encourage providers to work with childcare and early childhood professionals to incorporate insights into surveillance.

Benefits of QI collaboratives and why most Alabama pediatricians participate

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

The recommendations for preventive pediatric healthcare continue to expand while the standard well visit length has not. Integrating new processes, such as an autism or postpartum depression screen, is challenging. Few of us have the time or resources to seek information from content experts, establish new community connections to address screen results, train staff and providers on best practices, or develop measures to track improvement over time.

Fortunately, the Alabama Child Health Improvement Alliance (ACHIA) supports practices interested in improving patient outcomes by developing QI collaboratives that address all of these components essential to sustained improvement. To date, about half of Alabama’s pediatricians have chosen to jump-start improvements by working in collaboratives.

“QI collaboratives allow not only access to content experts but also to other practices about what they are doing, which helps to improve your processes in your practice,” said Elizabeth Dawson, MD, FAAP, Chapter QI Chair and a pediatrician at Charles Henderson Child Health Center in Troy. “By learning together as a group, we are not only able to share our expertise, but we are also able to share our successes and failures.”

Lamenda Blakeney, MD, FAAP, of Partners in Pediatrics in Montgomery, echoes Dr. Dawson’s comments. “It’s a good way to see how other practices implement the same strategies in their offices. The data collection is helpful in determining if we are making the right changes to our processes,” Dr. Blakeney continues. “The materials provided through the collaboratives and the evidence-based information given to share with our families are great assets to our practice.”

While improving patient outcomes, collaborative work aligns with other practice necessities such as completing Maintenance of Certification for the American Board of Pediatrics, CME for state licensing, and required components for the Patient-Centered Medical Home.
Thirty-three Chapter members named Favorite Kids’ Docs for 2019 by Birmingham Parent Magazine

Congratulations to a LONG list of Chapter members and other pediatricians for being nominated for the Birmingham Parent Magazine Favorite Kids’ Docs 2019. They were nominated by local readers and parents in the Birmingham community. Thank you for your dedication to your patients and commitment to quality health care for all children! Kudos to these members:

Abby Allen, MD, FAAP, Pediatrics West
Toren Anderson, MD, FAAP, Greenvale Pediatrics
Allury Arora, MD, FAAP, Urgent Care for Children
Sheridyn Breedlove, MD, FAAP, Acton Road Pediatrics
Daniel Carter, MD, FAAP, Greenvale Pediatrics
Rekha Chadalawada, MD, FAAP, Sylacauga Pediatrics
John Cortopassi, MD, FAAP, Greenvale Pediatrics
Betsy Crum, MD, FAAP, Vestavia Pediatrics
Delinda Davis, MD, FAAP, Tots & Teens
Julie Dennis, MD, FAAP, Over the Mountain Pediatrics
Brian Dudgeon, MD, FAAP, Greenvale Pediatrics
Patrick Farr, MD, FAAP, Birmingham Pediatrics
Rosemary Faust, MD, FAAP, Eastern Health Center
Liesel French, MD, FAAP, Birmingham Pediatrics
Stacey Gilbert, MD, FAAP, Mayfair Medical Group
Teresa Goldsmith, MD, FAAP, Birmingham Pediatrics
Judy Habeeb, MD, FAAP, Mayfair Medical Group
Max Hale, MD, FAAP, Birmingham Pediatrics
Phillip Harmon, MD, FAAP, Children’s Pediatrics, Deerfoot
Elizabeth Iorns, MD, FAAP, Greenvale Pediatrics
Robert Levin, MD, FAAP, Alabama Pediatrics
Alison McAfee, MD, FAAP, Acton Road Pediatrics
Andrew McCown, MD, FAAP, Southlake Pediatrics
Jamie Powell, MD, FAAP, Mayfair Medical Group
Charlotte Prejean, MD, FAAP, Pediatrics West
Angela Redmond, MD, FAAP, Pediatrics East
Fadel Savany, MD, FAAP, North Jefferson Pediatrics
Julia Stewart, MD, FAAP, Greenvale Pediatrics
Richard Stone, MD, FAAP, Vestavia Pediatrics
Tracy Tindle, MD, FAAP, Children’s Medical Group
Ryan Walley, MD, FAAP, Redmont Pediatrics
Garland Youngblood, MD, FAAP, Pediatrics East

Nichols to receive 2020 Pediatric Educator Award from the Southern Society for Pediatric Research

Michele Nichols, MD, FAAP, Pediatric Emergency Medicine at University of Alabama at Birmingham, will receive the 2020 Pediatric Educator Award from the Southern Society for Pediatric Research (SSPR). According to the SSPR nominating committee, this award recognizes an outstanding pediatric educator in pediatric medicine who is widely recognized for his or her stimulation of pre- and post-doctoral students in the care of children, contributed to the development and administration of programs and curricula for pediatric learners and parents, and recognized as a role model as a pediatric educator. Dr. Nichols will receive this award at the 2020 SSPR Meeting in New Orleans in February.

Congratulations, Dr. Nichols!
Alabama Coordinated Health Network (ACHN) update for providers

As you know, the Alabama Coordinated Health Network (ACHN) launched on October 1, 2019 in seven regions of Alabama. To view a listing of the regions with contact information, visit: https://bit.ly/38NB8Eu. An interactive map is also available for recipients at: https://bit.ly/35svMwc.

Below are two key items that providers should be aware of within the ACHN Program:

Referrals

PCP to PCP referrals are not required. Early Periodic Screening, Diagnosis, and Treatment (EPSDT) referrals will continue to be required. Use Form 362 to complete EPSDT referrals. Form 362 has been updated and is available on the Medicaid website. More information on PCP referrals to specialists can be found in Chapter 40 of the Provider Billing Manual.

BMI

Effective October 1, 2019, a BMI must be appended to all claims for providers who bill procedure codes 99201-99205, 99211-99215, and 99241-99245. EPSDT procedure codes 99382-99385 and 99392-99395 must also include a BMI diagnosis on the claim or the claim will be denied. Plan First claims must include a BMI diagnosis, or the claim will be denied. Pregnant women with a pregnancy diagnosis code are excluded from the BMI requirement.

For Pediatric BMI reporting: The same BMI code may be appended to the claim until the next well-child check (where a BMI is typically determined) unless the physician considers the clinical need for a BMI redetermination sooner than the next well-child check.

For ACHN information and online training for providers, please visit https://bit.ly/2YXMYaj.

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Author Disclosure

None
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